

DATE:

PERSON'S NAME

New York City Department of Small Business Services
Avenue NYC
110William Street, 7thFloor
New York, New York 10038

Re: NYC DSBS _____ CONTRACT

Dear PERSON'S NAME:

This is to advise you that _____ does not own or plan to own, operate, or lease any automotive vehicle during the term of the above described agreement with the NYC Department of Small Business Services for utilization under this contract.

The corporation is requesting a waiver of the provision relating to the automobile Insurance coverage.

Sincerely,