NEW YORK CITY DOT

Department of Transportation

PERMITTEE REGISTRATION APPLICATION

Permittee Number (Official Use Only)

Rev. 9/15/10

SECTION A: Applicant Information

1. Name:_____

AKA:_____

2. Tax I.D. Number (E.I.N) or Social Security Number:_____

3. Address (Post Office Box Not Accepted):_____

4. City:_____ State:_____ Zip:_____

5. Tel #:(_____)_____-_____ 6. Fax #:(_____)_____-_____

7. 24-Hour Emergency Telephone Number (Must be able to make immediate contact): (_____)_____-_____

8. E-Mail:_____

SECTION B: Applicable License Number(s)

	Name of Company on License:
Consumer Affairs:_____	
Sign Hanger:_____	
Master Rigger:_____	
* Plumber:_____	

*** NOTE: NYCDOT will only issue permits in the name of the licensed plumber or the company name as shown on the Department of Buildings Plumbers License (Must attach a copy of the license). If the company name being registered is NOT the same as above, you will not be issued and water/sewer permits by NYCDOT.**

SECTION C: Category of Work Performed (Check All That Apply)

☐ General Contractor ☐ Government Contractor ☐ Authority Contractor ☐ Sidewalk Contractor ☐ Crane

☐ Commercial Refuse Container: BIC License or Registration Number:_____

☐ Other (Identify):_____

SECTION D: Work in Borough (Check All That Apply)

In what Borough(s) will you be working? ☐ Manhattan ☐ Brooklyn ☐ Queens ☐ Bronx ☐ Staten Island

SECTION E: Authorized Representatives to Obtain Permits - USE REVERSE FOR ADDITIONAL ENTRIES

Name	Affiliation	Telephone

SECTION F: Company Officers / Directors / Managing Agents / etc. (NAME AT LEAST 2) - USE REVERSE FOR ADDITIONAL ENTRIES

Name	Title

SECTION G: Designated Representative(s) to Accept Service of Summons at Your Business Office (NAME AT LEAST 2)

Name	Name

SECTION H: Signature of Company Officer

Company Official:_____ Title:_____
(Please Print)

Signature:_____ Date:_____/_____/_____

THIS FORM MUST BE NOTARIZED

County of _____ State of New York,

On the _____ of _____, before me personally came _____

to me known to be the individual described in and who executed the foregoing instrument, and acknowledged that _____

executed the same.

(For Official Use Only)

Approval by:		Date:	/ /

SECTION E: Authorized Representatives to Obtain Permits (ADDITIONAL ENTRIES)

Name	Affiliation	Telephone No.