



REPRESENTATIVE REGISTRATION FORM

Name* _____

Company Name (if applicable)* _____

Street Address* (P. O. Box not acceptable)

Telephone* _____ Cell Phone _____

Fax _____ E-mail* _____

*Required

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1. Applicant must provide photo ID along with application for registration.
 2. Pursuant to §5-15(c) of the OATH Rules, registered representatives are required to notify OATH within ten (10) business days of any changes in the information provided in this registration form.

I, _____ agree that by registering with OATH I am certifying that I am authorized to appear on behalf of respondents and to represent them for all purposes at the division of OATH that holds hearings on Taxi and Vehicle For Hire cases, unless limited by authorization on file. I further certify that I will comply with provisions of the OATH Rules and all other rules and regulations pertaining to my representation of respondents at this OATH division. I understand that failure to comply with such rules and regulations may result in revocation or suspension of my registration and the right to represent parties at this division of OATH.

Signature

For office use only

Representative ID No.: _____

Customer Service Clerk: _____