

The City of New York BUSINESS INTEGRITY COMMISSION 100 Church Street · 20th Floor New York · New York 10007 Tel. (212) 437-0500 · Fax (646) 500-7096

## **INSTRUCTIONS**

## CLASS B PHOTO IDENTIFICATION APPLICATION

#### PLEASE READ THESE INSTRUCTIONS AND ALL QUESTIONS CAREFULLY AS THE APPLICATION HAS RECENTLY BEEN REVISED

Attached is the application for a Class B photo identification card. All questions must be answered completely. If a question is not applicable, write "not applicable" or "N.A." Applications that have not been completed properly will not be accepted and will be returned to the applicant without being processed. An application returned as incomplete will not be deemed submitted.

## DOCUMENTS TO BE SUBMITTED

In addition to the application form, a number of documents must be submitted to the Commission in order for the application to be considered.

- Class B Photo Identification Application and Notarized Certification, signed and notarized
- **For Fulton Fish Market employees only** A Blank Access Control Card (photo identification card) must be obtained from your employer and submitted with this application for processing.
- <u>All other public wholesale markets</u> Photo identification cards will be issued by the Commission.

- All Class B photo identification applications must be submitted with a certified check or money order in the amount of \$100 (one hundred dollars) made payable to the "New York City Business Integrity Commission."
- The individual <u>must provide a clear copy</u> of one of the following:
  - A valid State Driver's License and/or a Non-Driver's License
  - IDNYC Card
  - Birth Certificate
  - Naturalization Certificate or Passport
- If you are employed as a <u>Driver</u>, you must provide a clear copy of your state driver's license.
  For all drivers whose driver's licenses are not issued by New York State, you <u>must</u> provide an official driving record (abstract) for the state of issuance.

## ALL FEES ARE NON-REFUNDABLE

# THE APPLICANT MUST SUBMIT AN ORIGINAL COPY OF THE APPLICATION AND ALL DOCUMENTS.

## APPLICATIONS SUBMITTED INCOMPLETE WILL NOT BE PROCESSED AND WILL BE RETURNED TO APPLICANT.

## NOTE: REQUEST(S) TO WITHDRAW AN APPLICATION WILL BE EVALUATED ON A CASE-BY-CASE BASIS AND WILL NOT NECESSARILY BE APPROVED.

#### All applications must be submitted to a BIC market agent.

To schedule an appointment for pickup you must contact BIC Licensing at 212-437-0555.

If you have any questions about this application, please call 212-437-0500.



The City of New York BUSINESS INTEGRITY COMMISSION 100 Church Street · 20th Floor New York · New York 10007 Tel. (212) 437-0500 · Fax (646) 500-7096

# CLASS B

## PHOTO IDENTIFICATION APPLICATION

OFFICE USE ONLY		
APPLICATION #:	DATE RECEIVED:	
	_ RECEIVED BY:	
*1. Name of the applicant (first, middle, and last), include		
*2. List all aliases, nicknames, maiden name, or any oth		
*3. Home Address:		
*4. Date of Birth:	*5. Social Security Number:	
*6. Home telephone number(s):	*7. Cellular Number:	
*8. E-mail Address:		
*9. Name of the applicant's employer:		

\* (Asterisk) denotes material information on the application. Any material change in the information shall be reported to the Business Integrity Commission, in a notarized writing, within ten (10) calendar days thereof.

Tax ID or SSN: \_\_\_\_\_

Page \_\_\_\_\_ of Pages \_\_\_\_\_

#### \*10. Position with the employer:

Since (date)

11. Which form of identification will you provide? (such as a driver's license, non-driver's license, passport, or other government issued identification).

Name of Agency	Identification Number	Status (Current, Expired, Revoked, Suspended)

\*12. Have you ever knowingly associated with a person connected to, or reputed to be connected to, organized crime? \_\_\_\_\_ Yes \_\_\_\_\_ No

If "yes," explain:

Tax ID or SSN: \_\_\_\_\_

#### CERTIFICATION

#### This certification must be completed by the applicant before a notary public.

ANY MATERIAL FALSE STATEMENT OR OMISSION MADE IN CONNECTION WITH THIS APPLICATION IS SUFFICIENT CAUSE FOR DENIAL OR REVOCATION OF A CLASS A OR CLASS B PHOTO IDENTIFICATION, THEREBY PRECLUDING THE APPLICANT FROM EMPLOYMENT IN THE CITY'S PUBLIC WHOLESALE MARKETS. IN ADDITION, SUCH FALSE SUBMISSION MAY SUBJECT THE PERSON AND/OR ENTITY MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.

I,\_\_\_\_\_

\_\_\_\_\_, being duly sworn, state: that (Applicant Name)

I have read and understood the questions contained in the attached application and its attachments, which consists of \_\_\_\_\_pages; and to the best of my knowledge the information given in response to each question and in the attachment is full, complete and truthful; that the New York City Business Integrity Commission and the New York City Department of Investigation may, by any means they or each of them deem appropriate, determine the accuracy and truth of the statements made in this application; and that all the information submitted is for the express purpose of inducing the Business Integrity Commission to issue the applicant a Class A or Class B Photo Identification to work in the City's public wholesale markets.

(Signature of Applicant)

Sworn to before me

this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

Notary Public

Tax ID or SSN: