

## General Vendor/Specialized Vending License Transfer Self-Certification

Name of Applicant Requesting License Transfer:	
Applicant Home Address: (Building Number, Street Name, Apartment/Suite/Other, City, State, ZIP Code)	
License Number of Original License Holder:	
(if known)	DCWP General Vendor License Number
	and/or
	DOHMH Mobile Food Vending License Number

Complete the section—A or B—that applies to you. All applicants must complete section C.

## A. Request for Transfer of a General Vendor and/or Specialized Vending License Due to Death of License Holder

You must submit documentation to confirm the death of the license holder along with this form.

Relationship to original license holder (must check one):

Surviving Spouse or Domestic Partner

Guardian of Surviving Minor Child or Children\*

\*Guardian must intend to use the license to support the minor child or children AND must provide proof—for example, a notarized letter from relevant party—stating that the surviving spouse or domestic partner has chosen not to use the license.

The license automatically returns to the Department of Consumer and Worker Protection (DCWP) in the following situations:

- The surviving spouse or domestic partner who took over the license dies. OR
- The surviving spouse or domestic partner who took over the license remarries or enters into a new domestic partnership. OR
- The youngest minor of the guardian who took over the license on the minor's behalf reaches the age of 18. OR
- The surviving spouse or domestic partner or the guardian who took over the license elects not to use the license to vend in New York City or abandons the license.

## B. Request for Transfer of a General Vendor and/or Specialized Vending License Due to Permanent Disability of License Holder

You must submit documentation from a licensed Heath Care Professional to confirm the permanent disability of the license holder along with this form.

Relationship to original license holder (must check one):
<ul> <li>□ Spouse or Domestic Partner</li> <li>□ Adult Child*</li> </ul>
*Adult child must provide proof that 1) they are responsible for the original license holder's care and they intend to use the license as a means of support and 2) the original license holder has no spouse or domestic partner.
The license automatically returns to DCWP in the following situations:
<ul> <li>The original license holder dies. OR</li> <li>The spouse or domestic partner who took over the license dies or divorces/ceases the domestic partnership with the original license holder. OR</li> <li>The adult child who took over the license dies or is no longer responsible for the original license holder's care.</li> </ul>
C. Certification
I certify that:
<ul> <li>I am the Applicant requesting the license transfer.</li> <li>This Self-Certification is true, correct, and complete.</li> <li>I will inform DCWP, in writing, of any changes to the information in this Self-Certification.</li> <li>If any of the situations described in this Self-Certification occur and, therefore, the license automatically returns to DCWP, I will immediately surrender the physical license to DCWP.</li> <li>This Self-Certification shall be deemed executed in the City and State of New York and shall be governed by and construed in accordance with the laws of the State of New York (notwithstanding New York choice of law or conflict of law principles) and the laws of the United States.</li> </ul>
Signature Print Name
Print Title/Position (if any)  Date

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