

# INDUSTRIAL LAUNDRY SELF-CERTIFICATION

## Compliance with Laundries Laws, Regulations, and Rules

This Self-Certification includes six parts:

- PART I (general information)
- PART II (compliance)
- PART III (employees)
- PART IV (industrial laundry delivery)
- PART V (written statements regarding procedures)
- PART VI (certifications and signature)

The owner (e.g., sole proprietor, general partner, director, corporate officer, member, or shareholder owning 10% or more of company stock) of your business must complete this form.

**Important: Please read each section carefully. You must complete each section by checking EACH statement that applies to your business and/or providing written statements. Attach additional sheets as necessary.**

### PART I

Legal Name of Business (Applicant):	
DCWP License Number, if applicable:  <i>Applicants for a new license do not need to complete this field.</i>	
Premises Address (Building Number, Street Name, Unit, e.g., Floor, Suite, City, State, ZIP Code):	

<p><b>Check the box that applies to you.</b></p>	<p><input type="checkbox"/> I am a resident of New York City.</p> <p><input type="checkbox"/> I am <b>not</b> a resident of New York City. The registered agent in New York City who is authorized to accept service of legal documents on my behalf is:</p> <p style="padding-left: 40px;">Name: _____</p> <p style="padding-left: 40px;">Address: _____</p> <p style="padding-left: 40px;">_____</p> <p><input type="checkbox"/> I am <b>not</b> a resident of New York City. I would like to designate the Commissioner of the Department of Consumer and Worker Protection upon whom process or other notification may be served.</p>
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I certify the following:

1. I am the owner (e.g., sole proprietor, general partner, director, corporate officer, member, or shareholder owning 10% or more of company stock).
2. My business has \_\_\_\_\_ employees.  
*(Enter number of employees)*
3. My business will be performing laundry services at (check all that apply).
  - Premises Address
  - The following locations:

Address <i>(Building Number, Street Name, Unit, e.g., Floor, Suite, City, State, ZIP Code):</i>	
Address <i>(Building Number, Street Name, Unit, e.g., Floor, Suite, City, State, ZIP Code):</i>	
Address <i>(Building Number, Street Name, Unit, e.g., Floor, Suite, City, State, ZIP Code):</i>	
Address <i>(Building Number, Street Name, Unit, e.g., Floor, Suite, City, State, ZIP Code):</i>	

4. My business will be performing laundry services for:

- Hotels
- Hospitals
- Restaurants
- Gyms
- Retail Laundries
- Other: \_\_\_\_\_

## PART II

### Section 1: Compliance with Laws, Regulations, and Rules

Code Section 20-104 *et seq.*

Code Section 20-297.3(b)(3)

#### Check all boxes.

- I have read and understand that I am responsible for complying with the following laws, regulations, and rules:
  - Title 20 of the New York City Administrative Code (Code) at Chapter 1 beginning at Section 20-101, Chapter 2 beginning at Section 20-297.1, and Chapter 5 Sections 20-700 to 20-706 and 20-749 to 20-753
  - Title 6 of the Rules of the City of New York (6 RCNY or Rules) at Chapter 1 beginning at Section 1-01, Chapter 2 beginning at Section 2-131, and Chapter 5 beginning at Section 5-06
- I understand that I can access the above laws and rules via [nyc.gov/BusinessToolbox](https://www.nyc.gov/BusinessToolbox).
- I understand that I am responsible for knowing the most current laws, regulations and rules, including any amendments and updates made to the laws, regulations, and rules that are relevant to my business.

### Section 2: Outstanding Final Judgments and Warrants

Code Section 20-104 *et seq.*

Code Sections 20-297.3(b)(4) and 20-297.3(d)(1)

#### Check the box that applies to your business.

- My business does **not** have any outstanding final judgments or warrants from a violation of Chapter 2 of the Code beginning at Section 20-297.1 or Chapter 2 of the Rules beginning at Section 2-131.
- My business has an outstanding final judgment(s) or warrant(s) from a violation of Chapter 2 of the Code beginning at Section 20-297.1 or Chapter 2 of the Rules beginning at Section 2-131.

Please describe:

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**Check the box that applies to all individuals named on the application.** You must answer on behalf of all individuals named on the application. "Individual" refers to sole proprietor; individual general partner; corporate officer; shareholder owning 10% or more of the business; member; officer; Board of Directors member:

- Individual does **not** have any outstanding final judgments or warrants from a violation of Chapter 2 of the Code beginning at Section 20-297.1 or Chapter 2 of the Rules beginning at Section 2-131.
- Individual has an outstanding final judgment(s) or warrant(s) from a violation of Chapter 2 of the Code beginning at Section 20-297.1 or Chapter 2 of the Rules beginning at Section 2-131.

Please describe:

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**You must disclose all outstanding final judgments or warrants, even if you previously disclosed this information on a prior license application or Self-Certification.**

### **Section 3: Outstanding Final Judgments – Nonpayment or Underpayment of Wages**

Code Section 20-104 *et seq.*  
Code Section 20-297.3(d)(3)(b)

**Check the box that applies to your business.**

- My business does **not** have any outstanding final judgments from any civil, criminal, or administrative action involving nonpayment or underpayment of wages.
- My business has an outstanding final judgment(s) from a civil, criminal, or administrative action involving nonpayment or underpayment of wages.

Please describe:

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**Check the box that applies to all individuals named on the application.** You must answer on behalf of all individuals named on the application.

- Individual does **not** have any outstanding final judgments from any civil, criminal, or administrative action involving nonpayment or underpayment of wages.
- Individual has an outstanding final judgment(s) from a civil, criminal, or administrative action involving nonpayment or underpayment of wages.

Please describe:

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**You must disclose all outstanding final judgments, even if you previously disclosed this information on a prior license application or Self-Certification.**

**PART III**

Provide the following information for each employee (i.e., non-owner) at your business.

Name of Employee	Address	Telephone	Start/End Dates	Position and Duties

**PART IV**

**Check the box that applies to your business.**

- My business will engage in or intends to engage in Industrial Laundry Delivery services.
- My business will **not** engage in or does **not** intend to engage in Industrial Laundry Delivery services.

**If you indicated your business will engage in or intends to engage in Industrial Laundry Delivery, complete the Vehicle and Delivery Information section below.**

**Section 1: Vehicle and Delivery Information**

Code Sections 20-297.3(c)(2) and 20-297.3(c)(4)

Number of vehicles that business will use for laundry delivery: \_\_\_\_\_

Provide the following information for **each** vehicle to be used for delivering laundry.

	<b>Make</b>	<b>Model</b>	<b>License Plate Number</b>
1			
2			
3			
4			
5			

If the business will deliver laundry to or from *other* industrial laundries, provide the following information.

<b>Name of Industrial Laundry</b>	<b>Business Address</b>	<b>Business Telephone Number</b>





**PART VI**

**Certifications:**

- I am authorized to complete and submit this Self-Certification. I have reviewed the entire Self-Certification. To the best of my knowledge, this Self-Certification is true, correct, and complete. I understand that falsification of any statement made herein is an offense punishable by a fine or imprisonment or both.
- If any of the information in this Self-Certification changes, I will inform the Department of Consumer and Worker Protection of those changes in writing.
- This 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.

*If you submit this form as an electronically filled-in PDF, you may type your name in the signature field.*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Print Name*

\_\_\_\_\_  
*Print Title/Position (if any)*

\_\_\_\_\_  
*Date*

**Please submit the signed original to DCWP and make a copy for your records.**

All laws and rules of the City of New York, including the New York City Consumer Protection Law and Rules, are accessible via [nyc.gov/dca](http://nyc.gov/dca).