

42 Broadway New York, NY 10004

Dial 311 (212-NEW-YORK)

nyc.gov/dca

ROSTER OF TICKET SOURCES

Ticket Seller Business: (Name of License Applicant)		
Ticket Seller Business DCA License Number		
(if applicable):		
List below the names and addition whom you receive tickets.	resses of a	any individual or company from
Name of Person or Business		Address
Attach additional papers as ne	cessary.	
IMPORTANT REQUIREMENT If any information on this Roste DCA within 10 days of the char	er changes	JPDATING INFORMATION: s, you must submit a new Roster to
I understand that falsification o offense punishable by a fine or		
Signature of License Applicant		Print Full Name
Title/Position (if any)		 Date