

BROKER ANNUAL DISCLOSURE FORM

General Instructions

The purpose of the Annual Disclosure Form is to promote Broker accountability and help ensure that all parties involved in Broker-facilitated transactions are notified of any potential conflicts of interest the Broker might have in such transactions. Brokers are required to use this annual disclosure form to report interests they have in TLC licenses and TLC-associated businesses.

WHO MUST COMPLETE AND SUBMIT THIS FORM

Each licensed Broker must complete and submit this form. Only one submission is required for each Brokerage.

WHAT MUST BE DISCLOSED

The licensed Broker who completes and submits this form must disclose:

- Interests held by the Broker;
- Interests held by any Company Officers, including Owners, Officers, Partners, Managers and Stockholders of the Brokerage; and
- Interests held by any Related Party of the Broker or any Related Party of any Company Officers. The term “Related Party” is defined on the following page.

ADDITIONAL INFORMATION

TLC’s complete Rules are available at:

<https://www1.nyc.gov/site/tlc/about/tlc-rules.page>

Chapter 62 of TLC’s Rules, relating to Taxicab Brokers, is available at:

https://www1.nyc.gov/assets/tlc/downloads/pdf/rule_book_current_chapter_62.pdf

Additional information for Brokers, including guidance documents and forms, is available at:

<https://www1.nyc.gov/site/tlc/businesses/brokers.page>

If you have any questions or need help completing this form, you may email:

TaxicabBrokers@tlc.nyc.gov

EXPLANATION OF TERMS

Refer to the following explanation of terms used in the Annual Disclosure Form.

<u>Term</u>	<u>Explanation</u>
Broker	<ul style="list-style-type: none"> The Broker, as this term is used in this form, refers to the individual or business entity that is licensed by TLC as a Broker or is completing this form as part of their application for a new Broker license. The Broker submits this form on their own behalf and on behalf of all Company Officers and Related Parties.
Company Officer	<ul style="list-style-type: none"> Any Owners, Officers, Partners, Managers and Stockholders of the Brokerage reported to TLC in the “APPLICATION FOR A NEW BROKER/ AGENT LICENSE, RENEWAL LICENSE AND CHANGE OF INFORMATION” form.
Related Party	<p>Any person whose relationship to a Broker or to an owner, officer, partner, manager, or stockholder of a Brokerage is that of a:</p> <ul style="list-style-type: none"> spouse, domestic partner, child, grandchild, parent, sibling, or grandparent; a parent, child or sibling of a spouse or domestic partner; a spouse, or domestic partner of a parent, child or sibling. <p>When asked on this form to identify the relationship of the Related Party to the Broker or Company Officer, use the following terms (the dropdown list selection in DocuSign will be a number and abbreviation):</p> <ul style="list-style-type: none"> Spouse (1 – SP) Domestic Partner (2 – DP) Child (3 – CH) Grandchild (4 – GCH) Parent (5 – PAR) Sibling (6 – SIB) Grandparent (7 – GPAR) Spouse/Domestic Partner’s parent (8 – SP/DP PAR) Spouse/Domestic Partner’s child (9 – SP/DP CH) Spouse/Domestic Partner’s sibling (10 – SP/DP SIB) Parent’s Spouse/Domestic Partner (11 – PAR SP/DP) Child’s Spouse/Domestic Partner (12 – CH SP/DP) Sibling’s Spouse/Domestic Partner (13 – SIB SP/DP)

Interests in TLC Licenses

<u>License Type</u>	<u>Example</u>
Driver License	<ul style="list-style-type: none"> TLC-issued Driver License, Paratransit Driver License, Commuter Van Driver License
Medallions and SHL Permits	<ul style="list-style-type: none"> TLC-issued Medallion Taxicab License (Medallion) or Street Hail Liveries Permit
Vehicle License	<ul style="list-style-type: none"> Standby Vehicles, Black Car, Livery, Luxury Limousine, Paratransit Vehicles, or Commuter Vans

Base License	<ul style="list-style-type: none"> Black Car Bases, Livery Bases, Luxury Limousine Bases, Commuter Van Authorizations, Paratransit Bases
Business License	<ul style="list-style-type: none"> Taxicab Brokers, Medallion Agents, Taxicab Meter Shops, Taxicab Meter Manufacturers, Technology Service Providers, E-Hail Providers

Interests in Other Businesses

<u>Business Type</u>	
Lenders	<ul style="list-style-type: none"> Any financial lender, whether or not the services are provided to TLC licensees.
Insurance Brokers	<ul style="list-style-type: none"> Any insurance broker, whether or not the services are provided to TLC licensees.
Automobile Dealers	<ul style="list-style-type: none"> Any automobile dealer, whether or not the services are provided to TLC licensees.
TLC-associated Businesses	<ul style="list-style-type: none"> Any business primarily serving applicants or holders of TLC-issued taxicab licenses or offering products or services targeted to applicants or holders of TLC-issued taxicab licenses or which specifically advertises to applicants or holders of TLC-issued taxicab licenses

SECTION 1: BROKERAGE INFORMATION

Legal Business Name _____

D/B/A (if any) _____

EIN/SSN _____

Broker License Number _____

Business Address _____

City _____ State _____ Zip _____

Email Address _____

Website Address _____

Business Phone _____

Please answer the following questions on your submission:

Are you submitting this BROKER ANNUAL DISCLOSURE FORM in response to the TLC initial due date, or for the New/Renewal Application of your TLC Broker License?

Yes No

Are you updating a previously version of the BROKER ANNUAL DISCLOSURE FORM submitted?

Yes No

If yes, please check all applicable sections that you are updating:

- SECTION 1: BROKERAGE INFORMATION
- SECTION 2: OTHER TLC LICENSES – BROKER AND COMPANY OFFICERS
- SECTION 3: BUSINESS INTERESTS – BROKER
- SECTION 4: INTERESTS OF RELATED PARTIES



LIST ALL OWNERS, OFFICERS, PARTNERS, MANAGERS AND SHAREHOLDERS

Please provide a complete list of all Owners, Officers, Partners, Managers and Shareholders associated with the Broker.

Are there more than five individuals for owners, officers, partners, managers and shareholders?

Yes No

If yes, please list all individuals on the separate spreadsheet provided and attach it to your DocuSign submission.

If there are up to five individuals, please provide the details below.

First Name _____ **Last Name** _____

Home Address _____

City _____ **State** _____ **Zip** _____

Date of Birth _____ **Title** _____ **EIN/SSN** _____

First Name _____ **Last Name** _____

Home Address _____

City _____ **State** _____ **Zip** _____

Date of Birth _____ **Title** _____ **EIN/SSN** _____

First Name _____ **Last Name** _____

Home Address _____

City _____ **State** _____ **Zip** _____

Date of Birth _____ **Title** _____ **EIN/SSN** _____

First Name _____ **Last Name** _____

Home Address _____

City _____ **State** _____ **Zip** _____

Date of Birth _____ **Title** _____ **EIN/SSN** _____

First Name _____ **Last Name** _____

Home Address _____

City _____ **State** _____ **Zip** _____

Date of Birth _____ **Title** _____ **EIN/SSN** _____

BROKER EMPLOYEES

Please provide a complete list of all employees of the Broker.

If none, check here

Are there more than five employees?

Yes No

If yes, please list all employees on the separate spreadsheet provided and attach it to your DocuSign submission.

If there are up to five employees, please provide the details below.

FIRST NAME	LAST NAME	BUSINESS TITLE

SECTION 2: OTHER TLC LICENSES – BROKER AND COMPANY OFFICERS

Does the Broker or any of the Company Officers listed on page 5 of this form have an interest in any TLC license, aside from the Broker license?

- Yes No

Are there more than five licenses that the Broker or any of the Company Officers listed on page 5 of this form have an interest, aside from the Broker license?

- Yes No

If yes, please list all licenses on the separate spreadsheet provided and attach it to your DocuSign submission.

If there are up to five licenses, please provide the details of all interests below.			
Party with Interest – Broker or Company Officer Name	TLC License Type (select one per line)	TLC License Number	Description of Interest (check all that apply)
	<input type="checkbox"/> Driver License <input type="checkbox"/> Medallion/SHL <input type="checkbox"/> Vehicle License <input type="checkbox"/> Base License <input type="checkbox"/> Business License		<input type="checkbox"/> License Holder <input type="checkbox"/> Company Officer (Title: _____) <input type="checkbox"/> Shareholder (10% or more)
	<input type="checkbox"/> Driver License <input type="checkbox"/> Medallion/SHL <input type="checkbox"/> Vehicle License <input type="checkbox"/> Base License <input type="checkbox"/> Business License		<input type="checkbox"/> License Holder <input type="checkbox"/> Company Officer (Title: _____) <input type="checkbox"/> Shareholder (10% or more)
	<input type="checkbox"/> Driver License <input type="checkbox"/> Medallion/SHL <input type="checkbox"/> Vehicle License <input type="checkbox"/> Base License <input type="checkbox"/> Business License		<input type="checkbox"/> License Holder <input type="checkbox"/> Company Officer (Title: _____) <input type="checkbox"/> Shareholder (10% or more)
	<input type="checkbox"/> Driver License <input type="checkbox"/> Medallion/SHL <input type="checkbox"/> Vehicle License <input type="checkbox"/> Base License <input type="checkbox"/> Business License		<input type="checkbox"/> License Holder <input type="checkbox"/> Company Officer (Title: _____) <input type="checkbox"/> Shareholder (10% or more)
	<input type="checkbox"/> Driver License <input type="checkbox"/> Medallion/SHL <input type="checkbox"/> Vehicle License <input type="checkbox"/> Base License <input type="checkbox"/> Business License		<input type="checkbox"/> License Holder <input type="checkbox"/> Company Officer (Title: _____) <input type="checkbox"/> Shareholder (10% or more)

SECTION 3: BUSINESS INTERESTS – BROKER

Does the Broker or any of the Company Officers listed on page 5 of this form have an interest in any lender, insurance broker, automobile dealer, or TLC-associated business?

Yes No

Are there more than five businesses that the Broker or any of the Company Officers listed on page 5 of this form have an interest?

Yes No

If yes, please list all businesses on the separate spreadsheet provided and attach it to your DocuSign submission.

If there are up to five businesses, please provide the details of all interests below.

Party with Interest - Broker or Company Officer Name	Name of Business that Party has Interest in	Business Category (select one per line)	Description of Interest (check all that apply)
		<input type="checkbox"/> Lender <input type="checkbox"/> Insurance broker <input type="checkbox"/> Automobile dealer <input type="checkbox"/> Other TLC-associated business (specify service provided: _____)	<input type="checkbox"/> Employee <input type="checkbox"/> Company Officer (Title: _____) <input type="checkbox"/> Shareholder (10% or more)
		<input type="checkbox"/> Lender <input type="checkbox"/> Insurance broker <input type="checkbox"/> Automobile dealer <input type="checkbox"/> Other TLC-associated business (specify service provided: _____)	<input type="checkbox"/> Employee <input type="checkbox"/> Company Officer (Title: _____) <input type="checkbox"/> Shareholder (10% or more)
		<input type="checkbox"/> Lender <input type="checkbox"/> Insurance broker <input type="checkbox"/> Automobile dealer <input type="checkbox"/> Other TLC-associated business (specify service provided: _____)	<input type="checkbox"/> Employee <input type="checkbox"/> Company Officer (Title: _____) <input type="checkbox"/> Shareholder (10% or more)
		<input type="checkbox"/> Lender <input type="checkbox"/> Insurance broker <input type="checkbox"/> Automobile dealer <input type="checkbox"/> Other TLC-associated business (specify service provided: _____)	<input type="checkbox"/> Employee <input type="checkbox"/> Company Officer (Title: _____) <input type="checkbox"/> Shareholder (10% or more)
		<input type="checkbox"/> Lender <input type="checkbox"/> Insurance broker <input type="checkbox"/> Automobile dealer <input type="checkbox"/> Other TLC-associated business (specify service provided: _____)	<input type="checkbox"/> Employee <input type="checkbox"/> Company Officer (Title: _____) <input type="checkbox"/> Shareholder (10% or more)



SECTION 4: INTERESTS OF RELATED PARTIES

Does any Related Party of the Broker or any Related Party of a Company Officer have an interest in any TLC license?

Yes No

Are there more than five licenses for any Related Party of the Broker or any Related Party of a Company Officer with an interest?

Yes No

If yes, please list all licenses on the separate spreadsheet provided and attach it to your DocuSign submission.

If there are up to five licenses, please provide the details of all interests below.

Reference for the Relationship of the Related Party to the Broker or Company Officer:

- | | | |
|---------------------------|--|--|
| 1 – SP (Spouse) | 5 – PAR (Parent) | 9 – SP/DP CH (Spouse/Domestic Partner’s child) |
| 2 – DP (Domestic Partner) | 6 – SIB (Sibling) | 10 – SP/DP SIB (Spouse/Domestic Partner’s sibling) |
| 3 – CH (Child) | 7 – GPAR (Grandparent) | 11 – PAR SP/DP (Parent’s Spouse/Domestic Partner) |
| 4 – GCH (Grandchild) | 8 – SP/DP PAR (Spouse/Domestic Partner’s parent) | 12 – CH SP/DP (Child’s Spouse/Domestic Partner) |
| | | 13 – SIB SP/DP (Sibling’s Spouse/Domestic Partner) |

Broker or Company Officer Name	Name of the Related Party	Relationship of the Related Party to the Broker or Company Officer	TLC License Type (select one)	TLC License Number	Description of Interest (check all that apply)
			<input type="checkbox"/> Driver License <input type="checkbox"/> Medallion/SHL <input type="checkbox"/> Vehicle License <input type="checkbox"/> Base License <input type="checkbox"/> Business License		<input type="checkbox"/> License Holder <input type="checkbox"/> Company Officer (Title: _____) <input type="checkbox"/> Shareholder (10% or more)
			<input type="checkbox"/> Driver License <input type="checkbox"/> Medallion/SHL <input type="checkbox"/> Vehicle License <input type="checkbox"/> Base License <input type="checkbox"/> Business License		<input type="checkbox"/> License Holder <input type="checkbox"/> Company Officer (Title: _____) <input type="checkbox"/> Shareholder (10% or more)
			<input type="checkbox"/> Driver License <input type="checkbox"/> Medallion/SHL <input type="checkbox"/> Vehicle License <input type="checkbox"/> Base License <input type="checkbox"/> Business License		<input type="checkbox"/> License Holder <input type="checkbox"/> Company Officer (Title: _____) <input type="checkbox"/> Shareholder (10% or more)
			<input type="checkbox"/> Driver License <input type="checkbox"/> Medallion/SHL <input type="checkbox"/> Vehicle License <input type="checkbox"/> Base License <input type="checkbox"/> Business License		<input type="checkbox"/> License Holder <input type="checkbox"/> Company Officer (Title: _____) <input type="checkbox"/> Shareholder (10% or more)
			<input type="checkbox"/> Driver License <input type="checkbox"/> Medallion/SHL <input type="checkbox"/> Vehicle License <input type="checkbox"/> Base License <input type="checkbox"/> Business License		<input type="checkbox"/> License Holder <input type="checkbox"/> Company Officer (Title: _____) <input type="checkbox"/> Shareholder (10% or more)



Does any Related Party of the Broker or any Related Party of a Company Officer listed on page 5 of this form have an interest in any lender, insurance broker, automobile dealer, or TLC-associated business?

Yes No

Are there more than five businesses for any Related Party of the Broker or any Related Party of a Company Officer with an interest?

Yes No

If yes, please list all businesses on the separate spreadsheet provided and attach it to your DocuSign submission.

If there are up to five businesses, please provide the details of all interests below.

Reference for the Relationship of the Related Party to the Broker or Company Officer:

- | | | |
|----------------------------------|---|---|
| 1 – SP (Spouse) | 5 – PAR (Parent) | 9 – SP/DP CH (Spouse/Domestic Partner’s child) |
| 2 – DP (Domestic Partner) | 6 – SIB (Sibling) | 10 – SP/DP SIB (Spouse/Domestic Partner’s sibling) |
| 3 – CH (Child) | 7 – GPAR (Grandparent) | 11 – PAR SP/DP (Parent’s Spouse/Domestic Partner) |
| 4 – GCH (Grandchild) | 8 – SP/DP PAR (Spouse/Domestic Partner’s parent) | 12 – CH SP/DP (Child’s Spouse/Domestic Partner) |
| | | 13 – SIB SP/DP (Sibling’s Spouse/Domestic Partner) |

Broker or Company Officer Name	Name of the Related Party	Relationship of the Related Party to the Broker or Company Officer	Business Name	Business Category (select one)	Description of Interest (check all that apply)
				<input type="checkbox"/> Lender <input type="checkbox"/> Insurance broker <input type="checkbox"/> Automobile dealer <input type="checkbox"/> Other TLC-associated business (specify service provided: _____)	<input type="checkbox"/> Employee <input type="checkbox"/> Company Officer (Title: _____) <input type="checkbox"/> Shareholder (10% or more)
				<input type="checkbox"/> Lender <input type="checkbox"/> Insurance broker <input type="checkbox"/> Automobile dealer <input type="checkbox"/> Other TLC-associated business (specify service provided: _____)	<input type="checkbox"/> Employee <input type="checkbox"/> Company Officer (Title: _____) <input type="checkbox"/> Shareholder (10% or more)
				<input type="checkbox"/> Lender <input type="checkbox"/> Insurance broker <input type="checkbox"/> Automobile dealer <input type="checkbox"/> Other TLC-associated business (specify service provided: _____)	<input type="checkbox"/> Employee <input type="checkbox"/> Company Officer (Title: _____) <input type="checkbox"/> Shareholder (10% or more)
				<input type="checkbox"/> Lender <input type="checkbox"/> Insurance broker <input type="checkbox"/> Automobile dealer <input type="checkbox"/> Other TLC-associated business (specify service provided: _____)	<input type="checkbox"/> Employee <input type="checkbox"/> Company Officer (Title: _____) <input type="checkbox"/> Shareholder (10% or more)
				<input type="checkbox"/> Lender <input type="checkbox"/> Insurance broker <input type="checkbox"/> Automobile dealer <input type="checkbox"/> Other TLC-associated business (specify service provided: _____)	<input type="checkbox"/> Employee <input type="checkbox"/> Company Officer (Title: _____) <input type="checkbox"/> Shareholder (10% or more)

SECTION 5: AFFIRMATION

I affirm and certify that:

- The information I have submitted in this Annual Disclosure Form and accompanying attachments, if any, is accurate and complete;
- I have listed all owners, officers, partners, managers, stockholders, and employees;
- I have listed any and all interests that I, or any owners, officers, partners, managers, and stockholders hold in TLC licenses and TLC-associated businesses;
- I have listed any and all interests that Related Parties hold in TLC licenses and TLC-associated businesses;
- I agree to notify TLC of any changes to the information listed in this form within 30 days from the change; and
- I understand that willful or fraudulent submission of a materially false statements may result in a fine of \$2,500 to \$10,000, and/or suspension or revocation of my license, as specified in TLC Rule 62-05(c)(3).

Licensed Broker Name _____

D/B/A (if any) _____

**If Broker is a Business Entity,
Name and Title of Person who
Completed this Form** _____

Signature _____

Date _____