



NEW APPLICATION FOR A PARATRANSIT BASE LICENSE

Collect the application requirements & complete the application. Submit the documents by email to newbusinessapp@tlc.nyc.gov.

TLC will review your submissions electronically; once TLC confirms your application is complete, you will be contacted to make an appointment to submit licensing fees in person.

Business Type (Please check one)

Sole Proprietorship ☐

Partnership ☐

Corporation ☐

LLC ☐

I. BACKGROUND INFORMATION ON PARATRANSIT BASE

(All fields in this section must be filled-out completely for your application to be processed)

Business Name:

D/B/A:

Address:

City: State: Zip Code:

E-Mail:
(required)

Website Address
(if any):

Telephone #:

EIN #: or SSN#:

24-Hour
Phone #:

Proof of EIN / Social Security No. – If a corporation or partnership, you must submit an IRS issued 145-C letter/notice. If a sole proprietor, you must submit proof of social security number.

HOW WILL THE VEHICLES BE DISPATCHED:

FCC Lic. #:
Or provide details of
alternative form of
communication

NUMBER OF VEHICLES TO BE / ARE DISPATCHED: _____

II. LISTING OF ALL OWNERS, OFFICERS, PARTNERS, MANAGERS AND STOCKHOLDERS – this page can be photocopied if needed for additional officers

Last Name:		First Name:			
Address:					
City:		State:		Zip Code:	
# of Shares:		DMV License #:		DMV License State:	Title:
Date of Birth:	Month Day Year		EIN/SSN#:		
Individual E-mail address:			Phone #:		
Last Name:		First Name:			
Address:					
City:		State:		Zip Code:	
# of Shares:		DMV License #:		DMV License State:	Title:
Date of Birth:	Month Day Year		EIN/SSN#:		
Individual E-mail address:			Phone #:		
Last Name:		First Name:			
Address:					
City:		State:		Zip Code:	
# of Shares:		DMV License #:		DMV License State:	Title:
Date of Birth:	Month Day Year		EIN/SSN#:		
Individual E-mail address:			Phone #:		
Last Name:		First Name:			
Address:					
City:		State:		Zip Code:	
# of Shares:		DMV License #:		DMV License State:	Title:
Date of Birth:	Month Day Year		EIN/SSN#:		
Individual E-mail address:			Phone #:		
Last Name:		First Name:			
Address:					
City:		State:		Zip Code:	
# of Shares:		DMV License #:		DMV License State:	Title:
Date of Birth:	Month Day Year		EIN/SSN#:		
Individual E-mail address:			Phone #:		

III. CERTIFICATE OF WORKERS' COMPENSATION INSURANCE AND TRIP RECORDS SUBMISSION

WORKERS' COMPENSATION LAW

Paratransit bases are required to maintain Workers' Compensation Insurance Coverage. A Certificate must be submitted to the NYC Taxi and Limousine Commission.

You are therefore required to submit with your Paratransit base application a Workers' Compensation Certificate of Insurance issued by the New York State Insurance Fund or a Certificate of Exemption issued by State of New York Workers' Compensation Board.

You must submit the original Certificate. The certificate or exemption must be current, and it must be on the form issued by the State Insurance Fund or Workers' Compensation Board. The Certificate **MUST** name the "NYC Taxi and Limousine Commission" as the certificate holder. Finally, the name and address on the certificate **MUST** match **EXACTLY** with the name and address on your license application.

Please provide the following information with respect to your Workers' Compensation insurance:

Name of Insurer:

Policy number:

Effective Dates: From

____	____	____
Month	Day	Year

to-

____	____	____
Month	Day	Year

All licensed For-Hire Vehicle bases and licensed Paratransit bases are required to electronically submit trip records to TLC every month. This data helps support safety, accountability, and transportation planning initiatives across the city.

You can find all the detailed technical requirements and instructions directly on the page below:

<https://www.nyc.gov/site/tlc/tlc-online/fhv-trip-record-submission.page>

The page includes updated instructions on how to upload trip records via TLC UP or FTP as well as instructions on how to submit an affirmation.

If you have a question regarding submitting trip records that is not answered on that page, you may email triprecords@tlc.nyc.gov.

I affirm I will comply with this TLC rule and submit trip records or an Affirmation of No Dispatch monthly.

Name (print): _____

Signature: _____

Today's Date: _____

Title: _____

IV. BACKGROUND QUESTIONNAIRE

PLEASE NOTE – ALL OFFICERS MUST FILL OUT THIS FORM.

Any individual that holds 10% or more of the shares OR a title as President, Vice President, Secretary, Treasurer or Member must completely fill-out this page. Please make additional copies of this page if necessary.

All questionnaires must be COMPLETED & SUBMITTED with your application.

Name (print): _____

Signature: _____

Today's Date: _____

Title: _____

Number of Shares: _____

Character/History of Principals

Have you ever:

A) been convicted of any crime anywhere, other than a traffic violation?

YES

☐

NO

☐

B) had any type of license suspended or revoked?

YES

☐

NO

☐

If you answered "YES" to any of the preceding questions you must provide a signed statement (below or on a separate document) giving pertinent documentation such as names, dates, license numbers, certificate of deposition, etc.

Do you have or have you ever had any TLC license with your name (either individual, or as a partner, officer, principal and/or stockholder, or as part of a corporation?

YES

☐

NO

☐

If yes, please provide the license number(s): _____

V. AFFIRMATION TO OPERATE PARATRANSIT BASE STATION

PLEASE NOTE – ONE (1) OFFICER/PARTNER/OWNER MUST FILL OUT THIS AFFIRMATION
ON BEHALF OF THE OWNER(S)

This must be – COMPLETED & SUBMITTED – with your application.

1. I have submitted this affirmation at the request of the New York City Taxi & Limousine Commission (TLC).
2. I am currently an officer/partner/owner for _____,
(Name of Base)
and submit this affirmation in that capacity. This base is an entity that functions as a Paratransit Service Base as defined in Chapter 60 of the NYC Taxi and Limousine Commission's Rules and Regulations.
3. A minimum of one (1) Paratransit vehicle will be affiliated with this company and will be either dispatched from or conveyed information by this facility.
4. I understand that no vehicles will be dispatched from said Base until a valid TLC license is issued.
5. All vehicles and drivers dispatched from said Base will be in conformance with all applicable laws of New York City, New York State and the NYC Taxi and Limousine Commission.
6. I recognize that the maintenance of the insurance coverage required by the rules of the TLC is a condition of this base's license and agree that the Base will maintain such coverage at all times.
7. I am aware that if granted, my use and retention of the Base License is contingent upon the Base's full and consistent satisfaction of all the requirements of the NYC Taxi and Limousine Commission Rules and Regulations.

"I hereby affirm, under penalty of law, that I have examined and reviewed the information in the submitted form(s) or application(s), including any supplemental form(s) and/ or document(s) and that these document(s) and or statement(s) do not contain any untrue statement(s) nor are they missing any material information and/ or fact(s). I also acknowledge and understand that any false statement(s) submitted is punishable under the law and may result in a denial of an application or the suspension or revocation of an existing license/permit."

Name (print): _____

Signature: _____

Today's Date: _____

Title: _____



BUSINESS NAME RESERVATION REQUEST

Before an application (New Business/Base Application or Name Change Application) can be submitted, the name must be reviewed and approved by the Business Unit of TLC. **Any names accepted by the TLC are valid for (45) days** from the date indicated below and must be re-submitted thereafter for additional approval. *You must submit a valid approved name request along with your Business Application.*

Please email form to name-reservation@tlc.nyc.gov for review of Business Name prior to submitting your application via email.

Please visit our website for more information at: www.nyc.gov/tlc.

Please list the proposed Business Names by order of preference:

Business Name

Business Name

Business Name

Please list the proposed Doing Business As (d/b/a) Names by order of preference:

DBA Business Name

DBA Business Name

DBA Business Name

Entity Type:

☐

Livery Base

☐

Black Car Base

☐

Luxury Limo Base

☐

Commuter Van Authority

☐

Paratransit Base

☐

Broker

☐

Agent

☐

Taxi Meter

☐

Meter Manufacturer

☐

EHAIL Provider

☐

Technology Service Provider (TSP)

Requested by:

If you currently own a licensed business with TLC please indicate license #:

Email Address:

Contact
telephone #:

DISPATCH APP DISCLOSURE

An app that contracts with a TLC licensed base(s) can dispatch vehicles affiliated with that base and must obey all TLC rules and regulations governing bases, including but not limited to: only dispatching to TLC licensed drivers and vehicles; and disclosing all pertinent base, vehicle, and driver license numbers to both the contracted base as well as to TLC in the form of trip records. Apps that do not have their own TLC base license, but have contracts with TLC licensed bases, in effect dispatch or refer jobs on behalf of those bases. Use of these apps must not result in any violation of TLC rules by bases, vehicles, or drivers.

Date: _____

License Number: _____ Business Name: _____

Will your base use a passenger-facing App to provide dispatch? ☐ Yes ☐ No

Do you own the Application your proposed base will use?

☐ Yes, the base owns the app

☐ No, the base does not own the app (base will use contracted app)

☐ N/A: Our/my base will not use any mobile application

Please list the Names of all Proprietary or Contracted Dispatch Services:

List all Apps owned/operated by the base. If a contract is already in use you must provide a list of all services contracted to the base. A copy of the operating agreement between the base and all services listed must be filed with the Base/Business Unit at TLC.

Dispatch APP Name

Owned by Base or contracted

Effective date of Agreement

Dispatch APP Name

Owned by Base or contracted

Effective date of Agreement

Dispatch APP Name

Owned by Base or contracted

Effective date of Agreement



Business Lease Affirmation

(Paratransit Base & Commuter Van Authority)

I, _____ of
(Name of Owner/Officer)

(Base/Business/ name)

with TLC base/business/authority license number: _____

do hereby certify and affirm that the base/business has entered a valid **commercial or residential** property lease for the premises located at

(Address of Leased space)

effective on _____ and ending on _____
(Lease start date) (Lease end date)

(Owner/Officer Signature)

(Owner/Officer Title)

(Date)

NOTE:

This affirmation is to be used in place of a lease. TLC will verify the disclosure by reviewing the Certificate of Occupancy from the Department of Buildings.

TLC reserves the right to request the current lease at any time during the term of a license.

Paratransit Base Zoning Requirement:

Paratransit Bases must be located on commercial property or another appropriately zoned location unless the Base operates no more than four (4) vehicles, in which case it may be maintained at the Base Owner's residence (off-street parking).

Commuter Van Authority and Paratransit Base Limitation on Parking of Commercial Vehicles:
Per New York Administrative Code § 19-170, "no person shall park a commercial vehicle on a residential street from 9 p.m. to 5 a.m." By signing this affirmation, I am confirming I have appropriate off-street parking for all vehicles in my authority/base.