

TLC REFUND CLAIM FORM

Reason for refund please check one

- I appeared at a hearing and my case was dismissed.
- I filed an appeal and the decision on my initial case was reversed or dismissed.
- For other reasons, please explain: _____
(Attach additional pages if needed)

(Please note as stated on all license application documents, application fees are not refundable).

Please print clearly

Last name: _____
First name: _____ Middle Initial (M.I.): _____
Address: _____
(Street) (Apt. #)

(City) (State) (Zip Code)
Telephone #: (____) _____ - _____
TLC License #: _____ Expiration Date: ____ / ____ / ____
(For which you are claiming a refund)
Amount claimed as refund: \$ _____

All claims must have copies of the relevant supporting documents attached:

Notice of Decision (for claims involving hearings and appeals);
Copy of TLC receipt for payment (if paid with currency in person); and
Copy of front and back of cleared money order or check and/or credit card receipt

Please keep all original documents with your records.

Please mail to: New York City Taxi & Limousine Commission
Attention: Refund Claim Unit
33 Beaver Street, 19th Floor
New York, NY 10004

Your Signature: _____ **Date:** ____ / ____ / ____

PLEASE NOTE: Incomplete or incorrect forms will not be processed. If you are entitled to a refund check, a check will be mailed to you in about 6-8 weeks. A check will not be delivered to an incorrect address, which may delay your refund.

Make certain copies of all receipts are attached to this claim.