

# APPLICATION FOR PRIVATE SERVICE BUREAU LICENSE RENEWAL

OFFICE USE ONLY				
Renewal Application Rec'd Date				
Renewal Issued Date				
PSB Renewal Fee \$50.00 (non-refundable)				

Your Private Service Bureau license, issued by the Department of Motor Vehicles (DMV), expires on June 30<sup>th</sup> of this year. To renew your license, you must answer all questions on this application. Please return this application, all required documentation, and a check or money order payable to the Commissioner of Motor Vehicles in the amount of \$50.00 (the NON-REFUNDABLE, two-year renewal fee).

## **INSTRUCTIONS:**

- ◆ Print or type the information in this application.
- ♦ Include a photocopy of the owner's and all employees' valid driver licenses or non-driver identification cards.
- ♦ Include a photocopy of the workers' compensation exemption form, or current proof of disability insurance.

Name of Private Service Bureau as approved by DMV				Private Service Bureau License No.	Date of Application	(Month/Day/	Year)	
Name of Private Service Bureau Owner				Name of Website as approved by DMV				
Address Where You Get Your Mail (No. and Street	et)			City	State	Zip Code		
Address Where Your Private Service Bureau is Lo	ocated (No. and Street)			City	State	Zip Code		
Telephone No.	Cell No.		E-mail A	ddress				
Type of Business (check one of the following):  Sole Proprietor  Partnership	☐ Corporation	☐ Association		her, specify				
ANSWER QUESTIONS 1-16 below	and on the follo	owing pages.						
Does your Private Service Bureau     If YES, provide the URL/webs				·			Yes	No
Note: Commissioner's Rules and website that offers services or t private service bureau must incluregistration or title transactions plodd type of a size equal to at lea	ransactions that a ude the following la performed by the I st 24 point type:	an applicant could anguage by means New York State Do	obtain s of a st epartme	or conduct directly via the atement on its website on a	Department's own iny pages that refer oticeably distinct ma	website, the to licensing	he ig,	
				BSITE AT DMV.NY.GOV."	, (02, 5 (2012)		Yes	No
Has the name of the business changed in YES, provide the former national additions will be allowed without the second control of the second control o	me of the busines	ss and the reason				changes	or	
If your business is a partnership,     If YES, provide the names of		_					Yes	No
Have you changed your business     If <b>YES</b> , provide the previous a					ise was issued?		Yes	No
<ol> <li>Have you discontinued your busi If YES, was the license certifi If YES, explain why you disco</li> </ol>	cate surrendered	to the DMV?	Yes	□ No	ed?		Yes	No

	Business Name	Facility Number or License Number		
	Have you or any partner, corporate officer, manager or employee had any business licensed by DMV that I suspended or revoked?	` ,	Yes	No
	If <b>YES</b> , do you have any pending or unresolved charges? $\square$ <b>Yes</b> $\square$ <b>No</b> If <b>YES</b> , explain in the Remarks section.			
	Have you or any partner, corporate officer, manager or employee ever been denied an application and/or NYS Department of Motor Vehicles?	•	Yes	No
	If <b>YES</b> , provide the date and reason for the denial in the Remarks section.		Yes	No
9.	Does your facility share your address with any other facility licensed by DMV?		Ш	Ш
	Business Lie	cense Number ty Number		
10.	Has any owner, principle, partner or any employee been convicted of any misdemeanor or felonies or for	eited bail?	Yes	No
	If <b>YES</b> , explain in the Remarks section.		V	Ma
11.	Has the owner, principle, partner or any employee ever worked for the NYS Department of Motor Vehicles	s?	Yes	No
	If <b>YES</b> , provide the following information:			
	DMV Office Address Dates of E	mployment		
10				
12.	Has any licensing or certification organization, including any government agency, ever determined that y corporate officer, manager or employee committed misconduct, unprofessional conduct or negligence the criminal charges?	at resulted in	Yes	No
	If YES, explain in the Remarks section.		V	NI-
13.	Does any owner, principle, partner or employee have an arrest or criminal accusation currently pending	against them?	Yes	No
	If <b>YES</b> , explain in the Remarks section.		Vas	No
14.	Do you have employees?		Yes	No
	If <b>YES</b> , complete the table on the next page and attach a photocopy of the valid New York State driver lic card for each employee, an Employee Roster (form PSB-4) for each employee, a copy of your CURREN a CURRENT copy of Workers' Compensation Insurance.			
	If <b>NO</b> , submit a current workers' compensation exemption form (CE-200).			

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#### EMPLOYEES/RUNNERS/AGENTS (PAID OR UNPAID)

List all employees/runners/agents (paid or unpaid) working at or associated with the Private Service Bureau.

Date Hired	Name	Address	Driver License or Non-Driver ID No.*

\*Note: ALL EMPLOYEES/RUNNERS/AGENTS (PAID OR UNPAID) WHO HAVE DIRECT IN-PERSON CONTACT WITH CUSTOMERS AND/OR DMV, MUST HAVE EITHER A VALID NYS DRIVER LICENSE OR A VALID NYS NON-DRIVER IDENTIFICATION CARD.

15. Which DMV office(s) or Processing Center(s) processes your paperwork?

16. What services do you offer to your customers, and what fees do you charge for these services? If you need more space, attach an additional page.

Service Provided	Fee Charged	
	\$	
	<u>*</u>	
	ф •	
	<u>\$</u>	

#### **CONDITIONS**

As a condition for issuance and continued approval of the Private Service Bureau License, the undersigned Licensee agrees to all of the following terms and conditions:

- A. To maintain adequate records, as required by the New York State Vehicle and Traffic Law and the DMV Commissioner's Rules and Regulations, and to permit the inspection of such records at reasonable times by an authorized representative of DMV. The Department of Motor Vehicles considers "reasonable time" to be 9:00 A.M. to 5:00 P.M., Monday through Friday.
- B. Any employees/runners/agents (paid or unpaid) who have been convicted of a felony or misdemeanor will not be permitted to be employed by the Private Service Bureau, unless the employer has conducted a review pursuant to article 23-A of the New York Corrections Law and determined that the employee is qualified.
- C. To comply with all state laws and regulations, and all municipal ordinances and regulations relating to public health and public safety for the business facility.
- D. To comply with all provisions of the New York State Vehicle and Traffic Law and the DMV Commissioner's Rules and Regulations relating to a Private Service Bureau.
- E. The Licensee must maintain and use only the name approved by the NYS Department of Motor Vehicles. This includes but is not limited to receipts, advertising, websites, etc.
- F. The Licensee must maintain current Workers Compensation and Disability Insurance Coverage if the Licensee has employees.
- G. The Licensee must immediately notify DMV when additional or substitute employees are employed by the Licensee.
- H. The Licensee must maintain a Book of Registry which sets forth the name, address, services rendered and the costs of each person obtaining services provided by the Licensee.
- I. The Licensee must issue receipts in carbon or computer-generated duplicate. The original must be given to the customer at the time the transaction is made, and the carbon or computer-generated duplicate must be retained by the Licensee.
- J. The Licensee's receipt forms shall be numbered consecutively and, in addition, the receipts shall contain the name and address of the Licensee and the following statement: "This is a licensed Private Service Bureau but is not an official agent of the Department of Motor Vehicles, State of New York."
- K. If the Licensee maintains a website that offers services or transactions through its Private Service Bureau license, the website must also utilize only the business name approved by NYS Department of Motor Vehicles. In addition, if a Licensee maintains a website that offers services or transactions that an applicant could obtain or conduct directly via the DMV's public website, the Licensee must include the following statement on its website on any and all pages that refer to licensing, registration or title transactions performed by the NYS Department of Motor Vehicles in a noticeably distinct manner and in bold type of a size equal to at least 24-point type.

NOTICE: THIS TRANSACTION OR SERVICE IS ALSO AVAILABLE, AT NO ADDITIONAL CHARGE, DIRECTLY FROM THE OFFICIAL DEPARTMENT OF MOTOR VEHICLES WEBSITE AT DMV.NY.GOV.

Conditions continued on next page.

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## **CONDITIONS** (continued)

- L. The Licensee must install and maintain a security system to deter unauthorized access to the secure area where DMV funds and/or paperwork are stored.
- M. The Licensee must have a secure document storage container that is large enough to deter unauthorized access to the secure area where DMV supplies and/or customer personal information is stored.
- N. The secure document storage container must be in an area that is limited to authorized personnel and that cannot be accessed by the public.
- O. The Licensee must store DMV funds in a secure, locked filing cabinet or combination safe.
- P. The Licensee must notify DMV immediately when additional services not listed in the application are rendered.
- Q. The Licensee must notify DMV in writing immediately if there is a change in the address of any member of the firm, partnership or corporation.
- R. The Licensee must notify DMV immediately, on a form provided by the department, when additional or substitute employees are engaged during the year, or when a change in corporate officers or individuals doing business under a trade name occurs.

### **CERTIFICATION**

CENTIFICATION					
I have read and understand the requirements. I certify that					
Name of Private Service Bureau will comply with these requirements and I understand that failure to maintain the above requirements will result in the suspension or revocation of					
the Private Service Bureau license.					
Print Name of					
Owner/Partner(s):	Title:				
Signature:	Date:				

#### **AFFIRMATION**

	ire application, are familiar with all its contents, and all answers, statements and all other nd corporation officer of the Private Service Bureau must sign in the space provided below.
Signature <b>X</b>	Title
Signature <b>X</b>	Title
3) Signature <b>X</b>	Title
Signature <b>X</b>	Title
Signature <b>X</b>	Title
Signature <b>X</b>	Title
7) Signature <b>X</b>	Title
8) Signature <b>X</b>	Title
9) Signature <b>X</b>	Title
Signature <b>X</b>	Title
	·

I affirm that all statements made by me on this form are true, complete and correct to the best of my knowledge. I understand all statements made by me in connection with this application are subject to investigation and verification, and the falsification or omission of information is cause for denial of this application.

I understand that making a false statement on this application, concealing a material fact, or submitting any documentation in support of this application that is false, may be punishable as a criminal offense and will result in the suspension, revocation, or refusal to issue a renewal of a Private Service Bureau License.

If you have any questions about this renewal application, contact our office at (518) 473-6586.

Please return this completed, signed form with all required documentation and your non-refundable, two-year, \$50.00 renewal fee to: NYS Department of Motor Vehicles, Partnering Programs, 6 Empire State Plaza, Room 322, Albany, NY 12228

REMARKS	