



- Complete **SECTION A (CARRIER INFORMATION)**.
- Complete **SECTION B (ADDS)** for any certified examiner (CE) who is being hired or reinstated with your company.
- Complete **SECTION C (DROPS)** for any certified examiner (CE) who has left service with your company.

Please type or print the following information:

SECTION A - CARRIER INFORMATION

Carrier/DBA Name	Legal Name (if different)	Federal ID Number	19-A Business ID Number
Street Address	City	State	Zip Code
Name of Carrier Representative	Signature of Carrier Representative X	Date	

SECTION B - ADDS

CE'S NAME Last	First			M.I.
Driver License Number	Date of Birth	State of License	Effective Date CE Hired/Reinstated	CE #

CE'S NAME Last	First			M.I.
Driver License Number	Date of Birth	State of License	Effective Date CE Hired/Reinstated	CE #

CE'S NAME Last	First			M.I.
Driver License Number	Date of Birth	State of License	Effective Date CE Hired/Reinstated	CE #

SECTION C - DROPS

CE'S NAME Last	First			M.I.
Driver License Number	Date of Birth	State of License	Effective Date CE Dropped	CE #

CE'S NAME Last	First			M.I.
Driver License Number	Date of Birth	State of License	Effective Date CE Dropped	CE #

CE'S NAME Last	First			M.I.
Driver License Number	Date of Birth	State of License	Effective Date CE Dropped	CE #

**ELECTRONIC CARRIERS:** Add and drop your CEs online using the 19-A system. Keep a copy of the completed DS-885CE in your 19-A files.

**NON-ELECTRONIC CARRIERS:** Submit the completed form to: New York State Department of Motor Vehicles, Bus Driver Unit, 6 Empire State Plaza, Rm 331, Albany, New York 12228. You can also submit the completed form via Fax at (518) 474-0593 or via e-mail at [busdriverunit@dmv.ny.gov](mailto:busdriverunit@dmv.ny.gov). Keep a copy of the completed DS-885CE in your 19-A files. **The Bus Driver Unit must receive this form within 10 days of the effective date listed above.**

