



INSTRUCTIONS

- ◆ Each owner, partner, corporate officer, manager, agent or employee (paid or unpaid) listed on any application for the original license or for a branch license, or who has become newly associated with the business in any of its capacities, MUST fill out an Employee Roster form.
- ◆ The owner of the Private Service Bureau and the employee MUST sign each submission of the employee roster.
- ◆ A photocopy of the employee's New York State driver license or non-driver ID card is required.

NOTE: The roster must be completed and submitted to the DMV Private Service Bureau (PSB) Unit any time an employee is added to your business. Failure to do so may result in the suspension or revocation of your PSB license.

SECTION 1			
Name of Private Service Bureau		PSB License #	Today's Date
Mailing Address of Private Service Bureau (Street & No.)		Telephone # ()	
City	State	Zip Code	Fax # ()

SECTION 2

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

Name	Driver License Number	Last 4 of Social Security Number	Date Hired

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.

SECTION 3

1. Are you working for the NYS Department of Motor Vehicles or have you ever worked for the NYS Department of Motor Vehicles? Yes No

If "Yes", provide the following information:

Address of DMV Office	Date of Employment

2. Have you ever had an application and/or license denied, cancelled, suspended or revoked by the NYS Department of Motor Vehicles? Yes No

If "Yes", provide the date and reason for the denial in the remarks section:

3. Have you ever been affiliated with, or employed by, any other Private Service Bureaus? Yes No

If "Yes", list the name(s) of the Private Service Bureau(s):

SECTION 3 (continued)

4. Has any licensing or certification organization, including a government agency, ever determined that you committed misconduct, unprofessional conduct, or negligence that resulted in criminal charges? Yes No

If "Yes", explain in the remarks section:

5. Have you ever been convicted of a criminal offence (felony or misdemeanor)? Yes No

If "Yes", explain in the remarks section:

6. Do you have an arrest or criminal accusation against you currently pending? Yes No

If "Yes", explain in the remarks section:

SECTION 4

AFFIRMATION

All of the undersigned affirm they have read the entire application, are familiar with all its contents, and all answers, statements and all other matters in it are true. Each owner, partner, manager, corporation officer and major stockholder (20% or more) of the Private Service Bureau must sign in the space provided below.

Owner Signature **X** _____ Title _____

Partner Signature **X** _____ Title _____

Corporate Officer Signature **X** _____ Title _____

Manager Signature **X** _____ Title _____

Employee Signature **X** _____ Title _____

To knowingly make a false statement or conceal a material fact in this application is a criminal offense, and will result in the revocation of your Private Service Bureau license. False statements are punishable under Section 210.45 of the Penal Code.

Pursuant to Vehicle and Traffic Law Section 392, any person knowingly making a false statement in an application for any document issued by the Department or in any proof or statement in writing in connection with such an application shall be guilty of a misdemeanor.

Vehicle and Traffic Law Section 394(5) authorizes the Department to suspend or revoke a Private Service Bureau license or refuse to issue a renewal thereof where the licensee has made a material false statement or concealed a material fact in connection with the licensee's application for a license or renewal.

Return this form with all required documentation to:

NYS Department of Motor Vehicles
Partnering Programs, PSB Unit
6 Empire State Plaza Room 322
Albany NY 12228