

42 Broadway 5th Floor New York, NY 10004

Dial 311 (212-NEW-YORK)

nyc.gov/consumers

SURRENDER FORM

If you currently hold a Horse Drawn Cab license issued by the Department of Consumer Affairs (DCA) and would like to surrender it for a refund and/or request a transfer of your license to another individual/business, please complete the form below and attach your original license document.

| Business Name: | | | |
|--|-------|------------|--|
| Business Address: | | | |
| DCA License Issued Date: | | | |
| DCA License Number: | | | |
| CAMIS Number: | | | |
| DCA License Plate Number: | | | |
| Why are you surrendering your license? | | | |
| Will you be vacating the premises? | ☐ YES | □ NO | |
| If known, please provide the name of the new occupants and their business type. | | | |
| Mailing address where a refund will be sent if you qualify. | | | |
| I understand that continued operation without a license may subject me to civil and/or criminal penalties. In addition, I understand that falsification of any statement made herein is an offense punishable by a fine or imprisonment or both. | | | |
| Signature | | Print Name | |
| Title (if any) | | Date | |