



RENTAL PROGRAM

RENTAL COMPANY INITIAL ENROLLMENT APPLICATION

Mail to: NYC Department of Finance, Rental Program, 66 John Street, 3rd Floor, New York, NY 10038

Instructions: Use this application to enroll your company in the Rental Program. You must provide this completed enrollment application, the completed F1 form, with check(s) and Lease Rider along with; a blank rental agreement, corporate by laws, certificate of corporation documents, and a corporation seal affixed on company letterhead. **A lease rider is required** if the plate(s) being enrolled are leased, and registered to a different owner name. If you need assistance completing forms or have any questions, please contact the Fleet/Rental Unit at (212) 361-1169 or (212) 361-8240.

SECTION I - ENROLLMENT CONTACT INFORMATION

1. Lessor's Name:

2. D/B/A Name (if different):

3. Business Type: Check one of the boxes below and write in the SSN and/or EIN as indicated.

a. Sole Proprietorship

Social Security Number:

____ | ____ | ____

b. Partnership

Social Security Number:

____ | ____ | ____ and

Employer Identification Number:

____ | _____

c. Corporation

Employer Identification Number:

____ | _____

4. Business Address:

City:

State:

Zip Code:

5. Contact Name:

6. Telephone Number:

7. E-mail Address:

8. Bank Name:

9. Bank Address:

City:

State:

Zip Code:

SECTION II - CORPORATE CERTIFICATION

The undersigned affirms that the lessor is in the business of renting and/or leasing vehicles and that all of the vehicles that will be enrolled in the Car Rental Program will be used for rental or leasing purposes.

Print Name of Corporate Officer

Title

Corporate Officer's Signature

Date