

KATHY HOCHUL

MARIE THERESE DOMINGUEZ Commissioner

Sample, Figure II

PERMIT

CASE: 00000 DATED: xx/xx/xxxx

Company Name Street Address, City, State, Zip Code

This Permit is evidence of the above-named carrier's authority to engage in transportation as a contract carrier of passengers by motor vehicle as follows:

Chartered or special parties, as defined in Section 700.1(i) and (j) of Title 17 of the Official Compilation of Codes, Rules and Regulations of the State of New York between all point in the State.

This Permit will be in effect as long as the carrier is in compliance with State law and Department requirements and is subject to any terms, conditions and limitations as are now, or may later be attached to this privilege.

Failure to meet these conditions will constitute grounds for the suspension or revocation of this Permit.

Any change in ownership must have the prior written approval of the Department. Any change in the address of the carrier must be reported in writing to the Department within 10 days of the change taking place.

By the Office of Modal Safety & Security

REFERENCE: New Service Application received on xx/xx/xxxx