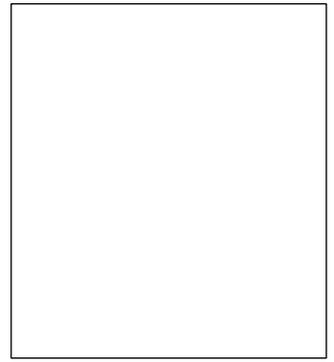




TOWN OF BABYLON

Town Clerk's Office
200 East Sunrise Highway,
Lindenhurst, NY 11757-2598

Phone No. (631) 957-4291 Email:



Expeditor Registration

Expeditor Information

Name:

Physical Address:

Telephone Number:

E-Mail:

Date of Birth:

Business Information

Business Name:

Business Address:

Nature of Business:

Telephone Number:

E-Mail:

Employer ID/Tax ID Number:

Statement of Qualifications

Are you at least 18 years of age? Yes _____ No _____

Have you (or has a principal, officer or employee, if a corporate applicant) been convicted of a criminal offense related to giving or receiving a bribe, giving or receiving unlawful gratuities, official misconduct or any other corruption related acts? Yes _____ No _____

By signing my name below, I affirm under penalties of perjury that the information contained herein is true. I further affirm that this application is accepted on the condition that the provisions and regulations of the Town of Babylon Chapter 118 shall be complied with. Failure to comply with said Code, could result in revocation of this registration/license.

Sworn to before me this _____ day of _____, 20____

The undersigned agrees to conform to all applicable laws of the Town of Babylon

Notary Public

Signature - Applicant

For Office Use Only:

Date Issued:

Date Expired:

Clerk's Signature:

Paid: Cash Check Money Order