

6. **Personal Information**

Have you ever been convicted of any crime or offense other than traffic infractions? Yes No
If yes, answer the following (Add additional information on an attached sheet). This item must be completed.

Date of conviction	Place of conviction	Nature of crime or offense	Sentence imposed

7. No permit can be issued unless the required certificates (see below) are received, and you sign the certification below.

From your insurance company, you must obtain a completed C-105.2 proving Workers' Compensation Insurance coverage and a completed DB-120.1 proving Disability insurance coverage. Both certificates of insurance are to be provided to this office.

Other acceptable forms of proof:

- U-26.3 from NYSIF
- If self-insured, SI-12, SI-105.2P, or SIG-105.2 for WC and DB-155 or DB120.2 for Disability

If insured through the NY State Insurance Fund, visit www.nysif.com and create an online account. Click on eCerts to obtain certificates of insurance U-26.3 and DB-120.1. You can also e-mail the NY State Insurance Fund at certificates@nysif.com.

If not liable for WC and/or Disability insurance, provide a completed CE-200 exemption certificate to this office. This certificate can be obtained at https://www.businessexpress.ny.gov/app/answers/cms/a_id/2263/kw/CE. You may contact the Workers' Compensation Board at 866-298-7830 for assistance in obtaining this certificate.

I hereby certify that all information contained in this application is true and accurate.

Signature

Title

Print name

_____/_____/_____
Date