



## **GENERAL INSTRUCTIONS:**

Welcome to the Incorporated Village of Hempstead! All businesses in the Village of Hempstead including medical and attorney offices are required to have a Business License to engage in or carry on any business, trade or calling, in accordance with the provisions of Chapter 86 of the Village code. Your Business License is a license that expires two years after issuance, unless otherwise indicated. Renewals should be submitted promptly or be subject to an additional \$25.00 penalty for every 30 days past the expiration date. **Failure to obtain or renew the required license(s) will result in issuance of a summons, and fines imposed by the Village Court.** All applications are subject to approval by the Board of Trustees.

Applications are accepted IN PERSON ONLY by appointment, and must be submitted to:

**Business License Department  
99 Nichols Court  
Hempstead, NY 11550**

Submission of application and payment of filing fees does not constitute permission to operate. It is the responsibility of the proprietor to carefully read and understand the requirements of the application, including any relevant supplemental applications necessary to operate a business in the Village of Hempstead.

Supplemental applications required to operate in the Village of Hempstead include the following:

Cabaret License  
Commercial Landscaper License  
Second Hand Dealer License (required of those businesses dealing in the commercial purchase or sale of secondhand articles)  
Amusement Device License  
Pawnbroker License  
Taxi Cab Owner/Driver & Tow Car Owner/Driver License (Hempstead PD Records & License Bureau)  
Planning Board Application\*

Any questions regarding the application(s) enclosed can be directed to **516-489-3400 x 392**. For licenses administered by the Hempstead PD Records & License Bureau, please contact Officer Cheryl Jackson 516-483-6200, extension 306.

**\*Any business established in the Village after January 1, 2008 and a change of owner**, is obligated to appear before the Pre-Submission Planning Board (PSPB) prior to commencing operations. In the event that you opened your business after this date, and you did not appear before the PSPB, **YOU MUST SIMULTANEOUSLY SUBMIT A PLANNING BOARD APPLICATION** with your Business License application. **Your business license will not be accepted until you have submitted an application to the PSPB.** Failure to comply will constitute a violation of the Village code. Please contact *Secretary to the Planning Board, Michelle Banks at 516-478-6263* for matters pertaining to the Planning Board Application or the PSPB.

## **CHECKLIST:**

**Copies of the following documents are required of all applicants and renewals:**

- Signed & notarized completed application
- Pre-Submission Planning Board Approval Letter (Only if New Business or change of Owner)
- Copy of Building Dept. Permit, which allows your type of business at the location. (Only if New Business or change of Owner)
- Two passport photos (Only if New Business or change of owner)
- DMV Driver's license or non-driver's ID card
- Worker's Compensation Insurance certificate or NY State Certificate of Attestation of Exemption (Form CE-200) which can be obtained at <http://www.wcb.ny.gov/>. It must be dated and signed.
- Certificate of Commercial/ General Liability(coverage that can protect you from a variety of claims including bodily injury, property damage, personal injury and others that can arise from your business operations) listing Inc. Village of Hempstead 99 Nichols Ct. Hempstead NY 11550, as Certificate Holder with Authorized representative signature.
- Federal Employer's ID (EIN) # or NYS sales tax Certificate of Authority
- A Back Flow Test result only if responsible for water bill.
- Call or email to schedule an appointment: 516-489-3400 x 392/ [nbonilla@villageofhempsteadny.gov](mailto:nbonilla@villageofhempsteadny.gov)

\*\*\*Other NYS Documents may be required depending on business type (see additional checklist) \*\*\*

**If Any Document is missing, your application will not be accepted, No Exceptions!**

**ADDITIONAL CHECKLIST:**

**Restaurants, delicatessens, retail bakeries, and taverns:**

- Nassau County Dept. of Health Food Establishment Permit

**Supermarkets, groceries, convenience stores, wholesale clubs and bakeries, fish, meat and produce markets, food manufactures and other food selling establishments:**

- New York State Dept. of Agriculture & Markets License

**Motor Vehicle Repair or Body Shop:**

- Proof of registration of motor vehicle repair & body shop from New York State DMV

**Beauty Salons, Barber Shops and Nail Salons:**

- Appearance Enhancement Business License to operate an Appearance Enhancement establishment/ Barber Shop from New York State.

**\* First time applicants: Please note if you never submitted any of the items below you may be asked to do so even if a renewal.**

- Individuals using their name or trade name must present a certified copy of the business certificate on file in the Nassau County clerk's office

A partnership: Certificate on file in the Nassau County Clerk's office

A corporation must furnish a copy of the Secretary of State filing receipt. If not a New York State Corp., must submit a Certificate of Authority to do business in New York State.



APPLICATION FOR BUSINESS LICENSE  
Inc. Village of Hempstead

**FEE: \$300.00 Biennial License (Fee is Non-refundable)**

**Account ID:**

**PLEASE TYPE OR PRINT CLEARLY**      Applicant should NOT write above this line

**Any question that does not apply to your business please indicate N/A.**

We (I) hereby apply for a License to engage in the following business:

1. Name of Business: \_\_\_\_\_

2. Type of use: (Specify i.e. bar, discount store, retail, restaurant)

\_\_\_\_\_

3. Business Phone Number: (    ) \_\_\_\_\_ Type: (Corp., LLC, etc.) \_\_\_\_\_

4. Address of Business: \_\_\_\_\_, Hempstead, N.Y.

5. If Business has a DBA (doing business as) Please indicate name:

\_\_\_\_\_

6. Mailing Address:

\_\_\_\_\_

7. Owner of Building / Landlord: (Name & Address)

\_\_\_\_\_

8. (Required-Do not leave blank) Section \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

9. a.) Name of Business owner: \_\_\_\_\_

b.) Address of Business owner: \_\_\_\_\_

10. Email address: \_\_\_\_\_

11. Owner's Phone #: \_\_\_\_\_

12. Are you a U.S. Citizen? \_\_\_\_\_ If not, state which country you are a Citizen of: \_\_\_\_\_

13. Date of Birth: \_\_\_\_\_

14. Do you agree to comply with the provisions of the Code of Ordinances of the Inc. Village of Hempstead? \_\_\_\_\_

15. When did you (the applicant) start doing business in the Inc. Village of Hempstead? \_\_\_\_\_

\_\_\_\_\_

17. **Criminal History:** Whether or not the applicant or, in the case of a corporation, whether any officer or director thereof has been convicted of a crime, offense or violation of any municipal ordinance or law, and if so, specify the municipality or jurisdiction where the offense occurred, the nature of the same and the penalty assessed therefore.

List any and all previous or pending arrests and/or convictions, stating when, where and Court Disposition:  
(Indicate N/A if not applicable)

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If needed, attach additional sheets to application

18. Are you currently serving on active duty in the U.S. Armed Forces? \_\_\_\_\_

19. Are you a veteran of the U.S. Armed Forces? \_\_\_\_\_

20. Have you been denied a license or had a license suspended or revoked by any Federal, State, or Local Government Agency? \_\_\_\_\_

If yes, provide details

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If needed, attach additional sheets to application

21. Will the business: **Have any professional entertainment or floor show of any kind whatsoever or similar entertainment, including dancing by the patrons, in connection with the business of directly or indirectly selling or serving food or drink to the public or provide ANY FORM of entertainment, including music, whether live or mechanical, singing, dancing or any type of game of amusement.**

\_\_\_\_\_yes \_\_\_\_\_no (if yes, you must also apply for a cabaret license)

22. Are you applying for a liquor license? If so what kind: \_\_\_\_\_  
(If you currently hold a State Liquor Authority license, attach copy)

23. Federal Employers No.: \_\_\_\_\_

**IMPORTANT NOTICE TO LICENSEE**

In accordance with Section 57 of the New York Workmen's Compensation Law and Section 22; subdivision 8 of the New York State Disability Benefits Law, it is necessary that you comply with the requirements of these statutes as a pre-requisition to the issuance of, or renewal of, your license.

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I. **WORKMAN'S COMPENSATION INSURANCE: (Must have; attach copy-If not applicable, attach Proof of Exemption)**

II. **LIABILITY INSURANCE: (MUST HAVE -provide a copy of the declaration page with a certificate of Insurance listing Inc. Village of Hempstead as Certificate Holder.)**

24. **CORPORATION OR PARTNERSHIP**

NAME OF BUSINESS: \_\_\_\_\_

PRINCIPAL PLACE OF BUSINESS: \_\_\_\_\_

NAME AND RESIDENCE ADDRESSES OF PERSONS COMPOSING FIRM:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

25. Designated Agent: (Located in Hempstead and authorized to accept notices and/or summonses in the respect to violations of any laws or regulations)

Name: \_\_\_\_\_ Telephone No.: \_\_\_\_\_

Address: \_\_\_\_\_

STATE OF NEW YORK

SS:

COUNTY OF NASSAU

I \_\_\_\_\_ hereby declare, under oath, that I fully understand and have answered all of the above questions truthfully, and acknowledge my obligation to provide the village with any changes or additions to the information contained in or annexed hereto. Should I be granted a license to operate within the Incorporated Village of Hempstead, all my employees and I will abide by all Federal, State, Town and Village laws. I understand that this license is non-transferable and will expire two years from date of issuance and that there is no grace period for renewal. I agree to maintain a valid license and insurance as long as I conduct business within the Incorporated Village of Hempstead.

Sworn to before me this \_\_\_\_\_ day

Signature: \_\_\_\_\_

Of \_\_\_\_\_, 20\_\_\_\_\_:

Title: \_\_\_\_\_

(state whether owner agent, officer, etc.)

\_\_\_\_\_

NOTARY PUBLIC

Except as otherwise specifically provided, every applicant for a license shall have this statement signed and sworn to by the applicant in person if an individual, by all partners if a partnership and by the president or duly authorized officer if a corporation.