



Application by Payee or Agency Representative for Issuance of Replacement Check

All sections must be completed to ensure accurate and timely action.

1. Agency name and mailing address

Note: Agency mailing address must be entered wholly within the box to the left. Any part of the address that appears outside the box may prevent delivery.

2. 5-digit agency code _____

3. Requested action (mark an X in one box) Delete item/photocopy if paid Send forgery affidavit

4. Check # _____ Check date ____ / ____ / ____ Check amount _____

5. Payee name _____
(Print name)

6. Authorized agency representative _____
(Print name)

Telephone number (____) _____ Fax number (____) _____

E-mail address _____

Items 7 through 10 are to be completed by agency representative or payee.

7. I hereby affirm that (mark an X in one box):

- I am the owner of and entitled to full and exclusive possession of the above-described check.
- I am authorized to certify this application for the applicant.
- I am entitled to the above described check because _____

8. To the best of my knowledge the above-described check was (mark an X in one box):

- Mutilated, defaced, or destroyed and therefore cannot be negotiated (submit check with application)
- Not received
- Lost
- Stolen

9. If lost or stolen the check was was not endorsed (mark an X in one box).

In consideration for the issuance of a replacement check as originally drawn, if I have not already done so, I agree to surrender the original check to the Commissioner of Taxation and Finance of the State of New York should the original check at any time hereafter come into my possession or control. I further agree to reimburse the State of New York for any loss or damage resulting from the issuance of the replacement check for which this application is made.

10. I hereby affirm the above to be true under the penalties of perjury.

(Signature of applicant or representative)

(Date)

Mail this completed application to: **NYS DIVISION OF THE TREASURY, PO BOX 22119, ALBANY NY 12201-2119**

Telephone: (518) 474-6232 or (518) 402-4123

Fax: (518) 473-9163