

**Step 1:** Please provide us with the Name, Address and E-ZPass Account number you are requesting a HOV Tag(s) for:

*E-ZPass Account #*

*Address Line 1*

*E-ZPass Account Name*

*Address Line 2*

*City, State, Zip*

**Step 2:** Tell us how many HOV Tags to send you (2 maximum) \_\_\_\_\_

(If you have previously received an HOV Tag, or have an outstanding request for an HOV tag, you may only request one (1) HOV tag. The number of HOV tags cannot exceed two (2) on an E-ZPass account. The overall number of E-ZPass tags on your account cannot exceed the number of eligible vehicles.)

**Step 3:** Update your vehicles. Please list below all vehicles that should be on your E-ZPass account. We will add any new vehicles and remove any vehicle currently on your account that is not listed below. Please note that all vehicles will be validated with the NYS DMV for registration to a Staten Island address. There is a maximum of two (2) HOV tags per account and the overall number of E-ZPass tags on your account cannot exceed the number of eligible vehicles.

	PLATE #	STATE	YEAR	MAKE	MODEL
1)	_____	_____	_____	_____	_____
2)	_____	_____	_____	_____	_____
3)	_____	_____	_____	_____	_____
4)	_____	_____	_____	_____	_____

**Step 4:** Please note if your Payment Method is CHECK or CASH, a refundable \$10.00 tag deposit per tag will be deducted from your account. Please ensure that your account has sufficient funds.

**Mail this form and your check to the following address:**

E-ZPass New York Service Center  
PO Box 149008  
Staten Island, NY 10314-9008

\* A vehicle registration may be used on only one E-ZPass account. Residency status is subject to periodic review. Please note that vehicles used for commercial purposes are not eligible for residency plans **Plan Code: (SICP)**.