

**BBL EZ-FORM**

VENDOR EMPLOYEE BADGE  
APPLICATION FORM 2013-02

DCRA USE ONLY  
CUSTOMER NO.

**LANGUAGE PREFERRED:**

English     Spanish     Chinese     Vietnamese     Amharic     Korean    Other:

**VENDOR TYPE:**

FOOD (CLASS A)     MERCHANDISE (CLASS B)     SERVICES (CLASS D)

**Section A                      APPLICANT INFORMATION**

APPLICANT NAME \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ SUITE OR APARTMENT # \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_  
 PHONE NUMBER (        ) \_\_\_\_\_ - \_\_\_\_\_ EMAIL \_\_\_\_\_ @ \_\_\_\_\_  
 SOCIAL SECURITY NUMBER \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ DATE OF BIRTH \_\_\_\_/\_\_\_\_/\_\_\_\_ PLACE OF BIRTH \_\_\_\_\_  
 DRIVER'S LICENSE NO: \_\_\_\_\_ STATE OF ISSUANCE \_\_\_\_\_ EXPIRATION DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

**Section B                      COMPANY INFORMATION**

BUSINESS NAME \_\_\_\_\_  
 VENDING LICENSE NO. \_\_\_\_\_ EXPIRATION DATE \_\_\_\_/\_\_\_\_/\_\_\_\_  
 PRINT NAME \_\_\_\_\_ TITLE \_\_\_\_\_  
 COMPANY SIGNATORY \_\_\_\_\_ DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

**Section C                      APPLICANT'S SIGNATURE**

**Hand Deliver** your signed BBL-EZ application and a check, cash, or money order, payable to "DC Treasurer", to :

**DCRA Business License Center**  
 1100 4<sup>th</sup> Street SW 2<sup>nd</sup> Floor  
 Washington, DC 20024

I hereby submit this application, required forms, and payment in the amount of \$ \_\_\_\_\_ for consideration of a Vendor Employee License based on the information in this application.

**Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

I/We understand that, anyone who makes a false statement on this form can be criminally prosecuted; and, if convicted, fined up to \$1000, imprisoned up to 180 days, or both, under DC Official Code § 22-2045.

**DC INSPECTOR GENERAL HOTLINE:** *If you are aware of corruption, fraud, waste, abuse or mismanagement involving any DC government agency, official or program, Contact the Office of the Inspector General (OIG) at (202) 727-0267 or (800) 521-1639 (toll free). All reports are confidential and you may remain anonymous by law. Government employees are protected from reprisals or retaliation by their employers for reporting to the OIG. The information you provide may result in an investigation leading to administrative action, civil penalties or criminal prosecution in appropriate cases.*

**NOTICE OF NON-DISCRIMINATION:** *In accordance with DC Human Rights Act of 1977, as amended, DC Code Section 2.1401.01 et seq., ("the Act") the District of Columbia does not discriminate on the basis of race, color, national origin, sex, age, marital status, sexual orientation, family responsibilities, matriculation, political affiliation, disabilities, source of income, or place of residence or business. Discrimination in violation of this act will not be tolerated. Violators will be subject to disciplinary action.*