



Office of General Services

New York State Surplus Property Web User Registration and Agreement (CS-217.1)

Instructions: This application must be signed by a head elected or appointed official of the applicant organization. Please fill out all fields and send the completed form by email to ogs.sm.state.surplus@ogs.ny.gov or by fax to 518-457-4641.

Public Agency Information			
Legal Name of County/City/Town/Village			Select Type of Public Agency
Address			
City	State	Zip Code	County
Contact Information			
First Name		Last Name	*Requested User ID:
Phone	Fax		Email
Alternate Contact Name		Phone	*Your password will be emailed to you once your application is approved.
<p>By signing below, I certify that:</p> <ol style="list-style-type: none"> All information in this application is true and correct to the best of my knowledge, and that this organization is authorized and empowered to acquire surplus property as outlined in Section 167 of the State Finance Law; and On behalf of the applicant organization, I have read and agree to observe and comply with all terms and conditions of sale set forth; and I am authorized to obligate this organization for the payment of all charges assessed by the State of New York in relation to the acquisition of the state's surplus property, and that such charges will be paid promptly. 			
_____ Signature		_____ Date	
Type Name and Title of Head Administrative Official			
CS-217.1 (9/17)			