



Saratoga County Clerk's Office

Saratoga County Municipal Center
40 McMaster Street, Ballston Spa, NY 12020
Telephone (518) 885-2213
Email: countyclerk@saratogacountyny.gov

Fax (518) 884-4726
Website: www.saratogacountyny.gov

NOTICE

IF YOU FILE YOUR DOCUMENT, YOU MAY BE IN VIOLATION OF GENERAL BUSINESS LAW SECTION 399-dd

PLEASE TAKE NOTICE, that General Business Law Section 399-dd(6) states as follows: No person may file any document available for public inspection with any state agency political subdivision, or in any court of this state that contains a social security account number of any person, unless such other person is a dependent child, or has consented to such filing, except as required by federal or state law or regulation, or by court rule.

PLEASE TAKE FURTHER NOTICE, that General Business Law Section 399-dd(7), provides that the New York State Attorney General's Office may take the following action against you for any violation of General Business Law Section 399-dd:

Whenever there shall be a violation of this section, application may be made by the attorney general in the name of the people of the state of New York to a court or justice having jurisdiction by a special proceeding to issue an injunction, and upon notice to the defendant of not less than five days, to enjoin and restrain the continuance of such violations; and if it shall appear to the satisfaction of the court or justice that the defendant has, in fact, violated this section, an injunction may be issued by such court or justice, enjoining and restraining any further violation, without requiring proof that any person has, in fact, been injured or damaged thereby. In any such proceeding, the court may make allowances to the attorney general as provided in Civil Practice Law and Rules Section 8303(a)(6), and direct restitution. In connection with any such proposed application, the attorney general is authorized to take proof and make a determination of the relevant facts and to issue subpoenas in accordance with the Civil Practice Law and Rules. Whenever the court shall determine that a violation of subdivision two* of this section has occurred, the court may impose a civil penalty of not more than \$1,000.00 for a single violation and not more than \$100,000.00 for multiple violations resulting from a single act or incident. The second violation and any violation committed thereafter shall be punishable by a civil penalty of not more than \$5,000.00 for a single violation and not more than \$250,000.00 for multiple violations resulting from a single act or incident. No person, firm, partnership, association or corporation shall be deemed to have violated the provisions of this section if such person, firm, partnership, association or corporation shows, by a preponderance of the evidence, that the violation was not intentional and resulted from a bona fide error made notwithstanding the maintenance of procedures reasonably adopted to avoid such error.

* includes making available to the general public in any manner an individual's Social Security number

***REQUEST TO FILE AND/OR RECORD DOCUMENT(S) THAT CONTAIN
SOCIAL SECURITY NUMBER(S)***

I have read the foregoing Notice advising me of the provisions of General Business Law Section 399-dd, and I understand the potential legal consequences of filing a document containing another person's Social Security number. By my signature below, I am hereby requesting that the Saratoga County Clerk's Office file and/or record the

document _____

Dated _____

which I am submitting for filing and/or recording herewith.

(Initial if Applicable)

_____ The person whose Social Security number is contained in the
(initials) document is my dependent child.

_____ The person whose Social Security number is contained in the
(initials) document has consented to the document being filed and/or recorded
in the Saratoga County Clerk's Office.

I ____ do ____ do not (check one) have such consent in writing.

***I understand that the Saratoga County
Clerk's Office will file and/or record this
signed Notice with the document.***

PRINT NAME

SIGN NAME

DATE