

OFFICE OF THE BOARD OF SELECTMEN TOWN OF EAST BRIDGEWATER

> www.eastbridgewaterma.gov 175 CENTRAL STREET EAST BRIDGEWATER, MASSACHUSETTS 02333-1912 Email: rjohnson@eastbridgewaterma.gov

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APPLICATION FOR A LICENSE TO BUY, SELL, EXCHANGE OR ASSEMBLE SECONDHAND MOTOR VEHICLES OR PARTS THEREOF

Fees \$: Class I \$100.00Class II \$100.00Class III \$100.00(Check made payable to The Town of East Bridgewater and must be enclosed with application)										
I, the undersigned, duly authorized by the concern herein mentioned, hereby apply for a: (PLEASE CHECK ONE) Class I Class II Class II Class II Class III Cl										
to Buy, Sell, Exchange or Assemble second hand motor vehicles or parts thereof, in accordance with the provisions of Chapter 140 of the General Laws.										
WHAT IS THE NAME OF THE CONCERN:										
BUSINESS ADDRESS OF CONCERN:										
No. Street Name										
Town, State, Zip Code										
BUSINESS PHONE NUMBER: FAX#										
CELL NUMBER: EMAIL ADDRESS:										
IS THE ABOVE CONCERN AN: INDIVIDUAL CO-PARTNERSHIP ASSOCIATION CORPORATION										
IF AN INDIVIDUAL, STATE FULL NAME AND RESIDENTIAL ADDRESS:										
IF A CO-PARTENERSHIP, STATE FULL NAMES AND RESIDENTIAL ADDRESSES OF THE PERSONS COMPOSING IT:										
IF AN ASSOCIATION OR A CORPORATION, STATE FULL NAMES AND RESIDENTIAL ADDRESSES OF THE PRINCIPAL OFFICERS:										
PRESIDENT:										
SECRETARY:										
TREASURER:										

ARE Y	DU ENGAGED PRINCIPALLY IN THE BUSINESS OF:	BUYING 🗆	SELLING D	EXCHANGING MOTOR	R VEHICLES
IF SO,	IS YOUR PRINCIPAL BUSINESS THE SALE OF NEW MO	TOR VEHICLES?		YES 🗆	NO 🗆
IS YOL	IR PRINCIPAL BUSINESS THE BUYING AND SELLING O	F SECOND HAND	MOTOR VEHICLE	S? YES □	NO 🗆
IS YOL	IR PRINCIPAL BUSINESS THAT OF A MOTOR VEHICLE .	JUNK DEALER?		YES 🗆	NO 🗆

GIVE A COMPLETE DESCRIPTION OF ALL THE PREMISES TO BE USED FOR THE PURPOSE OF CARRYING ON THE BUSINESS:

	DAV							
HOURS OF OPERATION:								
	DAY:			TIME:				
ARE YOU RECOGNIZED		YES 🗆	NO 🗆					
IF SO, STATE NAME OF I	MANUFACTURER:							
HAVE YOU SIGNED CON	HAVE YOU SIGNED CONTRACT AS REQUIRED BY SECTION 58, CLASS I? YES NO							
HAVE YOU EVER APPLIE	D FOR A LICENSE TO DE	AL IN SECOND H	AND MOTOR V	EHICLES OR PAR	RTS THEREOF	? YES 🗆 NO 🗆		
IF SO, IN WHAT CITY / T	rown:							
DID YOU RECEIVE A LIC	ENSE?	YES 🗆	NO 🗆	FOR WH	IAT YEAR?			
	ed to you in Massachu Ispended or Revoked?		OTHER STATE NO □	to deal in mo	TOR VEHICLES	S OR PARTS		
IF SO, EXPLAIN WHY:								
	SIGN YOUR NAME IN F	=1 11 1						
	SIGN FOOR MARE IN F		(Duly authorized	to represent o	oncern)		
	PRINT NAME:							
	RESIDENCE:				No. Street Name			
	Town, State, Zip Code							
		IMPOR	TANT					

EVERY QUESTION MUST BE ANSWERED WITH FULL INFORMATION, AND FALSE STATEMENTS HEREIN MAY RESULT IN THE REJECTION OF YOUR APPLICATION OR THE SUBSEQUENT REVOCATION OF YOUR LICENSE IF ISSUED.

Note: If the applicant has not held a license in the year prior to this application, he must file a duplicate of the application with the registrar. (See Sec. 59)