



**CITY OF SOMERVILLE**  
Commonwealth of Massachusetts  
93 Highland Avenue  
Somerville, MA 02143  
(617) 625-6600

**Application to Renew Taxi Medallion License**

**MADKEP TRANSPORTATION INC**  
**13 PRINCETON ST**  
**SOMERVILLE MA 02144**

**License #:** BL15-000415  
**File #:** 15-330  
**Fee:** 305

Review and update the information below. If you have workers compensation insurance, attach proof showing the insurer and policy number. Then sign the Acknowledgment and return this form with your fee to the City Clerk's Office.

INFORMATION ON FILE:	CHANGES: (Note below or explain on a separate sheet)
<b>Business/DBA Name:</b> MADKEP TRANSPORTATION INC	
<b>Business Location:</b> 0 OUT OF AREA	
<b>Business Phone:</b> 617-666-1019	
<b>License Holder:</b> MADKEP TRANSPORTATION INC 13 PRINCETON ST SOMERVILLE MA 02144	
<b>Mailing Address:</b> MADKEP TRANSPORTATION INC 13 PRINCETON ST SOMERVILLE MA 02144	
<b>Business Type:</b> Corporation SANDRA DONAHUE DENISE FOSCAROTA PHILIP DONAHUE	
<b>FID:</b> 043000672	
<b>Emergency Contact:</b> DENISE FOSCAROTA <b>Phone:</b> 617-666-1019	
<b>Medallion #(s):</b> MEDALLION #64	

I hereby certify under the penalties of perjury that the following is true:

- All information shown above is true and accurate.
- Any changes above are subject to the approval of the BOARD OF ALDERMEN.
- I have filed all State tax returns and paid all State taxes required by law for this business.

Signature: Denise Foscarota Date: 3/22/16

Printed Name: Denise Foscarota Phone: 617-666-1019



City of Somerville, Massachusetts  
Finance Department, Treasury Division

**CERTIFICATE OF GOOD STANDING**

Exact name of taxpayer/applicant's business: MAOKER TRANSPORTATION INC

Address of taxpayer/applicant's business in Somerville: 13 Prince St

Address of taxpayer/applicant's home in Somerville: 13 Prince St

Taxpayer/applicant's phone: day: 617-666-7019 evening: \_\_\_\_\_

I, (print name) Dennis Foscutta, the undersigned Taxpayer, do hereby certify that all the information contained herein is true and correct and all taxes and fees due the City have been paid or that the Taxpayer has entered into an agreement to pay all taxes and fees and is current on said agreement.

SIGNED UNDER THE PAINS AND PENALTIES OF PERJURY, this 22 day of March, 20 16. Dennis Foscutta  
(Taxpayer's signature)

**CITY'S ACKNOWLEDGEMENT**

DATE OF ISSUANCE: \_\_\_\_\_ INCLUDES RELEVANT POSTINGS THROUGH: \_\_\_\_\_

TAXES AND ACCOUNT NUMBER(S) INCLUDED IN CERTIFICATE:

☐ Real Estate ☐ Water/Sewer ☐ Personal Property ☐ Other: \_\_\_\_\_

# 12827 # 226044001 # \_\_\_\_\_

NOTES:

CLERK'S INITIALS: LB

ORIGINAL STAMP:

**received**  
Barbara  
3-22-16