



**CITY OF SOMERVILLE
BOARD OF ALDERMEN**
93 HIGHLAND AVENUE
SOMERVILLE, MA 02143
(617) 625-6600

APPLICATION TO RENEW FLAMMABLES LICENSE

**CORESITE REAL ESTATE
ATTN: LEGAL
1050 17TH STREET
SUITE 800
DENVER, CO 80265**

License #: **531**
City # **F216**
Fee: **550.00**
Account ID: **431**
Reference #: **531**

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)
Business/DBA Name: CORESITE REAL ESTATE 70 INNERBELT, LLC. Business Location: 70 INNER BELT RD Business Phone: 303-405-1000	
License Holder: CORESITE REAL ESTATE 70 INNERBELT, LLC. 70 INNER BELT RD SOMERVILLE, MA 02143 303-405-1000	
Mailing Address: CORESITE REAL ESTATE ATTN: LEGAL 1050 17TH STREET SUITE 800 DENVER, CO 80265	1001 17th Street Suite 500 Denver, Co 80202
Business Type: CORPORATION (INC. LLC) SECRETARY - DEREK MCCANDLESS TREASURER - JEFFREY FINNIN PRESIDENT - THOMAS RAY	
FID: 208068170	
Food Manager/Emergency Contact: PETER PEREIRA 448-3109 617-406-8143	617-448-3109

Conditions: (to change any conditions, submit a new application. Contact the City Clerk's Office for more information)

Hours: **MO-SU 5 AM - MIDNIGHT**

Description of Location and/or Other Conditions:

Originally Issued 5/11/2000, Amended 9/27/2001. 100,000 Gallons. Operational 24 Hours/Day, 7 Days/Week.

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:  Date March 7, 2014

Print Name: Derek S. McCandless, Sr. Vice President & Secretary Phone 303-222-7307



City of Somerville, Massachusetts
Finance Department, Treasury Division

CERTIFICATE OF GOOD STANDING

Exact name of taxpayer/applicant's business: CoreSite Real Estate 70 Innerbelt, L.L.C.

Address of taxpayer/applicant's business in Somerville: 70 Innerbelt Road, 02143

Address of taxpayer/applicant's home in Somerville: N/A

Taxpayer/applicant's phone: day: 303-405-1000 evening: N/A

Derek S. McCandless, Senior Vice President and Secretary
I, (print name) of CoreSite Real Estate 70 Innerbelt, L.L.C., 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 7th day of March, 2014. DS
(Taxpayer's signature)

CITY'S ACKNOWLEDGEMENT

DATE OF ISSUANCE: 2 July INCLUDES RELEVANT POSTINGS THROUGH: _____

TAXES AND ACCOUNT NUMBER(S) INCLUDED IN CERTIFICATE:

Real Estate Water/Sewer Personal Property Other: _____

8054 # 55100200 # _____ # _____

NOTES:

CLERK'S INITIALS: [Signature]

ORIGINAL STAMP: [Signature]

The Commonwealth of Massachusetts
Department of Industrial Accidents
Office of Investigations
600 Washington Street
Boston, Mass. 02111

Workers' Compensation Insurance Affidavit - General Business

Applicant information:

Name: CoreSite Real Estate 70 Innerbelt, L.L.C.

Address: 1001 17th Street, Suite 500

City: Denver

State: CO

Zip: 80202

Phone #: 303-405-1000

- I am an employer with 0 employees (full and/or part time).
 I am a sole proprietor or partnership and have no employees.
 We are a corporation that has exercised our right of exemption per c152 s1(4), and have no employees.
 We are a nonprofit organization staffed by volunteers and have no employees.

Business Type:

- Retail
 Restaurant/Bar/Eating Establishment
 Office and/or Sales (real estate, auto, etc.)
 Nonprofit
 Entertainment
 Manufacturing
 Health Care
 Other data center

Workers' compensation insurance information (if applicable): N/A

Insurance Company Name:

Address:

City:

State:

Zip:

Phone #:

Policy #:

Expiration Date:

Applicant certification:

Failure to secure coverage as required under Section 25A of MGL 152 can lead to the imposition of criminal penalties of a fine up to \$1,500.00 and/or one years' imprisonment as well as civil penalties in the form of a STOP WORK ORDER and a fine of \$100.00 a day against me. I understand that a copy of this statement may be forwarded to the Office of Investigations of the DIA for coverage verification.

I do hereby certify under the pains and penalties of perjury that the information provided above is true and correct.

Signature: [Signature]

Date: March 7, 2014

Print Name: Derek S. McCordless, Sr. Vice President & Secretary

Official use only. Do not write in this area. To be completed by city or town official.

City or Town: _____ Permit/License #: _____

- Board of Health
 Building Department
 City/Town Clerk
 Licensing Board
 Selectmen's Office
 Other _____

Contact Person: _____ Phone #: _____