

## IMPORTANT

Dear License Holder:

It is time to renew the license issued by the Somerville Board of Aldermen. We are converting to a new software system, and you will see below the information we have on file for your license. Please fill out all six boxes below with the correct information so we can update our records, and return all of the pages with your fee to the City Clerk's Office. Call us at 617 625-6600 x4100 if you have any questions.

License Type: Taxi Medallion  
License Number: #191220  
Business Name: O.D.J. Taxi Inc  
Location: N/A  
Medallion(s): 1  
Special Conditions (if any):

Renewal Fee (Return with this application): \$250 per Medallion

PLEASE FILL IN ALL SIX BOXES BELOW:

2012 APR 19 P 2:18  
CITY CLERK'S OFFICE  
SOMERVILLE, MA

The DBA Name of the Business: O.D.J TAXI INC  
Somerville Address and Zip Code: 3 Harrison Somerville  
Phone Number of the Business: 781-856-9727

The Legal Name of the License Holder: Molaiqe Jules  
Street Address of the License Holder: 17 Ross Street -  
City, State and Zip Code of the License Holder: MEDFORD, MA 02155  
Phone Number of the License Holder: 781-396-1360 or 781-856-9727  
Email Address of the License Holder: \_\_\_\_\_

Where We Should Send Mail: Name: 17 Ross Street  
Street Address: MEDFORD MASS  
City, State and Zip Code: MEDFORD MA 02155  
Email: \_\_\_\_\_  
Phone Number: 781-396-1360 or 781-856-9727

Federal ID # (Do Not Give a Social Security #): 800 418 882

Emergency Contact and Phone (For Fire Dept. Use): \_\_\_\_\_

-OVER-

Type of Business (Check Only One and Give the Names Indicated):  
☒ Sole Proprietor: Name of Owner: Molaige Jules  
☐ Partnership (inc. LLP): Names of All Partners Who Own More Than 10%:  
  
☐ Trust: Names of All Trustees Who Own More Than 10%:  
  
☐ Corporation (inc. LLC): Name of President: O.D. J. TAXI INC Molaige Jules  
Name of Secretary: Molaige Jules  
Name of Treasurer: Molaige Jules  
Other (Attach a Description of the Form of Ownership and the Names of Owners)

**ACKNOWLEDGEMENT:** 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 Somerville Board of Aldermen.

-I have filed all State tax returns and paid all State taxes required by law for this business.

License Holder Signature: Molaige Jules

Date

4-19-2012