

CITY OF SOMERVILLE

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

Application to Renew Taxi Medallion License

IKE INC 600 WINDSOR PLACE SOMERVILLE MA 02143 License #:

BL15-001163

File #:

15-304

Fee:

250

Review and update the information below. <u>If you have workers compensation insurance</u>, attach proof showing the <u>insurer and policy number</u>. 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: IKE INC Business Location: 0 OUT OF AREA Business Phone: 617-628-1081	
License Holder: IKE INC 600 WINDSOR PLACE SOMERVILLE MA 02143	
Mailing Address: IKE INC 600 WINDSOR PLACE SOMERVILLE MA 02143	
Business Type: Corporation GERALD CHAILLE GERALD CHAILLE CHERYL HORAN	
FID: 042778092	
Emergency Contact: KAREN TAMAGNA Phone: 617-949-1002	
Medallion #(s): MEDALLION #58	

l hereby	certify	under th	ne pe	enalties	of	perjury	that	the	tollowing	IS	true:	
011		1										

- -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:	Mutol	Rehau	Date: /0/8//5			
Printed Name	Kindld	R Chaille	Phone: 6/7 678/08/			



City of Somerville, Massachusetts Finance Department, Treasury Division

CERTIFICATE OF GOOD STANDING

CERT	III ICITIE OI O	OOD STIMILDING					
Exact name of taxpayer/applicant's business: 6 () and Jellow TNC. In C. Address of taxpayer/applicant's business in Somerville: 600 Winduck Pl Somerville							
Address of taxpayer/applicant's business in Somerville: 600 Winduck Pl Somerville							
Address of taxpayer/applicant	's home in Somerville	e: <u>221 Hampsteaa</u>	1 St Methuen, Mi				
Taxpayer/applicant's phone: d	lay: 6/7 628	/08/ evening: 6/7	949 1003				
I, (print name) Holen hereby certify that all the info due the City have been paid o and fees and is current on said	ormation contained he or that the Taxpayer l agreement.	has entered into an agreement	all taxes and fees nt to pay all taxes				
SIGNED UNDER THE PAINS AND PENALTIES OF PERJURY, this day of							
		(Taxpayer's signatu	ire)				
CITY'S ACKNOWLEDGEMENT							
DATE OF ISSUANCE:	INCLUDE	S RELEVANT POSTINGS THROUGH	ī:				
TAXES AND ACCOUNT NUMBER(S) INCLUDED IN CERTIFICATE:							
		☐ Personal Property					
# 16826 #	146007011	# 129Ce	#				
NOTES: CLERK'S INITIALS:	R	ORIGINAL STAMP:	N. 877 * C** B & \$ ***				