

**APPLICATION FOR A CONSTABLE LICENSE  
CITY OF SOMERVILLE, COMMONWEALTH OF MASSACHUSETTS**

**To the Honorable Mayor and the Board of Aldermen of the City of Somerville:**

I respectfully request to be granted a license to operate as a Constable in the City of Somerville.

Name Edwin Torres Date of Birth 07/19/1999

Address, City, Zip 55B Smith St Boston mass 02120

How long at this address? 10 years Telephone 857-492-9815

Present Employer \_\_\_\_\_ Present Occupation constable

Do you currently hold a License to Carry a firearm in Massachusetts? \_\_\_\_\_ Yes ☒ No

Have you ever had a License to Carry a firearm revoked or suspended,  
or had an application for such denied, here or in any other jurisdiction? \_\_\_\_\_ Yes ☒ No

Where do you currently serve as an appointed Constable?

City or Town \_\_\_\_\_ Year first Appointed \_\_\_\_\_ City or Town \_\_\_\_\_ Year first Appointed \_\_\_\_\_

Somerville / ~~2012~~ 9/26/2013 Somerville mass 9/26/2013

**For new Constables only**, Why do you seek appointment? \_\_\_\_\_

**For new Constables only**, What are your qualifications? \_\_\_\_\_

**For new Constables only**, Who do you expect to serve? \_\_\_\_\_

I understand that this license will be subject to all of the terms, conditions, and limitations set forth in the Somerville Code of Ordinances, any applicable State and Federal laws, and any conditions prescribed by the Mayor or Board of Aldermen, and that it will be revocable at any time at the pleasure of the Board of Aldermen. I certify under the penalties of perjury that I am a citizen of the United States, that all statements in this application are true and accurate, and that to my best knowledge and belief, I have filed all State tax returns and paid all State taxes required under law.

Signature Edwin Torres Date 12/11/13

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Applicant Name Edwin Torres

**ATTORNEY RECOMMENDATION (For new Constables only):**

I, being a member of the Massachusetts Bar in good standing for the last \_\_\_\_\_ years, and being a resident of the applicant's home community of \_\_\_\_\_, do state upon honor that the applicant is personally known to me, that I have reviewed this application, and believe each of the statements on it to be true, and that the applicant is a person of good moral character and reputation, and competent to perform the duties of a Constable.

Signature \_\_\_\_\_ Print Name \_\_\_\_\_

Business Address \_\_\_\_\_

**REPUTABLE CITIZENS RECOMMENDATION (For new Constables only):**

We, the undersigned citizens of \_\_\_\_\_, hereby certify that the applicant is personally known to us, that we have reviewed this application, and believe each of the statements on it to be true, and that the applicant is a person of good moral character and reputation, competent to perform the duties of a Constable.

| Signature | Name (Print) | Street Address | Occupation |
|-----------|--------------|----------------|------------|
| _____     | _____        | _____          | _____      |
| _____     | _____        | _____          | _____      |
| _____     | _____        | _____          | _____      |
| _____     | _____        | _____          | _____      |

**POLICE CHIEF RECOMMENDATION (For all Constables):**

I, the Chief of Police, having reviewed this application for appointment or reappointment as a Constable and having, at the request of the Mayor, investigated the reputation and character of the applicant and his or her fitness for the office, all as provided by MGL c. 41 s. 91B, recommend that this application be:

Signature Charles J. Ferraro ☒ Approved ☐ Denied  
Date 2-3-14