



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

**APPLICATION TO RENEW TAXI MEDALLION LICENSE**

**J AND J TRANSPORTATION INC**  
**75 WAREHAM ST**  
**MEDFORD, MA 02155**

License #: **414**

City #74

Fee: **250.00**

Account ID: **329**

Reference #: **414**

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: For <b>J AND J TRANSPORTATION INC</b> Business Location: <b>OUT OF AREA</b> Business Phone: <b>781-391-1911</b>	
License Holder: <b>J AND J TRANSPORTATION INC</b> <b>75 WAREHAM ST</b> <b>MEDFORD, MA 02155</b> <b>781-391-1911</b>	
Mailing Address: <b>J AND J TRANSPORTATION INC</b> <b>MEDFORD, MA 02155</b>	
Business Type: <b>CORPORATION (INC. LLC)</b> <b>PRESIDENT - JASON PINTO</b> <b>SECRETARY - JASON PINTO</b>	
FID: <b>043195394</b>	
Food Manager/Emergency Contact: <b>JASON PINTO</b>	

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

Hours: **NOT APPLICABLE**

**MEDALLION #74**

Description of Location and/or Other Conditions:

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: Jason Pinto Pres Date: 7/18/13

Print Name: JASON PINTO PRES. Phone: 1 781 391 1911