

**TAXICAB MEDALLION APPLICATION  
AND TAXICAB OPERATOR LICENSE APPLICATION**

Application Fee \$250.00

Date June 22, 2010

FOR CITY CLERK'S OFFICE ONLY
Date Recorded <u>6-23-2010</u>
Amount Paid <u>\$ 250.00</u>

**To the Honorable, the Board of Aldermen of the City of Somerville:**

The undersigned respectfully prays that the Board of Aldermen issue the taxicab medallion listed below, and grant a license to operate the same taxicab for the conveyance of persons for hire from place to place within the City. This ownership and 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 Board of Aldermen and/or City Officials. This license shall be revocable at any time at the pleasure of the Board of Aldermen.

Medallion # 70

Current Owner Name Kings Transportation Co., Inc Phone 617-623-1498

Address (Include Zip Code) 36R Glen St Somerville Ma 02145

Applicant Name Somerville Trans. Co, Inc. Phone 978-423-8775

Mailing Address (Include Zip Code) PO Box 1676 Westford Ma 01886

Tax Identification Number: 75-2992167 Check one: SSN  FEIN

If a corporation, name of Majority Shareholder John DaSilva

Date of birth 8/20/60 SSN 021-52-8345

Do you hold a valid Somerville Taxi Driver's License? Yes  No

Do you hold a Taxi Driver's License in another city? Yes  No

If yes, in what City/State? \_\_\_\_\_

Do you own a Somerville Taxicab Medallion?  Yes  No

Have you ever owned a Somerville Taxicab Medallion?  Yes  No

Have you ever owned a Taxi Medallion elsewhere?  Yes  No

If yes, in what City/State? \_\_\_\_\_

Provide the following information if a bank is financing the purchase:

Name of Bank \_\_\_\_\_

Address (Include Zip Code) \_\_\_\_\_

1 2010 JUN 23 PM 2:09  
CITY CLERK'S OFFICE  
SOMERVILLE, MA

# 70  
Transfer

Provide the following information if a corporation is financing the purch

Name of Corporation \_\_\_\_\_

Address (Include Zip Code) \_\_\_\_\_

Name of President \_\_\_\_\_

Date of Birth \_\_\_\_\_ SS# \_\_\_\_\_

Name of Majority Shareholder \_\_\_\_\_

Date of Birth \_\_\_\_\_ SS# \_\_\_\_\_

**NOTE:** Include a REAP Attestation signed by a Corporate Officer, and a MA Secretary of State Certificate of Good Standing for the corporation.

Provide the following information if an individual is financing the purchase:

Name of Individual Joseph F Balduc, Jr

Address (Include Zip Code) 36R Glen St Somerville Ma 02145

Date of Birth 9/9/47 SS# 014-38-6532

**NOTE:** Include a REAP Attestation signed by the individual.

Describe any other financing: \_\_\_\_\_

Include with this Application the following documents:

- The attached REAP Attestation signed by the Applicant.
- The attached Certificate of Good Standing signed by the Applicant and acknowledged and stamped by the City's Treasury Department.
- A copy of an executed Purchase and Sale Agreement.
- If Applicant is a corporation, a copy of the Articles of Incorporation and the attached Certificate of Corporate Authority.
- If financing is by a corporation, a REAP Attestation signed by a Corporate Officer, and a MA Secretary of State Certificate of Good Standing for the corporation.
- if financing is by an individual, a REAP Attestation signed by the individual.

Applicant agrees to forward to the City Clerk a copy of a valid Registration for the vehicle, issued by the Registry of Motor Vehicles.

Signed under the pains and penalties of perjury this 22<sup>nd</sup> day of June, 2010

Signature of Applicant [Signature] Pres. Print Name John DaSilva, Pres.

**TAXI BUREAU RECOMMENDATION:**

The Somerville Taxi Bureau recommends that the application be:  Approved  Denied

Signature [Signature] Date 6/24/10


# STATEMENT OF CORPORATE AUTHORITY

I, John DaSilva, Clerk of  
Name of Clerk or Secretary  
Somerville Trans Co., Inc. hereby certify that,  
Name of Corporation  
at a meeting of the Board of Directors of said Corporation duly held on the 21<sup>st</sup> day of  
Date  
June, 2010, at which a quorum was present and voting throughout, the following  
Month Year  
vote was duly passed and is now in full force and effect:

VOTED: That John DaSilva be and  
Name of Officer authorized to sign for the Corporation  
hereby is authorized, directed and empowered, in the name and on behalf of this Corporation, to  
sign, seal with the corporate seal, execute, acknowledge and deliver all contracts, bonds and  
other obligations of the Corporation, the execution of any such contract, bond or obligation by  
such John DaSilva to be valid  
Name of Officer authorized to sign for the Corporation  
and binding upon this Corporation for all purposes. This vote remains in full force and effect,  
and has not been altered, amended or revoked by a subsequent vote of such directors.

I further certify that John DaSilva  
Name of Officer authorized to sign for the Corporation  
is the duly elected President of said Corporation.  
Title

Signed

  
Clerk or Secretary

Place of Business 33 Nabnasset St Westford Ma 01886

Date June 21, 2010

AFFIX CORPORATE SEAL HERE

In the event that the Clerk or Secretary is the same person as the Officer authorized to sign that contract, bond or other instrument for the Corporation, this certificate must be countersigned by another Officer of the Corporation:

Countersigned \_\_\_\_\_

Name & Title of Countersigning Officer \_\_\_\_\_

**MASSACHUSETTS DEPARTMENT OF REVENUE**


**REVENUE ENFORCEMENT AND PROTECTION (REAP) ATTESTATION**

I certify under the penalties of perjury that I, to my best knowledge and belief, have filed all State tax returns and paid all State taxes required under law.

Somerville Trans. Co., Inc.

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\* Signature of Individual or Corporate Name (Mandatory)

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By: Corporate Officer (Mandatory, if a corporation)

75-2992167

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\*\* Social Security Number (Voluntary) or Federal Identification Number (Mandatory, if a corporation)

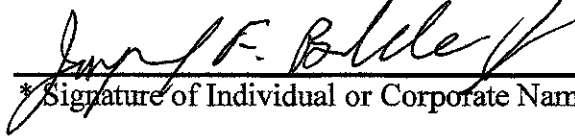
\* This license will not be issued unless this certification clause is signed by the applicant.

\*\* Your Social Security Number will be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing or tax payment obligations. Licensees who fail to correct their non-filing or delinquency will be subject to license suspension or revocation. This request is made under the authority of Mass. G.L. c. 62C s. 49A.

**MASSACHUSETTS DEPARTMENT OF REVENUE**

**REVENUE ENFORCEMENT AND PROTECTION (REAP) ATTESTATION**

I certify under the penalties of perjury that I, to my best knowledge and belief, have filed all State tax returns and paid all State taxes required under law.



\_\_\_\_\_  
\* Signature of Individual or Corporate Name (Mandatory)

\_\_\_\_\_  
By: Corporate Officer (Mandatory, if a corporation)

014-38-6532

\_\_\_\_\_  
\*\* Social Security Number (Voluntary) or Federal Identification Number (Mandatory, if a corporation)

\* This license will not be issued unless this certification clause is signed by the applicant.

\*\* Your Social Security Number will be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing or tax payment obligations. Licensees who fail to correct their non-filing or delinquency will be subject to license suspension or revocation. This request is made under the authority of Mass. G.L. c. 62C s. 49A.

## TAXICAB MEDALLION AND SALE AGREEMENT

Agreement made by and between Kings Transportation Company Inc., c/o Joseph Bouduc, Jr of 36R Glen St Somerville, Ma 02145, hereinafter called the SELLER and Somerville Trans. Co. Inc., c/o John DaSilva of 33 Nabnasset St Westford Ma 01886, or nominee, hereinafter called the BUYER.

WHEREAS, the SELLER is willing to sell and the BUYER is willing to buy a certain Hackney Carriage License and Medallion, issued by the Board of Aldermen of the City of Somerville, being numbered 70 for the year 2010-2011 for the sum of FIFTY THOUSAND DOLLARS (50,000.00)

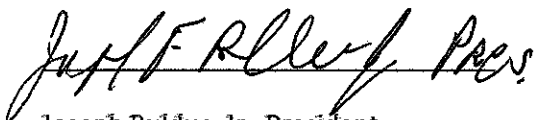
The SELLER hereby warrants that said Hackney Carriage Medallion has not been pledged, mortgaged or hypothecated and is free and clear of any and all encumbrances, and there are no monies due thereon, and that the SELLER will deliver good, clear, record, marketable title.

It is strictly understood by and between the parties that this entire transaction and sale is subject to the approval of the Board of Alderman of the City of Somerville.

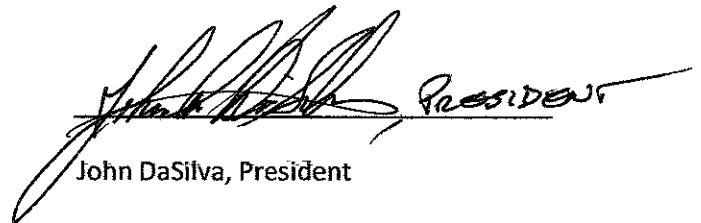
IN WITNESS WHEREOF, we hereunto set our hands and seals this 23<sup>rd</sup> day of June, 2010

Kings Transportation Company, Inc.

Somerville Trans. Co., Inc.



Joseph Bouduc, Jr, President



John DaSilva, President



City of Somerville, Massachusetts  
 Finance Department, Treasury Division  
 Joseph A. Curtatone  
 Mayor

**CERTIFICATE OF GOOD STANDING**

1. Exact name of Taxpayer: Joseph Bolduc, Jr
2. Location, including street address, of Taxpayer's property or principal office: \_\_\_\_\_  
36R Glen St Somerville Ma 02145
3. Taxpayer's Account Number(s): \_\_\_\_\_

I, Joseph Bolduc, Jr, 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 23<sup>rd</sup> day of June, 2010

(Taxpayer's signature)

**CITY'S ACKNOWLEDGEMENT**

**DATE OF ISSUANCE:** \_\_\_\_\_ **INCLUDES RELEVANT POSTINGS THROUGH:** \_\_\_\_\_

**TAXES AND ACCOUNT NUMBER(S) INCLUDED IN CERTIFICATE:**

<input type="checkbox"/> Real Estate	<input type="checkbox"/> Water/Sewer	<input type="checkbox"/> Personal Property	<input type="checkbox"/> Other: _____
# <u>03124020</u>	# <u>114094011</u>	# _____	# _____

**CLERK'S INITIALS:** UB

**ORIGINAL STAMP:**

**received**  
[Signature]  
6-23-10