

#### CITY OF SOMERVILLE

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

### **Application to Renew Flammables License**

120 BEACON ST. LP 318 BEAR HILL ROAD WALTHAM MA 02451 License #:

BL15-000956

File #:

15-473

Fee:

550

Review and update the information below. <u>If you have workers compensation insurance</u>, <u>attach proof showing the 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: 120 BEACON ST. LP Business Location: 120 BEACON ST Business Phone: 781-890-5855 X123	
<b>License Holder:</b> 120 BEACON ST. LP 318 BEAR HILL ROAD WALTHAM MA 02451	
<b>Mailing Address:</b> 120 BEACON ST. LP 318 BEAR HILL ROAD WALTHAM MA 02451	
Business Type: Partnership / LLP BARRY KOROBKIN WILLIAM KAPLAN	
FID: 043232447	
Emergency Contact: MICHAEL JAFFE Phone: 781-389-4230	
# of Gallons of Flammables to be Stored: 20000 Describe Flammables to be Stored: Not yet provided. Proposed Hours of Operation: Not yet provided.	Ges in Ashmobiles 7AM - 7PM (Ferinds have 24-WR ALLESS)

1 r	iereby	certify	under	the	penalties	01	perjury	that	the	following	j is	true:
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-All information shown above is true and accurate.

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- -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:	W Mr.		Date:	9 20	15	
r	110					
Printed Name	: Nochoel	Jaffe	Phone:	781	846	5855



## City of Somerville, Massachusetts Finance Department, Treasury Division

## CERTIFICATE OF GOOD STANDING

Exact name of taxpayer/app			
Address of taxpayer/application	ant's business in Somer	ville: 120 Occum	Street
Address of taxpayer/application	ant's home in Somerville	e:	
Taxpayer/applicant's phone	e: day: 781 840 S\$	evening:	
I, (print name) No beau hereby certify that all the is due the City have been pai and fees and is current on s	nformation contained hed or that the Taxpayer l	erein is true and correct an	d all taxes and fees
SIGNED UNDER THE P.	AINS AND PENALTI	Taxpayer's signa	day of the contraction of the contraction day of ture)
	CITY'S ACKNOW		
DATE OF ISSUANCE: _	INCLUDE	S RELEVANT POSTINGS THROUGH	GH:
TAXES AND ACCOUNT	NUMBER(S) INCLU	DED IN CERTIFICATE	:
☐ Real Estate	□Water/Sewer	☐ Personal Property	Other:
# 1115	#128065041	#	
NOTES: CLERK'S INITIALS:	16	ORIGINAL STAMP:	Suras 7-22-15
			l

# The Commonwealth of Massachusetts Department of Industrial Accidents Office of Investigations 600 Washington Street Boston, Mass. 02111

Workers' Compensation Insurance Affidavit - General Businesses

Applicant information:				
Name: 120 Beaun St	ant in tel Part	neship c	lo Eastport (	Lel Estate
Address: 318 Bens 141				
City: Waltham		Zip: 024	51 Phone #: 18	1287 098 1
I am an employer with (full and/or part time).  I am a sole proprietor or partremployees.  We are a corporation that has exemption per c152 s1(4), an  We are a nonprofit organizati volunteers and have no employees.	exercised our right of d have no employees. on staffed by	Office and Nonprof Entertain Manufact Health C	nment cturing	
Workers' compensation insura	nce information (if applic	cable):		
Insurance Company Name:				
Address:				
City:	State:	Zip:	Phone #:	*
Policy#:			Expiration Date	o:
Applicant certification: Failure to secure coverage as repenalties of a fine up to \$1,500.0 WORK ORDER and a fine of forwarded to the Office of Investion of the dereby certify under the pain Signature:	0 and/or one years' impris \$100.00 a day against m gations of the DIA for cov	sonment as well le. I understand lerage verification that the informa	I as civil penalties in d that a copy of this on. tion provided above it	s statement may be
Print Name: Michel	5.16			
Official use only.  City or Town:	Do not write in this area.  Permit/Licens	To be complete	ed by city or town offi Bo Bu Cit	icial.  pard of Health  milding Department  my/Town Clerk
Contact Person:	Phone #:		☐ Sea	censing Board lectmen's Office ner

(revised Jan. 2008)