

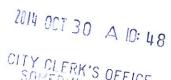
WILLIAM DOUCETTE AUTO SALES INC

325 ALEWIFE BROOK PKWY

SOMERVILLE, MA 02144

CITY OF SOMERVILLE BOARD OF ALDERMEN

93 HIGHLAND AVENUE SOMERVILLE, MA 02143 (617) 625-6600



19

.00

22

License #:

Account ID:

Fee:

(617) 625-6600 CITY CLERK'S OFFICE APPLICATION TO RENEW USED CAR DEALER CLASS 2 LICENSE MA

	Reference #: 19
Review and update the information below. If you have workers column and policy number. Then sign the Acknowledgment and return this	
INFORMATION ON FILE:	CHANGES: (Note below or explain on a separate sheet)
Business/DBA Name: WILLIAM DOUCETTE AUTO SALES INC Business Location: 325 ALEWIFE BROOK PKWY Business Phone: 617-666-9800	
License Holder: WILLIAM DOUCETTE AUTO SALES INC 325 ALEWIFE BROOK PKWY SOMERVILLE, MA 02144 617-666-9800	
Mailing Address: WILLIAM DOUCETTE AUTO SALES INC 325 ALEWIFE BROOK PKWY SOMERVILLE, MA 02144	
Business Type: CORPORATION (INC. LLC) PRESIDENT - WILLIAM DOUCETTE SECRETARY - WILLIAM DOUCETTE TREASURER - WILLIAM DOUCETTE	
FID: 043398706	
Food Manager/Emergency Contact: NORMAN DOUCETTE 617-680-8423	
Conditions: (to change any conditions, submit a new application.	Contact the City Clerk's Office for more information)
Hours: MO-FR 8AM-6PM, SA 8AM-2PM	
2 VEHICLES INSIDE 30 VEHICLES OUTSIDE	
Description of Location and/or Other Conditions:	
I hereby certify under the penalties of perjury that the following is t-All information shown above is true and accurate. -Any changes above are subject to the approval of the BOARD OI -I have filed all State taxes required	F ALDERMEN.
Signature:	Date 10-30-14
Print Name: William Devertop	Phone 617. 797.0460

FAX COVER SHEET

TO		
COMPANY		*
FAX NUMBER	16176254239	
FROM	Annie Lukas	
DATE	2014-11-11 14:56:39 EST	
RE	William Doucette Auto Sales Inc - bonds	

COVER MESSAGE

Good afternoon,

Attached please copies of the original bonds issued by C NA Surety along with their letter advising that bonds are continuous until cancelled. The above mentioned bonds are active and in good standing.

Thank you

Annie

Annie Lukas

T. Edmund Garrity & Co Inc

545 Concord Ave Ste 16

Cambridge, MA 02138

Tel: 617-354-4640 ext. 205

Fax: 617-812-8132

PPlease consider the environment before printing this e-mail.

Email Signature Logos

Coverage can't be bound, added or changed by electronic mail or fax. The documents and information contained in and attached to this electronic

CNA

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Bond No. _____69611060

Massachusetts

Western Surety Company

SECOND HAND MOTOR VEHICLE DEALER BOND

(Mass. Gen. Laws Ann. 140, § 58(c))

NOW ALL PERSONS BY THESE PRESENTS:	Effective Date: November 5, 2003
That wc, William Lougette Auto Sales, Inc. as Principal, and WESTERN SURETY COMPANY, a corporatio of Massachusetts, as Surety, are held and firmly bound unto pe suffer loss on account of a breach of the condition of this IWENTY-FIVE THOUSAND AND NO/100 DOLLARS (\$25,000 we bind ourselves and our legal representatives, firmly by these	ersons who purchase a vehicle from the Principal and who so bond described below, in the sum of not to exceed 0.00), for the payment of which well and truly to be made,
WHEREAS, the Principal is a second hand motor vehicle deale inancial responsibility pursuant to Mass. Gen. Laws Ann. 140,	
NOW, THEREFORE, the condition of this obligation is such lamages, not to exceed the amount of this bond, to any personal suffers loss on account of: (a) the Principal's default or nonpays Principal for the purchase of motor vehicles; (b) the Principal's rehicle, a valid motor vehicle title certificate free and clear of created by or expressly assumed in writing by the buyer of the value of the Principal was a stolen vehicle; (d) the Principal's failure to e) the Principal's unfair and deceptive acts or practices, misres of honor a warranty claim or arbitration order in a retail transfericle traded in as part of a transaction to purchase a vehicle the lien, then this obligation to be void; otherwise to remain in the PROVIDED, that recovery against this bond may be made only competent jurisdiction against the Principal for an act or or mission occurred during the term of this bond. No suit may be prought within one (1) year after the event giving rise to the content of the principal state of the content of the co	on who purchases a vehicle from the Principal and who ment of valid bank drafts, including checks drawn by the failure to deliver, in conjunction with the sale of a motor of any prior owner's interests and all liens, except a lien vehicle; (c) the fact that the motor vehicle purchased from a disclose the vehicle's actual mileage at the time of sale; presentations, failure to disclose material facts or failure seaction; or (f) the Principal's failure to pay off a lien on a when the Principal had assumed the obligation to pay off full force and effect. The bond is conditioned, if the act or the maintained to enforce any liability on this bond unless ause of action. This bond shall cover only those acts and
missions described above. The Surety shall not be liable for to number of claims made against this bond or the number of years	
This bond shall be continuous and may be cancelled by the ancellation to the municipal licensing authority at	e Surety by giving thirty (30) days' written notice of Address
Dated this 6th day of November, 200	<u>c3</u>
ARDAY STANDARD OF THE STANDARD	William Doucette Auto Sales, Inc. , Principal By. WESTERN SUPET (M. MNY, Surety By: Paul T. Bruflat Penior Vice Pres.dent
orm F6333-7-2003	

CNA

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Fax Server

Massachusetts

COPY

Western Surety Company

SECOND HAND MOTOR VEHICLE DEALER BOND

(Mass. Gen. Laws Ann. 140, § 58(c))

	Bond No.	69613185
KNOW ALL PERSONS BY THESE PRESENTS:	Effective Date: .	November 10, 2003
That wo, William Doucette as Principal, and WESTERN SURETY COMPANY, a corporation of Massachusetts, as Surety, are held and firmly bound unto pers suffer loss on account of a breach of the condition of this bear to the transfer of the condition of this bear to the transfer of the transfer of the condition of this bear to the transfer of the transfe	authorized to do surety bus ons who purchase a vehicle bond described below, in 10), for the payment of whice resents.	siness in the Commonwealth e from the Principal and who the sum of not to exceed th well and truly to be made,
NOW, THEREFORE, the condition of this obligation is such that damages, not to exceed the amount of this bond, to any person suffers loss on account of: (a) the Principal's default or nonpayme Principal for the purchase of motor vehicles; (b) the Principal's fail vehicle, a valid motor vehicle title certificate free and clear of a created by or expressly assumed in writing by the buyer of the vel the Principal was a stolen vehicle; (d) the Principal's failure to did (e) the Principal's unfair and deceptive acts or practices, misreprete to honor a warranty claim or arbitration order in a retail transactive traded in as part of a transaction to purchase a vehicle with the lien, then this obligation to be void; otherwise to remain in full PROVIDED, that recovery against this bond may be made only be competent jurisdiction against the Principal for an act or omis somission occurred during the term of this bond. No suit may be a brought within one (1) year after the event giving rise to the cause omissions described above. The Surety shall not be liable for total number of claims made against this bond or the number of years the	who purchases a vehicle ent of valid bank drafts, in ilure to deliver, in conjuncting prior owner's interests hicle; (c) the fact that the n isclose the vehicle's actual esentations, failure to disclosion; or (f) the Principal's then the Principal had assult force and effect. by a person who obtains a sision on which this bond is maintained to enforce any se of action. This bond shill claims in excess of the both	from the Principal and who cluding checks drawn by the tion with the sale of a motor and all liens, except a lien notor vehicle purchased from mileage at the time of sale; lose material facts or failure failure to pay off a lien on a med the obligation to pay off final judgment in a court of is conditioned, if the act or liability on this bond unless all cover only those acts and
This bond shall be continuous and may be cancelled by the cancellation to the municipal licensing authority at	Surety by giving thirty ((30) days' written notice of
Dated this <u>10th</u> day of <u>November</u> , <u>2003</u>		
Form F6333-7-2003	By: Tago!	COMPANY, Surety Company, Surety Company



City of Somerville, Massachusetts Finance Department, Treasury Division

CERTIFICATE OF GOOD STANDING

Exact name of taxpayer/ap	oplicant's business:	William Dougette)	
Address of taxpayer/applic	cant's business in Son	nerville: 325 ALLWIFE	2 Brok	Ptury
		ville: 493 MEDFuno		
Taxpayer/applicant's phor	ne: day: <u>617. 797 · 0</u>	7460_ evening:		
hereby certify that all the	information contained id or that the Taxpayo	the unders. I herein is true and correct er has entered into an agre	and all taxes	and fees
SIGNED UNDER THE I	AINS AND PENAL	TIES OF PERJURY, this		_ day of
	, 20	(Taxpayer's sig	matura)	
	9	(Taxpayer's sig	mature)	
CITY'S ACKNOWLEDGEMENT				
DATE OF ISSUANCE: _	INCLU	UDES RELEVANT POSTINGS THRO	OUGH:	And the second second
TAXES AND ACCOUNT	T NUMBER(S) INCI	LUDED IN CERTIFICAT	TE:	
☐ Real Estate	□ Water/Sewer	☐ Personal Property	☐ Oth	er:
# 377	# 3450220) #	#	
NOTES:			_	
CLERK'S INITIALS: _	B	ORIGINAL STAMP:		10-30

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

Workers' Compensation Insurance Affidavit - General Business

Applicant information:
Name: William Poucette
Address: 325 ALLWIFE Black Plant
City: Somerville State: MA. Zip: CD144 Phone #: 670-666-9 80
I am an employer with employees
Workers' compensation insurance information (if applicable):
Insurance Company Name: UTICA MUTUAL INC. CO
Address: 545 CONCORD AVE 76
City: CAMBOOGE State: M. Zip. 2135 Phone #: 617-354-4640
Policy #: 426 1309 Expiration Date: 11-4-2015
Applicant certification:
Failure to secure coverage as required under Section 25A of MGL 152 can lead to the imposition of criminal penalties of a fine up to \$1,500.00 and/or one years' imprisonment as well as civil penalties in the form of a STOP WORK ORDER and a fine of \$100.00 a day against me. I understand that a copy of this statement may be forwarded to the Office of Investigations of the DIA for coverage verification.
I do hereby certify under the pains and penalties of perjury that the information provided above is true and correct.
Signature:
Print Name: Bulliam Dourett f
Official use only. Do not write in this area. To be completed by city or town official.
Official use only. Do not write in this area. To be completed by city or town official. City or Town: Permit/License #: Board of Health Building Department City/Town Clerk Licensing Board Selectmen's Office Other