SECOND HAND MOTOR VEHICLE DEALER LICENSE APPLICATION

Application Fee_\$500.00	FOR CITY CLERK'S OFFICE ONLY
Date 12-1-10	Date Recorded /2-2-20/0 Amount Paid (K /045 2500 -
New Application Ch	eck one:Class 1Class 2Class 3
Renewing Application with Additions or Cha	nges
Renewing Application with NO Additions or	Changes
	IMPORTS INCPhone: 617-628-447
Business DBA Name (if applicable): WER	STER AUTO SALES
	J ST. SOMERVILLE, MA 0218
Tax Identification Number: 04-322396	Check one: SSN FEIN
Mailing Name (where we should send correspon	dence to): 4.0. Box 1011
Address with Zip Code: ALLSTON,	MA 02134
Property Owner Name: MicHAEL	RAPOSA Phone: 781-572-190
Address with Zip Code: 42 Washin	Phone: 781-572-190 Ton of Burlington, MA
Emergency Contact 1: REZA PARIN	EJAD Phone: 617-593-655 Phone: 617-901-4999
Emergency Contact 2: KAMBIZ BA	7247 Phone: 617-901-4999
	prietorPartnership (inc. LLP)Trust tion (inc. LLC)Other
IF A SOLE PROPRIETOR:	
Owner's Name:	
Address with Zip Code:	
IF A PARTNERSHIP, TRUST OR CORPORAT	
Partner's/Member's/President's Name: REZ	A PARINETAD
Address with Zip Code: 10 BOX	YEIGO AM MOTELLA 1101
Partner's/Member's/Secretary's Name:	SAME
Address with Zip Code:	
•	SAME
Address with Zip Code:	
	,

Are you engaged principally in the business of buying, selling or exchanging motor vehicles?	Y <u>/</u> N _
Is your principal business the sale of new motor vehicles?	Y_N <u>\</u>
If yes, are you a recognized agent of a motor vehicle Y N with manufacturer, or do you have authority to sell the vehicles of a motor vehicle manufacturer via a written contract?	
If yes, provide the name of the manufacturer(s):	,
Is your principal business the buying and selling of second hand motor vehicles?	Y VN_
If yes, have you obtained a \$25,000 bond pursuant to YNN MGL c. 140 § 58, for this business, at this location?	·
If yes, do you have access to a repair facility to comply with Y V N _ the warranty obligations imposed by MGL c. 90 § 7N ¹ / ₄ ?	
 If yes, provide the name of the repair facility: REAL AWO CENT	TER
Is your principal business that of a motor vehicle junk dealer?	Y_N <u>\</u>
Have you ever obtained a license to deal in second hand motor vehicles or parts?	y N
If yes, list year, city and state 1995-1998 Waterlown, MA Jood - Present Somewille, MA	
Have you ever been denied a license to deal in second hand motor vehicles or parts?	Y_N_V
If yes, list year, city and state	
Have you ever had a license to deal in second hand motor vehicles or parts revoked or suspended?	Y_N_
If yes, list year, city and state	
	•
Describe all of the premises to be used in the business: Approximately 59 feet of Land Mus one 12X14 office.	00 Squar
The hours of operation for used car dealers are Monday through Friday, 8 AM to 6 Pl AM to 2 PM, and Sunday, Closed. If you require different hours of operation, list then Mon - Fr: 9 AM - PM	M, Saturday, 8 n and explain:
SAT 9AM-5PM	
SUN NOON-5PM	

ACKNOWLEDGEMENT

I hereby state that all information provided on this application is true and accurate, and I understand that any information that is found to be false or misleading may result in the forfeiture of this license. This license will only be effective for the listed location, will expire on December 31, and 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 City of Somerville.

Signature of Applicant:		Date	12-1-10	
Business Name:	WEBSTER	AUTO	, Stres	
Business Address: 61 PR	ospect 8TA	CEET	SOMERVILL	E, MA 0>183
FOR NEW APPLICANTS:				
INSPECTIONAL SERVICES	DEPARTMENT RI	ECOMME	NDATION:	
The building located at the premi	ses mentioned above	e is in a	Zone.	
The use is permit	tted as of right			
The use requires	a special permit	,		
The use is prohib	vited		,	
Class 1 & 2: Maximum number	of vehicles to be kep	t on the pre	emises:	inside
				outside
Signature:		Date	•	
Print Name:	· .	Title	•	
POLICE DEPARTMENT REC	COMMENDATION	1:		
The Chief of Police recommends	that the application	be		
Approved				
Denied				
Signature:	N:	ame and Tit	tle:	

Western Surety Company

SECOND HAND MOTOR VEHICLE DEALER BOND

(Mass. Gen. Laws Ann. 140, § 58(c))

69567426

Bond No. _

KNOW ALL PERSONS BY THESE PRESENTS:	Effective Date: December 1, 2003
That we, Prestige Auto Imports, Inc. dba Webster as Principal, and WESTERN SURETY COMPANY, a corp Commonwealth of Massachusetts, as Surety, are held and firmly Principal and who suffer loss on account of a breach of the condicated TWENTY-FIVE THOUSAND AND NO/100 DOLLARS (St. be made, we bind ourselves and our legal representatives, firmly be considered.)	oration authorized to do surety business in the bound unto persons who purchase a vehicle from the tion of this bond described below, in the sum of not to 25,000,00), for the payment of which well and truly to
WHEREAS, the Principal is a second hand motor vehicle dealer a financial responsibility pursuant to Mass. Gen. Laws Ann. 140, §	
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 nonpaymed Principal for the purchase of motor vehicles; (b) the Principal's favehicle, a valid motor vehicle title certificate free and clear of a created by or expressly assumed in writing by the buyer of the vehicle Principal was a stolen vehicle; (d) the Principal's failure to defend the Principal's unfair and deceptive acts or practices, misrepreto honor a warranty claim or arbitration order in a retail transaction to purchase a vehicle when the lien, then this obligation to be void; otherwise to remain in full PROVIDED, that recovery against this bond may be made only be	who purchases a vehicle from the Principal and who ent of valid bank drafts, including checks drawn by the ilure to deliver, in conjunction with the sale of a motor ny prior owner's interests and all liens, except a lien nicle; (c) the fact that the motor vehicle purchased from isclose the vehicle's actual mileage at the time of sale; esentations, failure to disclose material facts or failure tion; or (f) the Principal's failure to pay off a lien on a ten the Principal had assumed the obligation to pay off I force and effect.
competent jurisdiction against the Principal for an act or omission 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 to the number of claims made against this bond or the number of year	sion on which this bond is conditioned, if the act or maintained to enforce any liability on this bond unless se of action. This bond shall cover only those acts and tal claims in excess of the bond amount, regardless of
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
by First Class U.S. Mail.	Address
Dated this 7th day of August, 2003	<u> </u>
	Prestige Auto Imports, Inc. dba Webster Auto Sales , Principal By: WESTERN SURETY COMPANY, Surety
and the season of the season o	By: Paul T. Bruflat, Senior Vice President

Western Surety Company

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS:

That WESTERN SURETY COMPANY, a corporation organized and existing under the laws of the State of South Dakota, and authorized and licensed to do business in the States of Alabama, Alaska, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, District of Columbia, Florida, Georgia, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Washington, West Virginia, Wisconsin, Wyoming, and the United States of America, does hereby make, constitute and appoint

Paul T. Bruflat of Sioux Falls State of South Dakota , its regularly elected Senior Vice Proster as Attorney-in-Fact, with full power and authority hereby conferred upon him to sign, execute, acknowled, and on its behalf as Surety and as its act and deed, all of the following classes of documents to-wit: Indemnity, Surety and Undertakings that may be desired by contract, or may be given in any action or proceeding in equity, policies indemnity in all cases where indemnity may be lawfully given; and with full power and authority to ex waives to prodry or change or extend any bond or document executed for this Company, and to compromise and settle ademands in all experiences and settle ademands in all experiences are set of the prodry of change or extend any bond or document executed for this Company, and to compromise and settle ademands in all experiences are set of the prodry or change or extend any bond or document executed for this Company, and to compromise and settle ademands in all prodry further certifies that the following is a true and exact copy of Section 7 of the by-laws Company duly adopted age in given in force, to-wit: Section And bonds policies, undertakings, Powers of Attorney, or other obligations of the corporation shall incorporate seal are not necessary for the validity of any bonds, policies, undertakings, Powers of Attorney or other obligation appoint Attorney's in Fact or agents who shall have authority to issue bonds, policies, or undertakings in the name of corporate seal is not necessary for the validity of any bonds, policies, undertakings, Powers of Attorney or other obligation. In Witness Whereof, the said WESTERN SURETY COMPANY has caused these presents to be Senior Vice President with the corporate seal affixed this 7th day of August Assistant Secretary Paul T. Bruflat, Jet State of August Assistant Secretary, respectively, of the said WESTERN SURETY COMPANY, and acknowledged said the voluntary act and deed of said Corporation. D. KRELL		aul T. Bruflat	of		Sioux Falls
as Attorney-in-Fact, with full power and authority hereby conferred upon him to sign, execute, acknowledged and on its behalf as Surety and as its act and deed, all of the following classes of documents to-wit: Indemnity, Surety and Undertakings that may be desired by contract, or may be given in any action or proceeding in acquity, policies indemnifying employers against loss or damage caused by the misconduct of their employees; official, indelity behalf as the process of the company and authority to expany the prodity of classes of causing the prodity of classes where indemnity may be lawfully given; and with full power and authority to expany the prodity of classes of causing the product of their employees; official, indelity behalf and their company and to compromise and settle a dependent magle-exercising against said Company. Western Surety Company further certifies that the following is a true and exact copy of Section 7 of the by-laws against said company. Western Surety Company further certifies that the following is a true and exact copy of Section 7 of the by-laws against and surety company further certifies that the following is a true and exact copy of Section 7 of the by-laws against and the company and the section 7 of the by-laws against and the company and the product of their company and the company and acknowledged the company and the company an		outh Dakota	, its regularly elec	ted	Senior Vice President
Indemnity, Surety and Undertakings that may be desired by contract, or may be given in any action or proceeding in equity, policies indemnifying employers against loss or damage caused by the misconduct of their employees; official, idelity beings threambly in all cases where indemnity may be lawfully given; and with full power and authority to exvaviers to produce or extend any bond or document executed for this Company, and to compromise and settle adertance made one scissification of the company further certifies that the following is a true and exact copy of Section 7 of the by-laws company duty adopted and new in force, to-wit: Section All bonds, policies, undertakings, Powers of Attorney, or other obligations of the comporation shall be compared by the President, Secretary, any Assistant Secretary, any					
acuity, policies indemnifying employers against loss or damage caused by the misconduct of their employees; official, ideality bender intensity in all cases where indemnity may be lawfully given; and with full power and authority to exwavers to modify or change or extend any bond or document executed for this Company, and to compromise and settle adentication and company. Western Surety Company further certifies that the following is a true and exact copy of Section 7 of the by-laws company duly adopted and now in force, to-wit: Section 7. All bends, policies, undertakings, Powers of Attorney, or other obligations of the comporation shall be compared in ame, of the Company by the President, Secretary, any Assistant Secretary, Treasurer, or any Vine President Secretary and Assistant Secretary, appoint Attorneys in Fact or agents who shall have authority to issue bonds, policies, or undertakings in the name of corporate seal is not necessary for the validity of any bonds, policies, undertakings, Powers of Attorney or other obligation fine signature of any such officer and the corporate seal may be printed by facsimile. In Witness Whereof, the said WESTERN SURETY COMPANY has caused these presents to be Senior Vice President with the corporate seal affixed this 7th day of August ASSISTANT Secretary WESTERN SURETY WESTERN SURETY WESTERN SURETY WESTERN SURETY WESTERN SURETY Paul T. Bruflat, Jee The Jung of August AND Jung of August AU	is behalf as Su	rety and as its act an	nd deed, all of the following	classes of docume	ents to-wit:
COUNTY OF MINNEHAHA On this 7th day of August COUNTY OF MINNEHAHA On this 7th day of August COUNTY OF MINNEHAHA COUNTY OF MINNEHAHA On this 7th day of August Paul T. Bruflat August Assistant Secretary, and Assistant Secretary August Au	olicies indemnify mos: Indemnity modify of chan made opexisting	ing employers against l in all cases where inc de or extend any bond against said Company	loss or damage caused by the demnity may be lawfully giver or document executed for this y.	e misconduct of their n; and with full powe Company, and to co	r employees; official, bail, and surety er and authority to execute consents impromise and settle any and all clair
orperate name of the Company by the President, Secretary, any Assistant Secretary, Treasurer, or any Vice President (fifteers as the Board of Directors may authorize. The President, any Vice President, Secretary, any Assistant Secretary, any Assistant Secretary, any Assistant Secretary, appoint Attorievs in Fact or agents who shall have authority to issue bonds, policies, or undertakings in the name of orporate seal is not necessary for the validity of any bonds, policies, undertakings, Powers of Attorney or other obligation the signature of any such officer and the corporate seal may be printed by facsimile. In Witness Whereof, the said WESTERN SURETY COMPANY has caused these presents to be Senior Vice President with the corporate seal affixed this 7th day of August Assistant Secretary WESTERN SURETY WESTERN SURETY Paul T. Bruflat, seal of August On this 7th day of August Paul T. Bruflat and L. Nelson tho, being by me duly sworn, acknowledged that they signed the above Power of Attorney as Senior Vice President of Assistant Secretary, respectively, of the said WESTERN SURETY COMPANY, and acknowledged said the voluntary act and deed of said Corporation.	tern Surety Gon	apany further certifies t	that the following is a true an	d exact copy of Sec	ction 7 of the by-laws of Western Si
Senior Vice President with the corporate seal affixed this 7th day of August WESTERN SURETY OF SURETY OF SOUTH DAKOTA COUNTY OF MINNEHAHA On this 7th day of August and L. Nelson who, being by me duly sworn, acknowledged that they signed the above Power of Attorney as Senior V and Assistant Secretary, respectively, of the said WESTERN SURETY COMPANY, and acknowledged said he voluntary act and deed of said Corporation.	name of the Co s the Board of Di attorneys in Fact seal is not nece	ompany by the Preside frectors may authorize. or agents who shall ha ssary for the validity of a	ent, Secretary, any Assistant S The President, any Vice Presi ave authority to issue bonds, any bonds, policies, undertaki	Secretary, Treasurer, ident, Secretary, any policies, or undertak ngs, Powers of Attorn	or any Vice President, or by such or Assistant Secretary, or the Treasure cings in the name of the Company.
STATE OF SOUTH DAKOTA SS COUNTY OF MINNEHAHA On this 7th day of August , 2003 , before me, a Notary Public, per Paul T. Bruflat and L. Nelson who, being by me duly sworn, acknowledged that they signed the above Power of Attorney as Senior V and Assistant Secretary, respectively, of the said WESTERN SURETY COMPANY, and acknowledged said ne voluntary act and deed of said Corporation.	or Vice Preside	ent with the corpo	orate seal affixed this 7th	day ofA	august , 2003
STATE OF SOUTH DAKOTA SOUNTY OF MINNEHAHA On this 7th day of August , 2003 , before me, a Notary Public, per Paul T. Bruflat and L. Nelson who, being by me duly sworn, acknowledged that they signed the above Power of Attorney as Senior V and Assistant Secretary, respectively, of the said WESTERN SURETY COMPANY, and acknowledged said ne voluntary act and deed of said Corporation.		Relavor	/	toas	CT Buff
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Paul T. Bruflat and L. Nelson who, being by me duly sworn, acknowledged that they signed the above Power of Attorney as Senior V nd Assistant Secretary, respectively, of the said WESTERN SURETY COMPANY, and acknowledged said ne voluntary act and deed of said Corporation. ↑ ***********************************		AHA } ss		,	
nd Assistant Secretary, respectively, of the said WESTERN SURETY COMPANY, and acknowledged saic ne voluntary act and deed of said Corporation. †***************************** † ******	OF MINNEH				
e é	his <u>7th</u>	day of _Augus T. Bruflat	st	, before me, a	a Notary Public, personally appea L. Nelson
NOTARY PUBLIC SEAL S	his 7th Paul ng by me duly stant Secretar	T. Bruflat sworn, acknowledged y, respectively, of the	and d that they signed the abov e said WESTERN SURET\	e Power of Attorne	L. Nelson ey as Senior Vice President
TOTO SOUTH DAKOTA CTOTA Too oo	his 7th Paul ng by me duly stant Secretar itary act and de	T. Bruflat sworn, acknowledged y, respectively, of the eed of said Corporati becases D. KRELL	and d that they signed the abov e said WESTERN SURETY ion.	e Power of Attorne	L. Nelson ey as Senior Vice President acknowledged said instrument to

NOTICE OF PREMIUM DUE

Sioux Falls, SD 57117-5077 1-888-866-2666 P. O. Box 5077

Bond/Policy#: 0601 69567426

10/01/2010 12/01/2010 Billing Date: Filing Date:

Premium:

\$250.00

\$250.00 Amount Due:

Bond/Policy#: 0601 69567426

Anniversary Date: 12/01/2011 Effective Date: 12/01/2010

Penalty:

\$25,000.00 PRESTIGE AUTO IMPORTS, INC. DBA WEBSTER AUTO SALES MA SECOND HAND MOTOR VEHICLE DEALER

Description: Name:

Written By:

WESTERN SURETY COMPANY

Your agent has requested that we bill your bond/policy directly from our office. PLEASE PAY THE AMOUNT INDICATED to CNA Surety. Prompt payment allows us to issue or continue your bond/policy coverage.

if you have any questions, please contact your agent with whom the bond/policy was written.

Colburn Rider Insurance

(508)378-1166 20-18386 Agency: Phone:

Agency, Inc. P.O. Box 10 Marion, MA 02738

Piease detach and return the original coupon below with your payment

WEBSTER AUTO SALES

P. O. BOX 1011 ALLSTON, MA 02134

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.

PRESTIGE AUTO IMPORTS DUC DBA WEBSTER AUTO JAVES
*Signature of Individual or Corporate Name (Mandatory)

PERA PARIMETAD

By: Corporate Officer (Mandatory, if a corporation)

OY-3283961

^{**}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.



City of Somerville, Massachusetts Finance Department, Treasury Division

WARNING: TREASURY NEEDS FIVE BUSINESS DAYS TO PROCESS THIS FORM.

CERTIFICATE OF GOOD STANDING

Exact name of taxpayer/applicant's business: WEBSTER AND SHES / Michael
Exact name of taxpayer/applicant's business: WEBSTER AND SALES / Michael Address of taxpayer/applicant's business in Somerville: 61 Prospect of OR 48 Webster
Address of taxpayer/applicant's home in Somerville:
Taxpayer/applicant's phone: day: 617-622-44711 evening: I, (print name) Michael Rapposa, 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 day of De Comber , 20 10. (Taxpayer's signature)
CITY'S ACKNOWLEDGEMENT
DATE OF ISSUANCE: INCLUDES RELEVANT POSTINGS THROUGH:
TAXES AND ACCOUNT NUMBER(S) INCLUDED IN CERTIFICATE:
☐ Real Estate ☐ Water/Sewer ☐ Personal Property ☐ Other:
13470078 # 12309400 #32011078
NOTES:
CLERK'S INITIALS: ORIGINAL STAMP:

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:				
1 PROCEED	Auto	ALES		
(, 0 +	Treet	<u> </u>		
Address: 6/ Mospet	077			
City: Comerville	State: M	\(\frac{Zip: 0>1\}{2}	Phone #:	
I am an employer with employer (full and/or part time). I am a sole proprietor or partnership employees. We are a corporation that has exercis exemption per c152 s1(4), and have We are a nonprofit organization staff volunteers and have no employees.	and have no ed our right of no employees.	Restaura	it nment cturing	stablishment l estate, auto, etc.)
Workers' compensation insurance info	ormation (if ap	plicable):	•	
Insurance Company Name:	-N/F			
Address:				
City:	State:	Zip:	Phone #:	
Policy #:	4-4		Expiratio	n Date:
Applicant certification:	*		•	
Failure to secure coverage as required un a fine up to \$1,500.00 and/or one years' and a fine of \$100.00 a day against me. Investigations of the DIA for coverage v	imprisonment as I understand that rerification.	well as civil penaliat a copy of this sta	ties in the form of atement may be	forwarded to the Office of
I do hereby certify under the pains and p	penalties of perju	ry that the inform	ation provided	above is true and correct.
Signature:			Date:	121-10
Print Name: RESA ARIN	eJM, 1	resident		*.
·	**************************************			
Official use only. Do no	t write in this a	rea. To be comple	ted by city or to	wn official.
City or Town: Contact Person:				Board of Health Building Department City/Town Clerk Licensing Board Selectmen's Office
Contact Person:	Phone #:			Other

(revised Jan. 2008)