APPLICATION FOR A CONSTABLE LICENSE CITY OF SOMERVILLE, COMMONWEALTH OF MASSACHUSETTS

To the Honorable Mayor and the Board of Aldermen of the City of Somerville:

I respectfully request to be granted a license to operate as a Constable in the City of Somerville. Name RODERT J. LOMANNO Date of Birth 2.

Name RODERT J. LOMANNO Date of Birth 2.

Address, City, Zip HI CUSHMAN AVE REVERE MA Telephone 617-669-5221 IOYEARS How long at this address? Present Employer T. S. A. LEAD OFFICER Present Occupation Do you currently hold a License to Carry a firearm in Massachusetts? Have you ever had a License to Carry a firearm revoked or suspended. or had an application for such denied, here or in any other jurisdiction? Where do you currently serve as an appointed Constable? City or Town Year first Appointed City or Town Year first Appointed SOMFRVILLE 7002 For new Constables only, Why do you seek appointment? For new Constables only, What are your qualifications? For new Constables only, Who do you expect to serve? I understand that this 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 Mayor or Board of Aldermen, and that it will be revocable at any time at the pleasure of the Board of Aldermen. I certify under the penalties of perjury that I am a citizen of the United States, that all statements in this application are true and accurate, and that to my best knowledge and belief, I have filed all State tax returns and paid all State taxes required under law.

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Applicant Name			
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		/	
ATTORNEY RECOMMENDATION	(For new Constable	s only):	
I, being a member of the Massachusetts	Bar in good standing	for the last	vears and heing
a resident of the applicant's home com	minity of	ior the last	lo state upon hono
a resident of the applicant's home com that the applicant is personally known t	o me, that I have rey	iewed this appl	ication, and believe
each of the statements on it to be true, as	nd that the applicant	is a person of go	ood moral character
and reputation, and competent to perform	n the duties of a Cons	table.	
	D: 131		
Signature	Print Name_		
Business Address			
REPUTABLE CITIZENS RECOMMI	ENDATION (For ne	w Constables o	nly)·
REPOTABLE CITIZENS RECONNIN		W Constantes o	113).
We, the undersigned citizens ofpersonally known to us, that we have	, h	ereby certify th	at the applicant is
personally known to us, that we have	reviewed this appl	ication, and be	elieve each of the
statements on it to be true, and that the		son of good m	oral character and
reputation, competent to perform the dutie	es of a Gonstable.		
Signature Name (Print)	/ Street Add	lress	Occupation
			
			
	/		
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POLICE CHIEF RECOMMENDATIO	N (For all Constable	es):	
I, the Chief of Police, having reviewed to	his application for ar	prointment or r	eappointment as a
Constable and having, at the request of the			
the applicant and his or her fitness for			
recommend that this application be:			
		Appro	
Signature Mul 1 town	w	Date <u>2 -</u>	3-14