

Commonwealth of Massachusetts
93 Highland Avenue
Somerville, MA 02143
(617) 625-6600 APR 20 P 2: 22

Application to Renew Taxi Medallion License

LOCHMERE TAXI INC 600 WINDSOR PLACE SOMERVILLE MA 02143 License #:

BL15-001160

File #:

15-307

Fee:

305

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INFORMATION ON FILE:	CHANGES: (Note below or explain on a separate sheet)
Business/DBA Name: LOCHMERE TAXI INC Business Location: 0 OUT OF AREA Business Phone: 617-628-1081	
License Holder: LOCHMERE TAXI INC 600 WINDSOR PLACE SOMERVILLE MA 02143	
Mailing Address: LOCHMERE TAXI INC 600 WINDSOR PLACE SOMERVILLE MA 02143	
Business Type: Corporation GERALD CHAILLE GERALD CHAILLE CHERYL HORAN	
FID: 043170106	7
Emergency Contact: KAREN TAMAGN A Phone: 617-949-1002	Karen Lima
Medallion #(s): 21	

I hereby certify under the penalties of perjury that the following is true:			
-All information shown above is t	rue and accurate.		
-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.			
Lively	KChall	///	10/11
Signature:	*	_ Date:	19/16
Printed Name: bevald	Chaille	Phone: 4/7	428/081



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

2016 APR 20 P 2: 22

Application to Renew Taxi Medallion License E. MA

LOCHMERE TAXI INC 600 WINDSOR PLACE SOMERVILLE MA 02143 License #:

BL15-001161

File #:

15-307

Fee:

305

Office.	
INFORMATION ON FILE:	CHANGES: (Note below or explain on a separate sheet)
Business/DBA Name: LOCHMERE TAXI INC Business Location: 0 OUT OF AREA Business Phone: 617-628-1081	ι
License Holder : LOCHMERE TAXI INC 600 WINDSOR PLACE SOMERVILLE MA 02143	
Mailing Address: LOCHMERE TAXI INC 600 WINDSOR PLACE SOMERVILLE MA 02143	
Business Type: Corporation GERALD CHAILLE GERALD CHAILLE CHERYL HORAN	
FID: 043170106	
Emergency Contact: KAREN TAMAGNA Phone: 617-949-1002	Karen Lima
Medallion #(s): 22	

I hereby certify under the penalties of perjury that the following is true:				
-All information shown above is true and accurate.				
-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.				
Simulation Aprilate	DI haille		1/12/11	
Signature:	C Charles	_ Date:	4/19/16	
6.0011	(101/1		117/12/10/	
Printed Name: Of raid	Chaille	_ Phone:_	417628/08/	



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

2016 APR 20 P 2: 22

CITY CLERK'S OFFICE

Application to Renew Taxi Medallion License E. MA

LOCHMERE TAXI INC 600 WINDSOR PLACE SOMERVILLE MA 02143 License #:

BL15-000366

File #:

15-307

Fee:

305

INFORMATION ON FILE:	CHANGES: (Note below or explain on a separate sheet)
Business/DBA Name: LOCHMERE TAXI INC Business Location: 0 OUT OF AREA Business Phone: 617-628-1081	
License Holder: LOCHMERE TAXI INC 600 WINDSOR PLACE SOMERVILLE MA 02143	
Mailing Address: LOCHMERE TAXI INC 600 WINDSOR PLACE SOMERVILLE MA 02143	
Business Type: Corporation GERALD CHAILLE GERALD CHAILLE CHERYL HORAN	
FID: 043170106	7
Emergency Contact: KAREN TAMAGNA Phone: 617-949-1002	Karen lina
Medallion #(s): MEDALLION #23	

I hereby certify under the penalties of perjury that the following is true:			
-All information shown above is true and accurate.			
-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.			
Shorte Renally	Date: 9/19/16		
Signature:	Date: 9/19/19		
Printed Name: 64 rald (haille	Phone: 6/7 628/68/		



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

2016 APR 20 P 2: 22

Application to Renew Taxi Medallion License MA

LOCHMERE TAXI INC 600 WINDSOR PLACE SOMERVILLE MA 02143 License #:

BL15-000367

File #:

15-307

Fee:

305

Office,	
INFORMATION ON FILE:	CHANGES: (Note below or explain on a separate sheet)
Business/DBA Name: LOCHMERE TAXI INC Business Location: 0 OUT OF AREA Business Phone: 617-628-1081	
License Holder: LOCHMERE TAXI INC 600 WINDSOR PLACE SOMERVILLE MA 02143	*
Mailing Address: LOCHMERE TAXI INC 600 WINDSOR PLACE SOMERVILLE MA 02143	
Business Type: Corporation GERALD CHAILLE GERALD CHAILLE CHERYL HORAN	
FID: 043170106	7
Emergency Contact: KAREN FAMAGNA Phone: 617-949-1002	Karen Lima
Medallion #(s): MEDALLION #24	

I hereby certify under the penalties of perjury that the following is true:			
-All information shown above is true and accurate.			
-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.			
Luralit	Recauld		
Signature:	,	Date: 4//9//0	
Printed Name: berald	Chaille	Phone: 6/7 628 1881	



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

2015 APR 20 P 2: 22

Application to Renew Taxi Medallion License

LOCHMERE TAXI INC 600 WINDSOR PLACE SOMERVILLE MA 02143 License #:

BL15-000368

File #:

15-307

Fee:

305

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INFORMATION ON FILE:	CHANGES: (Note below or explain on a separate sheet)
Business/DBA Name: LOCHMERE TAXI INC Business Location: 0 OUT OF AREA Business Phone: 617-628-1081	
License Holder: LOCHMERE TAXI INC 600 WINDSOR PLACE SOMERVILLE MA 02143	
Mailing Address: LOCHMERE TAXI INC 600 WINDSOR PLACE SOMERVILLE MA 02143	
Business Type: Corporation GERALD CHAILLE GERALD CHAILLE CHERYL HORAN	
FID: 043170106	7
Emergency Contact: KAREN TÂMAGNA Phone: 617-949-1002	Karen Lima
Medallion #(s): MEDALLION #25	

I hereby certify under the penalties of perjury that the following is true:							
		true and accurate.					
-Any changes ab	ove are subjec	t to the approval of	the BOARI	D OF	ALDER	MEN.	
-I have filed all S	tate tax/returns	and paid all State	taxes requi	ired by	y law for	this business.	
	15 Wealst	and paid all State			1//	19/16	
Signature:	A April Cooper	/	D	Date:_	9/1	19/10	
Printed Name:	berald	Chaill	P	hone:	617	628 /18/	



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

2016 APR 20 P 2: 22

Application to Renew Taxi Medallion License

LOCHMERE TAXI INC 600 WINDSOR PLACE SOMERVILLE MA 02143 License #:

BL15-000369

File #:

15-307

Fee:

305

INFORMATION ON FILE:	CHANGES: (Note below or explain on a separate sheet)
Business/DBA Name: LOCHMERE TAXI INC Business Location: 0 OUT OF AREA Business Phone: 617-628-1081	
License Holder: LOCHMERE TAXI INC 600 WINDSOR PLACE SOMERVILLE MA 02143	
Mailing Address: LOCHMERE TAXI INC 600 WINDSOR PLACE SOMERVILLE MA 02143	
Business Type: Corporation GERALD CHAILLE GERALD CHAILLE CHERYL HORAN	
FID: 043170106	
Emergency Contact: KAREN TAMAGNA Phone: 617-949-1002	Karen Lima
Medallion #(s): MEDALLION #26	

I hereby certify under the penalties of perjury that the following is true:			
-All information shown above is true and accurate.			
-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 red	quired by law for this business.		
Signature: Signature:	Date: 4/19/16		
Printed Name: Olvald Chaill	Phone: 6/7 628/08/		



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

2016 APR 20 P 2: 22

Application to Renew Taxi Medallion License

LOCHMERE TAXI INC 600 WINDSOR PLACE SOMERVILLE MA 02143 License #:

BL15-000370

File #:

15-307

Fee:

305

CHANGES: (Note below or explain on a separate sheet)
Karen Lima

I hereby certify under the penalt		lowing is true:	
-All information shown above is		0.455.05.44555454	
-Any changes above are subjec	t to the approval of the BC	OARD OF ALDERMEN.	
 I have filed all State tax returns 	s and paid all/State taxes i	required by law for this business.	
Lurela	KAMILIA	required by law for this business.	
Signature:		Date:	
Printed Name: 627ald	Chaille	Phone: 6/7 6/8/108/	



CITY CLERK'S OFFICE

Application to Renew Taxi Medallion License

LOCHMERE TAXI INC 600 WINDSOR PLACE SOMERVILLE MA 02143 License #:

BL15-000371

File #:

15-307

Fee:

305

INFORMATION ON FILE:	CHANGES: (Note below or explain on a separate sheet)
Business/DBA Name: LOCHMERE TAXI INC Business Location: 0 OUT OF AREA Business Phone: 617-628-1081	
License Holder: LOCHMERE TAXI INC 600 WINDSOR PLACE SOMERVILLE MA 02143	
Mailing Address: LOCHMERE TAXI INC 600 WINDSOR PLACE SOMERVILLE MA 02143	
Business Type: Corporation GERALD CHAILLE GERALD CHAILLE CHERYL HORAN	
FID: 043170106	2
Emergency Contact: KAREN TAMAGN A Phone: 617-949-1002	Karen Lima
Medallion #(s): MEDALLION #91	

I hereby certify under the penalties of perjury that the follow	ring is true:
-All information shown above is true and accurate.	
-Any changes above are subject to the approval of the BOA	ARD OF ALDERMEN.
-I have filed all State tax returns and paid all State taxes re-	quired by law for this business.
Signature: Arrabol Retraille	Date: 4/19/16
Signature: / Allalac / Commerce	Date: 9//9// @
Grand Nhalle	110/102/1101
Printed Name: bevald Charle	Phone: 6/7 628 / 188/



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: Green Cab Co, Inc. and Green Automotive, Inc.
Address of taxpayer/applicant's business in Somerville: 600 Windsor Place
Address of taxpayer/applicant's home in Somerville:
Taxpayer/applicant's phone: day:(617) 628-2222 evening: (978) 273-3777
I, (<u>print name</u>) Gerald R. Chaille, 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 20th day of
(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:
16826 # 146007011 # 1295
NOTES: CLERK'S INITIALS: ORIGINAL STAMP: ORIGINAL STAMP: