

CITY OF SOMERVILLE

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

Application to Renew Taxi Medallion License

MADKEP TRANSPORTATION INC 13 PRINCETON ST SOMERVILLE MA 02144 License #:

BL15-000415

File #:

15-330

Fee:

250

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: MADKEP TRANSPORTATION INC Business Location: 0 OUT OF AREA Business Phone: 617-666-2348	W17-666-1019
License Holder: MADKEP TRANSPORTATION INC 13 PRINCETON ST SOMERVILLE MA 02144	
Mailing Address: MADKEP TRANSPORTATION INC 13 PRINCETON ST SOMERVILLE MA 02144	
Business Type: Corporation SANDRA DONAHUE DENISE FOSCAROTA PHILIP DONAHUE	
FID: 043000672	
Emergency Contact: DENISE FOSCAROTA Phone:	
Medallion #(s): MEDALLION #64	

I hereby certify under the	e 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.

Signature: News Goscurote Phone: (01)-646-1019



City of Somerville, Massachusetts Finance Department, Treasury Division

CERTIFICATE OF GOOD STANDING

Exact name of taxpayer/applicant's business: MADICEP TRAUS PONTATION INC. Address of taxpayer/applicant's business in Somerville: 13 Prince to Street					
Address of taxpayer/applicant's business in Somerville: 13 Prince two Street					
Address of taxpayer/applicant's home in Somerville:					
Taxpayer/applicant's phone: day: <u>\(\lambda \) \(\lambda </u>					
I, (print name) Devise to scarde, 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					
April	, 20_15	Neme to	-utl		
April , 20 15. Neme Formute (Taxpayer's signature)					
CITY'S ACKNOWLEDGEMENT					
DATE OF ISSUANCE: _	INCLUDE	S RELEVANT POSTINGS THRO	OUGH:		
TAXES AND ACCOUNT NUMBER(S) INCLUDED IN CERTIFICATE:					
☐ Real Estate	☐ Water/Sewer	☐ Personal Property	Other:		
# 12750	#22(0)4400)	#	#		
NOTES:					
CLERK'S INITIALS:		ORIGINAL STAMP:	SP 4-110-15		