

APPLICATION FOR A CONSTABLE LICENSE

City of Somerville, Commonwealth of Massachusetts

Date 11-6-2012

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

The undersigned respectfully prays that he/she may be granted a license to operate as a Constable in the City of Somerville. 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. Such permission shall be revocable at any time at the pleasure of the Board of Aldermen.

Name ROBERT SWEENEY Date of Birth 10-4-1954
Address, City, Zip 207 CAMBRIDGE ST. CAMBRIDGE, MA
How long at this address? 4 YRS Telephone 781-526-9440 02141
Present Employer CONSTABLE SERVICES Present Occupation CONSTABLE

Do you currently hold a License to Carry a firearm in Massachusetts? [X] Yes [] No
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? [] Yes [X] No

Where do you currently serve as an appointed Constable?

Table with 4 columns: City or Town, Year first Appointed, City or Town, Year first Appointed. Row 1: Somerville MA 2002

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 certify that I am a citizen of the United States and that all statements in this application are true and accurate under the pains and penalties of perjury.

Signature Robert Sweeney

