



BOARD OF ALDERMEN
 93 HIGHLAND AVENUE
 SOMERVILLE, MA 02143
 (617) 625-6600

APPLICATION TO RENEW TAXI MEDALLION LICENSE

MT. PLEASANT TAXI INC
 600 WINDSOR PLACE
 SOMERVILLE, MA 02143

License #: **377**
 City #39
 Fee: **250.00**
 Account ID: **311**
 Reference #: **377**

Review and update the information below. If you have workers compensation insurance, attach proof showing the insurer and policy number. 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: For MT. PLEASANT TAXI INC Business Location: OUT OF AREA Business Phone: 617-628-1081	
License Holder: MT. PLEASANT TAXI INC 600 WINDSOR PLACE SOMERVILLE, MA 02143 617-628-1081	
Mailing Address: MT. PLEASANT TAXI INC SOMERVILLE, MA 02143	2013 JUN -3 P 2:20 CITY CLERK'S OFFICE SOMERVILLE, MA
Business Type: CORPORATION (INC. LLC) SECRETARY - CHERYL HORAN PRESIDENT - GERALD CHAILLE	
FID: 043208616	
Food Manager/Emergency Contact: KAREN TAMAGNA 617-435-1979	

Conditions: (to change any conditions, submit a new application. Contact the City Clerk's Office for more information)

Hours: **NOT APPLICABLE**

MEDALLION #39

Description of Location and/or Other Conditions:

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.

Signature: *Gerald Chaille* Date: 5/28/13
 Print Name: Gerald Chaille Phone: 617 628 1081



City of Somerville, Massachusetts
Finance Department, Treasury Division

CERTIFICATE OF GOOD STANDING

Exact name of taxpayer/applicant's business: Green Automotive, Inc.

Address of taxpayer/applicant's business in Somerville: 600 Windsor Pt

Address of taxpayer/applicant's home in Somerville: _____

Taxpayer/applicant's phone: day: 617 628 1081 evening: 978 273 3777

I, (print name) Charles Horn, 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 31st day of May, 2013.
[Signature]
(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: _____

16448 # 146007011 # 1347 # _____
1346

NOTES:

CLERK'S INITIALS: UB

ORIGINAL STAMP:


RECEIVED
[Signature]
6-4-13