

**TAXICAB MEDALLION APPLICATION
AND TAXICAB OPERATOR LICENSE APPLICATION**

Petition to transfer ownership and to finance sale

Application Fee \$250.00

Date _____

CITY CLERK'S OFFICE
SOMERVILLE, MA

FOR CITY CLERK'S OFFICE ONLY

Date Recorded _____

Amount Paid _____

To the Honorable, the Board of Aldermen of the City of Somerville:

The undersigned respectfully prays that the Board of Aldermen issue the taxicab medallion listed below, and grant a license to operate the same taxicab for the conveyance of persons for hire from place to place within the City. This ownership and 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 Board of Aldermen and/or City Officials. This license shall be revocable at any time at the pleasure of the Board of Aldermen.

Medallion # 59

Current Owner Name IKE, Inc.

Phone 617-728-2222

Address (Include Zip Code) 600 Windsor Place, Somerville, MA 02143

Applicant Name RAYMY, INC.

Phone 617-852-4102

Mailing Address (Include Zip Code) 22 Summer St., Everett, MA 02149

Tax Identification Number: 46-1919778 Check one: SSN ☒ FEIN

If a corporation, name of Majority Shareholder Ephane Raymond

Date of birth 7/7/1950

SSN 018-62-8818

Do you hold a valid Somerville Taxi Driver's License?

☐ Yes ☐ No

Do you hold a Taxi Driver's License in another city?

☒ Yes ☐ No

If yes, in what City/State? Cambridge, Massachusetts

Do you own a Somerville Taxicab Medallion?

☐ Yes ☒ No

Have you ever owned a Somerville Taxicab Medallion?

☐ Yes ☒ No

Have you ever owned a Taxi Medallion elsewhere?

☒ Yes ☐ No

If yes, in what City/State? Cambridge, Massachusetts

Provide the following information if a bank is financing the purchase:

Name of Bank N/A

Address (Include Zip Code) _____

Provide the following information if a corporation is financing the purchase:

Name of Corporation IKE, Inc.
Address (Include Zip Code) 600 Windsor Place Somerville, MA 02143
Name of President Gerald Chaille
Date of Birth 12/20/1952 SS# 029-30-0063
Name of Majority Shareholder Gerald Chaille
Date of Birth 12/20/1942 SS# 029-30-0063

NOTE: Include a REAP Attestation signed by a Corporate Officer, and a MA Secretary of State Certificate of Good Standing for the corporation.

Provide the following information if an individual is financing the purchase:

Name of Individual N/A
Address (Include Zip Code) _____
Date of Birth _____ SS# _____

NOTE: Include a REAP Attestation signed by the individual.

Describe any other financing: _____

Include with this Application the following documents:

- The attached REAP Attestation signed by the Applicant.
- The attached Certificate of Good Standing signed by the Applicant and acknowledged and stamped by the City's Treasury Department.
- A copy of an executed Purchase and Sale Agreement.
- If Applicant is a corporation, a copy of the Articles of Incorporation and the attached Certificate of Corporate Authority.
- If financing is by a corporation, a REAP Attestation signed by a Corporate Officer, and a MA Secretary of State Certificate of Good Standing for the corporation.
- if financing is by an individual, a REAP Attestation signed by the individual.

Applicant agrees to forward to the City Clerk a copy of a valid Registration for the vehicle, issued by the Registry of Motor Vehicles.

Signed under the pains and penalties of perjury this _____ day of _____, 20 13,

RAYMY, INC.

Signature of Applicant _____ Print Name Ephane Raymond

TAXI BUREAU RECOMMENDATION:

The Somerville Tax Bureau recommends that the application be: ☒ Approved ☐ Denied

Signature [Signature] Date 2/14/13

MASSACHUSETTS DEPARTMENT OF REVENUE
REVENUE ENFORCEMENT AND PROTECTION (REAP) ATTESTATION

I certify under the penalties of perjury that I, to my best knowledge and belief, have filed all State tax returns and paid all State taxes required under law.

RAYMY, Inc.

* Signature of Individual or Corporate Name (Mandatory)

By: Corporate Officer (Mandatory, if a corporation) **President**

49-1919778

** Social Security Number (Voluntary) or Federal Identification Number (Mandatory, if a corporation)

* This license will not be issued unless this certification clause is signed by the applicant.

** Your Social Security Number will be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing or tax payment obligations. Licensees who fail to correct their non-filing or delinquency will be subject to license suspension or revocation. This request is made under the authority of Mass. G.L. c. 62C s. 49A.

MASSACHUSETTS DEPARTMENT OF REVENUE

REVENUE ENFORCEMENT AND PROTECTION [REAP] ATTESTATION

I certify under the penalties of perjury that I, to my best knowledge and belief, have filed all state tax returns and paid all state taxes required under law.

IKE, Inc.

* Signature of Individual or Corporate Name (Mandatory)

By: Corporate Officer (Mandatory, if Applicable) President

EIN 042-778092

** Social Security # (Voluntary) or Federal Identification Number

* This license will not be issued unless this certification clause is signed by the applicant.

** Your social security number will be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing or tax payment obligations. Licensees who fail to correct their non-filing or delinquency will be subject to license suspension or revocation. This request is made under the authority of Mass. G.L. c. 62C s. 49A.



The Commonwealth of Massachusetts
William Francis Galvin

Secretary of the Commonwealth, Corporations Division
 One Ashburton Place, 17th floor
 Boston, MA 02108-1512
 Telephone: (617) 727-9640

IKE, INC. Summary Screen



Help with this form

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The exact name of the Domestic Profit Corporation: IKE, INC.

Entity Type: Domestic Profit Corporation

Identification Number: 042778092

Old Federal Employer Identification Number (Old FEIN): 000188818

Date of Organization in Massachusetts: 12/23/1982

Current Fiscal Month / Day: 12 / 31

Previous Fiscal Month / Day: 00 / 00

The location of its principal office:

No. and Street: 600 WINDSOR PLACE
 City or Town: SOMERVILLE State: MA Zip: 02143 Country: USA

If the business entity is organized wholly to do business outside Massachusetts, the location of that office:

No. and Street:
 City or Town: State: Zip: Country:

Name and address of the Registered Agent:

Name: CHERYL L. HORAN
 No. and Street: 600 WINDSOR PLACE
 City or Town: SOMERVILLE State: MA Zip: 02143 Country: USA

The officers and all of the directors of the corporation:

Title	Individual Name First, Middle, Last, Suffix	Address (no PO Box) Address, City or Town, State, Zip Code	Expiration of Term
PRESIDENT	GERALD R. CHAILLE	65 COONS POINT RD., BELMONT, NH 03220 USA	
TREASURER	GERALD R. CHAILLE	65 COONS POINT RD., BELMONT, NH 03220 USA	
SECRETARY	CHERYL L. HORAN	10 PLEASANT HILL LN., METHUEN, MA 01844 USA	
DIRECTOR	GERALD R. CHAILLE	65 COONS POINT RD., BELMONT, NH 03220 USA	

Purchase and Sale Agreement

- Parties 1. Agreement made between **IKE, Inc., c/o Gerald Chaille, Green Cab Association, 600 Windsor Pl., Somerville, MA 02143 SELLER** and **Ephane Raymond, 20 Summer St., Everett, MA or nominee and Myrthe Lahens, of Malden, MA or nominee, BUYERS**
- Med. # 2. **SELLER** will sell and **BUYER** will buy Medallion No **59**, issued by: Board of Alderman of the City of Somerville, for the year 2013
- Price 3. The sales price is **\$300,000.00**. Included as part of the sale is membership with Green Cab Association which includes right of first refusal. Allocation of sales price as to medallion and membership will be made at time of sale, as agreed upon .
- Deposit 4. The **BUYER** gives a deposit of \$20,000.00 which will be held in escrow, without interest, by THE SELLER and applied toward purchase price at time of sale. The balance will be paid as follows: \$200,000.00 will be paid at time of sale in bank or certified checks and \$80,000.00 will be financed by IKE, Inc.
Failure of the **BUYER** to perform for any reason other than the contingencies contained herein will result in the forfeiture of the deposit to the **SELLER**.
- SELLER's** 5. The **SELLER** warrants:
warranties
- A. The medallion has not been pledged or mortgaged .
- B. That there are no outstanding court orders or judgement preventing the sale of the medallion.
- C. That there are no other parties, except those named in this agreement, who have any interest or claim in the medallion.
- D. That the **SELLER** will deliver a good, clear marketable title to the **BUYER**.
- SELLER** agrees to comply with all legal requirements set forth by **BUYERS'** Attorney, or if purchase is financed, by the financing institution's attorney, to accomplish this.
- BUYER** will have the right to use the purchase funds to obtain releases and discharges of any outstanding liens or impediments to sale and the

SELLER will be responsible for any filing costs of these releases and discharges.

Signing of Hackney Papers 6. Both parties will sign all necessary documents to obtain Hackney approval of transfer within 5 days of signing of this agreement; if **BUYER** has a financing contingency, then parties will sign within 5 days from loan approval.

Delivery and Sale 7. Delivery of the medallion will be made at time of sale which will take within 15 days from date of Hackney approval, unless otherwise agreed upon by the parties.

The sale will take place at the office of Financing Institution's Attorney, or if no financing involved, then at a place mutually agreed upon between the parties.


Hackney Approval 8. It is understood by both parties that this sale and transfer is subject to approval of the Board of Alderman of the City of Somerville.

Parties Acknowledgments 9. *The parties acknowledge that they have been afforded the opportunity to have this agreement reviewed by counsel of their choice.
The parties acknowledge that they understand that this agreement is a valid, binding contract, and that it cannot be changed or modified unless in writing by both parties.*

Signed and sealed, in triplicate, this 29 day of January, 2013

SELLER

WITNESS




Gerald Chaille

BUYERS


Ephane Raymond


Myrtha Lahens