

Mailing Address - if different

## THE COMMONWEALTH OF MASSACHUSETTS TOWN OF WESTPORT

## RENEWAL APPLICATION FOR A LICENSE TO BUY, SELL, EXCHANGE OR ASSEMBLE NEW AND/OR SECOND HAND MOTOR VEHICLES OR PARTS THEREOF

The undersigned, duly authorized by the concern herein mentioned, hereby apply for the renewal of \_\_\_\_\_ Class I License \_\_\_\_\_ Class II License \_\_\_\_\_ Class III License to buy, sell, exchange or assemble second-hand motor vehicles or parts thereof, in accordance with the provisions of Chapter 140 of the General Laws. Business Name: Business address: Business phone:\_\_\_\_\_ Hours of business: Manager: Emergency Contact Person: Phone: Complete appropriate section below: If an individual, state full name and residential address; include legal or mailing address if either is different: Full Name Residential Address Mailing Address - if different If a co-partnership, state full names and residential address (also legal and/or mailing addresses if appropriate) of the persons composing it: Full Name Full Name Residential Address Residential Address

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President: Full Name Residence Mailing Secretary: \_ Full Name Residence Mailing Treasurer: \_\_\_\_ Full Name Residence Mailing Have you complied with MGL Chapter 152, Section 25A Workers Compensation Insurance as required? Yes \_\_\_\_\_ (Attach copy of Workers Compensation Policy Declaration Page) Not Applicable\_\_\_\_\_ Have you renewed your Bond Certificate? Yes\_\_\_\_\_ (Attach a copy of your Bond Renewal or Certificate) No Class I applicants only Under MGL 58, Section 58: Please submit a current copy of your Agent contract. Are all local real estate taxes, excise taxes and/or personal property taxes paid up to date? No\_\_\_\_\_ Reason:\_\_\_\_ During the past year, have you been arrested or convicted of a crime? No\_\_\_\_\_ If yes, explain:\_\_\_\_ APPLICANT(s) SIGNATURE(s) Full Name Full Name Residential Address Residential Address Mailing Address - if different Mailing Address - if different Date of Birth Date of Birth Social Security Number Social Security Number Phone Number Cell Number Phone Number Cell Number Email Email **IMPORTANT** 

If an association or a corporation, state full names and residential (also legal and/or mailing)

addresses of principal officers:

Every question must be answered with full information. False statements herein may result in the rejection of your application or the subsequent revocation of your license if issued.

## Class I, II and III Licenses for Renewal:

- A. Completed renewal application
- B. \$200.00 renewal fee (per license)
- C. Copy of your Bond
- D. Copy of your Worker's Comp coverage sheet (if applicable).