

## CLASS I AUTOMOBILE DEALER'S LICENSE APPLICATION INSTRUCTIONS

Please submit the following when filing for a **Class I** Automobile Dealer's license:

- Written request detailing what you are asking for, including hours of operation.
- Complete the following forms :
  - Commonwealth of MA application.
  - Town's General application.
  - Completed Workers' Compensation Affidavit/Federal Identification Tax I.D. #.
  - CORI Request form.
- Provide:
  - Certified Abutter's list (from Assessor's office)
  - Sketch-site plan (drawn to scale) of premises showing numbered parking spaces (including those vehicles for sale, employee parking, & customer parking).
- Prepare:
  - To pay for publication of the hearing notice, which will be prepared by the Selectmen's office and the amount given to you after the newspaper has determined the cost. This check will be made payable to SouthCoast Media Group. It is approximately \$80.
  - To write check payable to the Town in the amount of \$200 (license fee) – to be **paid after application is approved and at time license is picked up at the Town Clerk's office, 20 Centre Street.**

A completed application packet should be submitted to the Selectmen's office, Town Hall, 10 Nickerson Ave. The applicant must produce a MA Driver's license at time application is submitted as part of CORI background investigation process.

All required forms can be found on the Town's website: [www.middleborough.com](http://www.middleborough.com) under the Selectmen's department, Licensing/Applications.

**APPLICATION FOR LICENSE OR LICENSING TRANSACTION  
(PLEASE TYPE OR PRINT CLEARLY)**

DATE \_\_\_\_\_  
NAME OF **APPLICANT** \_\_\_\_\_  
ADDRESS OF APPLICANT \_\_\_\_\_  
ASSESSORS MAP & LOT \_\_\_\_\_  
**DAYTIME** TELEPHONE \_\_\_\_\_  
EMAIL ADDRESS \_\_\_\_\_

NAME OF **BUSINESS** \_\_\_\_\_  
OWNER OF PROPERTY TO BE LICENSED \_\_\_\_\_  
ADDRESS OF PROPERTY TO BE LICENSED \_\_\_\_\_  
ASSESSORS MAP & LOT \_\_\_\_\_

**TYPE OF LICENSE REQUESTED (Check One)**

2 <sup>nd</sup> Hand _____	WRPD _____
Class I Automobile Dealer License _____	Earth Removal Permit _____
Class II Automobile Dealer License _____	Liquor License _____
Class III Automobile Dealer License _____	Pawnbroker _____
Weekday Entertainment _____	Automatic Amusement Device _____
Sunday Entertainment _____	Other _____

Anticipated Start Date for Business: \_\_\_\_\_  
Days & Hours of Operation: \_\_\_\_\_

Has the applicant previously held a similar license in the Town of Middleborough or elsewhere?  
If yes, explain:

\_\_\_\_\_

Signature \_\_\_\_\_

**Please bring to the Treasurer/Collector's office @ the Town Hall Annex, 20 Center Street,  
3<sup>rd</sup> floor to obtain confirmation/signature that no outstanding taxes/municipal charges exist.**

**Dear Treasurer/Collector:**

Please inform this department as to whether or not the above listed property owner/applicant/petitioner owes the Town of Middleborough any outstanding taxes and/or municipal charges that remain unpaid for more than one year.

Does Property Owner/Applicant/Petitioner owe Taxes/Municipal Charges? \_\_\_\_\_

THE COMMONWEALTH OF MASSACHUSETTS

OF

APPLICATION FOR A LICENSE TO BUY, SELL, EXCHANGE  
OR ASSEMBLE SECOND HAND MOTOR VEHICLES  
OR PARTS THEREOF

I, the undersigned, duly authorized by the concern herein mentioned, hereby apply for a .....  
class 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.

1. What is the name of the concern? .....

Business address of concern. No. ....St.,

..... City — Town.

2. Is the above concern an individual, co-partnership, an association or a corporation? .....

3. If an individual, state full name and residential address.

4. If a co-partnership, state full names and residential addresses of the persons composing it.

5. If an association or a corporation, state full names and residential addresses of the principal officers.

President .....

Secretary .....

Treasurer .....

6. Are you engaged principally in the business of buying, selling or exchanging motor vehicles? .....

If so, is your principal business the sale of new motor vehicles? .....

Is your principal business the buying and selling of second hand motor vehicles? .....

Is your principal business that of a motor vehicle junk dealer? .....

7. Give a complete description of all the premises to be used for the purpose of carrying on the business.

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.....  
.....  
.....

8. Are you a recognized agent of a motor vehicle manufacturer? .....  
(Yes or No)

If so, state name of manufacturer .....  
.....

9. Have you a signed contract as required by Section 58, Class 1? .....  
(Yes or No)

10. Have you ever applied for a license to deal in second hand motor vehicles or parts thereof? .....  
(Yes or No)

If so, in what city — town .....

Did you receive a license? ..... For what year? .....  
(Yes or No)

11. Has any license issued to you in Massachusetts or any other state to deal in motor vehicles or parts thereof ever been suspended or revoked? .....  
(Yes or No)

.....  
.....  
.....  
.....

Sign your name in full. ....  
(Duty authorized to represent the concern herein mentioned)

Residence .....

**IMPORTANT**

EVERY QUESTION MUST BE ANSWERED WITH FULL INFORMATION, AND FALSE STATEMENTS HEREIN MAY RESULT IN THE REJECTION OF YOUR APPLICATION OR THE SUBSEQUENT REVOCATION OF YOUR LICENSE IF ISSUED.

NOTE: If the applicant has not held a license in the year prior to this application, he must file a duplicate of the application with the registrar. (See Sec. 59)

APPLICANT WILL NOT FILL THE FOLLOWING BLANKS

Application after investigation ..... (Approved or Disapproved)

License No. .... granted ..... 19.... Fee \$.....

Signed.....

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CHAPTER 140 OF THE GENERAL LAWS, TER. ED., WITH AMENDMENTS THERETO (EXTRACT)

SECTION 57. No person, except one whose principal business is the manufacture and sale of new motor vehicles but who incidentally acquires and sells second hand vehicles, or a person whose principal business is financing the purchase of or insuring motor vehicles but who incidentally acquires and sells second hand vehicles, shall engage in the business of buying, selling, exchanging or assembling second hand motor vehicles or parts thereof without securing a license as provided in section fifty-nine. This section shall apply to any person engaged in the business of conducting auctions for the sale of motor vehicles.

SECTION 58. Licenses granted under the following section shall be classified as follows:

Class 1. Any person who is a recognized agent of a motor vehicle manufacturer or a seller of motor vehicles made by such manufacturer whose authority to sell the same is created by a written contract with such manufacturer or with some person authorized in writing by such manufacturer to enter into such contract, and whose principal business is the sale of new motor vehicles, the purchase and sale of second hand motor vehicles being incidental or secondary thereto, may be granted an agent's or a seller's license; provided, that with respect to second hand motor vehicles purchased for the purpose of sale or exchange and not taken in trade for new motor vehicles, such dealer shall be subject to all provisions of this chapter and of rules and regulations made in accordance therewith applicable to holders of licenses of class 2.

Class 2. Any person whose principal business is the buying or selling of second hand motor vehicles may be granted a used car dealer's license.

Class 3. Any person whose principal business is the buying of second hand motor vehicles for the purpose of remodeling, taking apart or rebuilding the same, or the buying or selling of parts of second hand motor vehicles or tires, or the assembling of second hand motor vehicle parts, may be granted a motor vehicle junk license.

SECTION 59. The police commissioner in Boston and the licensing authorities in other cities and towns may grant licenses under this section which shall expire on January first following the date of issue unless sooner revoked. The fees for the licenses shall be fixed by the licensing board or officer, but in no case shall exceed fifty dollars. Application for license shall be made in such form as shall be approved by the registrar of motor vehicles, in sections fifty-nine to sixty-six, inclusive, called the registrar, and if the applicant has not held a license in the year prior to such application, such application shall be made in duplicate, which duplicate shall be filed with the registrar. No such license shall be granted unless the licensing board or officer is satisfied from an investigation of the facts stated in the application and any other information which they may require of the applicant, that he is a proper person to engage in the business specified in section fifty-eight in the classifications for which he has applied, that said business is or will be his principal business, and that he has available a place of business suitable for the purpose. The license shall specify all the premises to be occupied by the licensee for the purpose of carrying on the licensed business. Permits for a change of situation of the licensed premises or for addition thereto may be granted at any time by the licensing board or officer in writing, a copy of which shall be attached to the license. Cities and towns by ordinance or by-law may regulate the situation of the premises of licensees within class 3 as defined in section fifty-eight, and all licenses and permits issued hereunder to persons within said class 3 shall be subject to the provisions of ordinances and by-laws which are hereby authorized to be made. No license or permit shall be issued hereunder to a person within said class 3 until after a hearing, of which seven days' notice shall have been given to the owners of property abutting on the premises where such license or permit is proposed to be exercised. All licenses granted under this section shall be revoked by the licensing board or officer if it appears, after hearing, that the licensee is not complying with sections fifty-seven to sixty-nine, inclusive, or the rules and regulations made thereunder; and no new license shall be granted to such person thereafter, nor to any person for use on the same premises, without the approval of the registrar. The hearing may be dispensed with if the registrar notifies the licensing board or officer that a licensee is not so complying. Any person aggrieved by any action of the licensing board or officer refusing to grant, or revoking a license for any cause may, within ten days after such action, appeal therefrom to any justice of the superior court in the county in which the premises sought to be occupied under the license or permit applied for are located. The justice shall, after such notice to the parties as he deems reasonable, give a summary hearing on such appeal, and shall have jurisdiction in equity to review all questions of fact or law and may affirm or reverse the decision of the board or officer and may make any appropriate decree. The decision of the justice shall be final.

APPLICATION FOR A LICENSE TO BUY, SELL,  
EXCHANGE OR ASSEMBLE SECOND HAND  
MOTOR VEHICLES OR PARTS THEREOF.

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APPLICANT WILL NOT FILL THE FOLLOWING BLANKS

Application No. ....

Class ..... License No. ....

Name .....

St. and No. ....

City — Town .....

Date Issued .....

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Remarks .....

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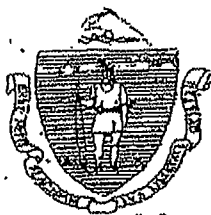
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The Commonwealth of Massachusetts  
Department of Industrial Accidents  
Office of Investigations  
600 Washington Street  
Boston, Mass. 02111

Workers' Compensation Insurance Affidavit - General Businesses

name: \_\_\_\_\_  
address: \_\_\_\_\_ Tax ID # \_\_\_\_\_  
city: \_\_\_\_\_ state: \_\_\_\_\_ zip: \_\_\_\_\_ phone #: \_\_\_\_\_

work site location (full address): \_\_\_\_\_  
 I am a sole proprietor and have no one working in any capacity. Business Type:  Retail  Restaurant/Bar/Eating Establishment  
 I am an employer with \_\_\_\_\_ employees (full & part time).  Office  Sales (including Real Estate, Autos etc.)  
 I am an employer providing workers' compensation for my employees working on this job.  Other

company name: \_\_\_\_\_  
address: \_\_\_\_\_  
city: \_\_\_\_\_ phone #: \_\_\_\_\_

insurance co. \_\_\_\_\_  
 I am a sole proprietor and have hired the independent contractors listed below who have the following workers' compensation policies:

company name: \_\_\_\_\_  
address: \_\_\_\_\_  
city: \_\_\_\_\_ phone #: \_\_\_\_\_

insurance co. \_\_\_\_\_  
policy #: \_\_\_\_\_  
company name: \_\_\_\_\_

address: \_\_\_\_\_  
city: \_\_\_\_\_ phone #: \_\_\_\_\_  
policy #: \_\_\_\_\_

insurance co. \_\_\_\_\_  
Failure to secure coverages as required under Section 25A of MGL 152 can lead to the imposition of criminal penalties of a fine up to \$1,500.00 and/or one year's imprisonment as well as civil penalties in the form of a STOP WORK ORDER and a fine of \$100.00 a day against me. I understand that a copy of this statement may be forwarded to the Office of Investigation of the DIA for coverage verification.

I do hereby certify under the pains and penalties of perjury that the information provided above is true and correct.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
Print name \_\_\_\_\_ Phone # \_\_\_\_\_

Official use only do not write in this area to be completed by city or town official  
city or town: \_\_\_\_\_ permit/license # \_\_\_\_\_  
 check if immediate response is required  
contact person: \_\_\_\_\_ phone #: \_\_\_\_\_  
 Building Department  
 Licensing Board  
 Selectman's Office  
 Health Department  
 Other

CRANBERRY CAPITAL  
OF THE WORLD



Phone: 508-946-2405  
Fax: 508-946-0058

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**Town of Middleborough**  
**Massachusetts**  
**CORI REQUEST FORM**

Town of Middleborough Board of Selectmen's Office has been certified by the Criminal History Systems Board for access to conviction and pending criminal case data. As an applicant/employee for \_\_\_\_\_, I understand that a criminal record check will be conducted for conviction and pending criminal case information only and that it will not necessarily disqualify me. The information below is correct to the best of my knowledge.

\_\_\_\_\_  
Applicant/Employee Signature

\_\_\_\_\_  
APPLICANT/EMPLOYEE INFORMATION (PLEASE PRINT)

\_\_\_\_\_  
LAST NAME                      FIRST NAME                      MIDDLE NAME

\_\_\_\_\_  
MAIDEN NAME OR ALIAS (IF APPLICABLE)                      PLACE OF BIRTH

\_\_\_\_\_  
DATE OF BIRTH                      SOCIAL SECURITY NUMBER                      ID Theft Index PIN \*  
(Requested, not required)                      (if applicable)

\_\_\_\_\_  
MOTHER'S MAIDEN NAME

\_\_\_\_\_  
CURRENT AND FORMER ADDRESSES:

\_\_\_\_\_  
\_\_\_\_\_

SEX: \_\_\_\_\_ HEIGHT: \_\_\_\_\_ ft. \_\_\_\_\_ in.                      WEIGHT: \_\_\_\_\_ EYE COLOR: \_\_\_\_\_

STATE DRIVER'S LICENSE NUMBER: \_\_\_\_\_  
(include state of issue)

\*\*\*THE ABOVE INFORMATION WAS VERIFIED BY REVIEWING THE FOLLOWING FORM OF GOVERNMENT ISSUED PHOTOGRAPHIC IDENTIFICATION: \_\_\_\_\_

REQUESTED BY: \_\_\_\_\_  
SIGNATURE OF CORI AUTHORIZED EMPLOYEE

\*The CHSB Identify Theft Index PIN Number is to be completed by those applicants that have been issued an Identity Theft Index PIN Number by the CHSB. Certified agencies are required to provide all applicants the opportunity to include this information to ensure the accuracy of the CORI request process. All CORI request forms that include this field are required to be submitted to the CHSB via mail or by fax to 617-660-4614.