

COMMONWEALTH OF MASSACHUSETTS TOWN OF REHOBOTH

APPLICATION FOR A CLASS I OR II AUTO 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 I or Class II Auto License to Buy, Sell, Exchange or Assemble Second			
Hand Motor Vehicles or parts thereof, in accordance with the provisions of Chapter			
1. Name of Applicant: Quality Auto Sales of Rehoboth LCC			
(Sole Proprietor, Partnership, LLP, Corporation, LLC, etc.) D/B/A if different from applicant name: Auto Sales of Rehoboth			
Business address of license premises: 242 Anaway St Repolooth MA			
Business Telephone No: To Follow Email Address: To Follow			
Email Address:			
2. Is the above applicant an/a: UIndividual, association or corporation?			
If an individual (sole proprietor): Print full name: Alari Couchon			
Print residential/home address. 208 Milton Rd Warwick Rt 02888 Business Telephone #: Home/Cell #: 401-403-2-219			
3. If a co-partnership, state full names and residential/home addresses of persons comprising it:			
Name: Home Address:			
Name: Home Address:			
4. If association, LLP, LLC or a corporation, state full names and residential addresses of principles:			
President Name: Alari Couchon Home Address: 208 Milton Rd Warwick Rt 0288			
Secretary Name: Home Address:			
Treasurer Name: Home Address: Home Address:			
Other Name: Home Address:			
5. Manager of Licensed Premises, if not applicant:			
Name: Kevin Barcelos Home Address: 208 Milton Rd Warwick P. Jak			
Day Phone #: 40/-39/-3682 Home/Cell #: Same			
6. Are you engaged principally in the business of buying, selling or exchanging motor vehicles?			
Yes No			

	If so, is your principal business the sale of new vehicles? Yes No Is your principle business the buying and selling of second hand motor vehicles? Yes No Is your principal business that of a motor vehicle junk dealer? Yes No		
7.	Give a complete description of all the premises to be used for the purpose of carrying on the business: Building With Office and Parking for Inventory and Customers.		
8.	Are you a recognized agent of a motor vehicle manufacturer? Yes No If yes, state name of manufacturer: Do you have a signed contract with manufacturer as required by MGL C.140, Section 58, Class I: Yes No - Attach copy of signed contract, if applicable.		
9. Have you ever applied for a license to deal in second hand motor vehicles or parts thereof? Yes No If so, in what city/town			
	Did you receive a license? For what year?		
10. 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 No			
11. Identify each individual who owns at lease 40% of the business not previously listed above:			
12. Required documents which must accompany this application for new license or renewal of license:			
For Class II Auto License a \$25,000.00 Surety Bond Name of Insurance Co:			
Workers Comp Insurance Signed Affidavit with Certificate of Liability Insurance attached (if applicable)			
\$125.00 License Fee – Checks Payable to the Town of Rehoboth			
Sign your name in full: Occur Cerebran Print Name: Alari Couchon Home Address: 208 Milton Rd Warwick RI 0288 Date: 1/39/20			

1.10	APPLICANT WILL NOT FILL IN THE FOLLOWING BLANKS		
LICE	ENSE NUMBER GRANTED FEE \$125.00		
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COMMONWEALTH OF MASSACHUSETTS TOWN OF REHOBOTH APPLICATION FOR LICENSE (GENERAL)

To the Licensing Authority: The undersigned hereby applies for a license in accordance with the provisions of the Statutes relating thereto: ouchon Print applicant's name Auto Sales of Rehoboth LLC TYPE OF LICENSE/PERMIT BEING APPLIED FOR: (check all that apply) ☐ COMMON VICTUALLER—\$25 ☐ JUNK (ANTIQUE) LICENSE* - \$20 ☐ AUTOMATIC AMUSEMENT—see schedule for fee ☐ HAWKERS & PEDDLERS--\$50 POOL TABLEE—\$25 per table ☐ 7-DAY ENTERTAINMENT—\$50 (PLEASE COMPLETE ENTERTAINMENT LICENSE) AUCTION AUTO CLASS I I III III LIVERY-\$25 per vehicle (Please check appropriate #)--\$125 OTHER Rehoboth MA, **Business Address:** Warwick RIO2888 Mailing Address: (if different than business address) Home Address: Warwick RI 02888 (REQUIRED) **Business Phone:** Home Phone: Email Address: PLEASE COMPLETE FOLLOWING SECTION:

Required: Pursuant to M.G.L. Ch. 62C, Sec. 49A, 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 and Local taxes required under law.

FID NXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	Signature of Individual or Corporate Name
6/4/87	By:
Date of Birth	Corporate Officer (if applicable)

^{*} For any new applications for Auto, Junk/Antique or Hawkers & Peddlers license, please sign attached CORI form.