

**BOARD OF SELECTMEN
TOWN OF FOXBOROUGH
MASSACHUSETTS**

Foxborough Town Hall - 40 South Street - Foxborough, MA 02035
Telephone 508-543-1200 Fax 508-543-1235

**CLASS I AUTO LICENSE
AGENT'S OR SELLER'S LICENCE APPLICATION
For the sale of second-hand Motor Vehicles**

**FEE - \$200 - PAYABLE TO TOWN OF FOXBORO - Expires on
January 1**

Date _____

To the Licensing Authorities:

The undersigned hereby applies for a License in accordance with the provisions of
the Statutes relating thereto

FULL NAME OF PERSON, FIRM OR CORPORATION

ADDRESS

TELEPHONE NUMBER

Premises description as
follows: _____

CLASS I LICENSE IN THE TOWN OF FOXBOROUGH IN ACCORDANCE
WITH THE RULES AND REGULATIONS MADE UNDER AUTHORITY OF
SAID STATUTES.

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.

*Signature of Individual or Corporate Name
(Mandatory)

By Corporate Officer
(Mandatory, if applicable)

** 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. c626Cs 49A.

Signature of Applicant