A Second Hand (Class I & II) Motor Vehicle License is needed to buy, sell, exchange or assemble second hand motor vehicles or parts thereof.

1. The attached application must be complete & accurate. The applicant must either PRINT or TYPE Clearly. No section, if applicable, should be left blank.

2. Applicants must make arrangements for the attached Code Enforcement Inspectors to inspect the premises to be licensed. (Please see attached application for telephone numbers of Inspectors).

3. Keep the application on the premises to be licensed so the Inspectors can sign their approval following their inspection. Once you have received all signatures, return the application to the City Clerk’s Office.

4. Provide a copy of the lease and/or purchase and sales agreement.

5. Complete CORI Request Form and return to City Clerk’s Office three (3) weeks before submitting application to City Clerk.

6. Complete Worker’s Comp Insurance Affidavit and return with a copy of Declaration page of Worker’s Comp Policy.

7. Class II applicants please include a copy of your $25,000.00 Surety Bond.

8. If you are filing as a corporate/partnership, you will need to supply a vote of the Board of Directors of the Corporation or Partnership appointing a manager.

9. Apply for a Business Certificate at the City Clerk’s office upon receiving your occupancy permit from Inspectional Services.

10. The Wednesday before the Board of Aldermen meeting is the deadline for any paperwork that is completed for a full or pre-approval. (The BOA meets the 1st & 3rd Monday of the Month).

11. The applicant must be present at the Board of Aldermen meeting for the application to be approved. If the application is approved, the License will be issued from the City Clerk’s Office upon receipt of the Occupancy Permit.

12. The Second Hand (Class I & II) Motor Vehicle License is $100.00 and is renewed by the calendar year.

13. The applicant must return the ORIGINAL APPLICATION to the City Clerk’s Office.
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: __________________________________________

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

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?

   ______

(Continued on next page)
7. Give a complete description of all the premises to be used for the purpose of carrying on the business.

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

8. Hours of Operation: Day________________________ Time:________________________

Day________________________ Time:________________________

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 Duly 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)
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 sections 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 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 will 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 $100 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 license 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 facts 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.

________________________________________

APPLICANT WILL NOT FILL THE FOLLOWING BLANKS

Application No. __________________________

Class ____________ License No. _____ - ____

Name ________________________________

St. and No. ____________________________

City/Town ____________________________

Date Issued ____________________________

_______________________________________

Remarks ______________________________

_______________________________________

_______________________________________

_______________________________________

_______________________________________
DEPARTMENTAL REPORTS OF INVESTIGATIONS RELATIVE TO
PETITION FOR CLASS I & II MOTOR VEHICLE LICENSE

REPORT OF FIRE DEPARTMENT

Approval: ______________________________________ DATE: __/__/____
Office of Fire Prevention (781-665-0501)

REPORT OF POLICE DEPARTMENT

Approval: ______________________________________ DATE: __/__/____
Police Department (781-979-4485)

REPORT OF INSPECTION SERVICES DEPARTMENT

Approval: ______________________________________ DATE: __/__/____
Bldg. Commissioner (781-979-4135)

The premises where it is proposed to conduct the business under the license herein requested is situated in ________ District, as appearing on the Zoning Map of the City of Melrose.

OFFICE USE ONLY: Fee Paid ______  CORI FORM SUBMITTED ______
TAX CERTIFICATION FORM

License Year: _____________

License # ____________________________________________________________

Licensee: Name _______________________________________________________

Address _______________________________________________________________

_____________________________________________________________________

D/B/A: _________________________________________________________________

ID# __________________________________________________________________

Manager: __________________________________________________________________

By signing below I hereby certify under the penalties of perjury that I have, to the best of my
knowledge and belief, filed all state tax returns, paid all state taxes, paid all local taxes, paid all water,
sewer and solid waste disposal bills, paid all tax titles, paid all utilities, and paid all motor vehicle
excise taxes to the City of Melrose required by law.

__________________________________________ By: Corporate Office
Signature of Applicant or Corporate Name* (Mandatory, if applicable)

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

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

**Your Social Security number or Federal Identification number will be furnished to the
Massachusetts Department of Revenue (DOR) to determine whether you have met tax filing or tax
payment obligations. Licensees failing to correct their non-filing or delinquency will be subject to
license suspension or revocation. This request is made under the authority of Massachusetts General
Laws, Chapter 62C, Section 49A.
Applicant Information

Business/Organization Name: ________________________________
Address: ________________________________ City/State/Zip: ________________________________

Are you an employer? (check one):

1. I am an employer with _______ employees (full and/or part-time).*
2. I am a sole proprietor or partnership and have no employees working for me in any capacity. (No workers’ comp insurance required)
3. We are a corporation and its officers have exercised their right of exemption per c. 152, §1(4), and we have no employees. (No workers’ comp insurance required)**
4. We are a non-profit organization, staffed by volunteers, with no employees. (No workers’ comp insurance required)

Business Type (required):

5. Retail
6. Restaurant/Bar/Eating Establishment
7. Office and/or Sales (inc. real estate, auto, etc.)
8. Non-profit
9. Entertainment
10. Manufacturing
11. Health Care
12. Other

Any applicant that checks box #1 must also fill out the section below their worker’s compensation policy information. ** If the corporate officers have exempted themselves, but the corporation has other employees, a workers’ compensation is required and such an organization should check box #1.

I am an employer that is providing workers’ compensation insurance for my employees. Below is the policy information.

Insurance Company Name: ________________________________
Insurer’s Address: ________________________________ City/State/Zip: ________________________________
Policy# or Self-insurance License# ________________________________ Expiration Date: ________________________________

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

Signature: ________________________________ Date: _______ / _______ / _______ Phone #: ________________________________

Official use only. Do not write in this area, to be completed by city or town official.

City or Town: ________________________________ Permit/License #: ________________________________

Issuing Authority (circle one):
1. Board of Health
2. Building Department
3. City/Town Clerk
4. Licensing Board
5. Selectmen’s Office
6. Other

Contact Person: ________________________________ Phone #: ________________________________
INFORMATION AND INSTRUCTIONS

Massachusetts General Laws chapter 152 requires all employers to provide workers’ compensation for their employees. Pursuant to this statute, an employee is defined as “…every person in the service of another under any contract of hire, express or implied, oral or written.”

An employer is defined as “an individual, partnership, association, corporation or other legal entity, or any two or more of the foregoing engaged in a joint enterprise, and including the legal representatives of a deceased employer, or the receiver or trustee of an individual, partnership, association or other legal entity, employing employees. However, the owner of a dwelling house having not more than three apartments and who resides therein, or the occupant of the dwelling house of another who employs persons to do maintenance, construction or repair work on such dwelling house or on the grounds or building appurtenant thereto shall not because of such employment be deemed to be an employer.”

MGL chapter 152, §25C(6) also states that “every state or local licensing agency shall withhold the issuance or renewal of a license or permit to operate a business or to construct buildings in the commonwealth for any applicant who has not produced acceptable evidence or compliance with the insurance coverage required.” Additionally, MGL chapter 152, §25C(7) states “Neither the commonwealth nor any of its political subdivisions shall enter into any contract for the performance of public work until acceptable evidence of compliance with the insurance requirements of this chapter have been presented to the contracting authority.”

Applicants

Please fill out the workers’ compensation affidavit completely, by checking the boxes that apply to your situation and, if necessary, supply your insurance company’s name, address, and phone number along with a certificate of insurance. Limited Liability Companies (LLC) or Limited Liability Partnerships (LLP) with no employees other than the members or partners, are not required to carry workers’ compensation insurance. If an LLC or LLP does have employees, a policy is required. Be advised that this affidavit may be submitted to the Department of Industrial Accidents for confirmation of insurance coverage. Also be sure to sign and date the affidavit. The affidavit should be returned to the city or town that the application for the permit or license is being requested, not the Department of Industrial Accidents. Should you have any questions regarding the law or if you are required to obtain a workers’ compensation policy, please call the department at the number listed below. Self-insured companies should enter their self-insurance license number on the appropriate line.

City or Town Officials

Please be sure that the affidavit is complete and printed legibly. The Department has provided a space at the bottom of the affidavit for you to fill out in the event the Office of Investigation has to contact you regarding the applicant. Please be sure to fill in the permit/license number which will be used as a reference number. In addition, an applicant that must submit multiple permit/license applications in any given year, need only submit one affidavit indicating current policy information (if necessary). A copy of the affidavit that has been officially stamped or marked by the city or town may be provided to the applicant as proof that a valid affidavit is on file for future permits or licenses. A new affidavit must be filled out each year. Where a home owner or citizen is obtaining a license or permit not related to any business or commercial venture (i.e. a dog license or permit to burn leaves etc.) said person is NOT required to complete this affidavit.

The Office of Investigation would like to thank you in advance for your cooperation and should you have any questions please do not hesitate to give us a call.

The Department’s address, telephone and fax number:

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

Tel. # 617-727-4900 ext 406 or 1-877-MASSAFE
Fax # 617-727-7749
www.mass.gov/dia