



**Town of Fairhaven
Massachusetts
Select Board**

40 CENTER STREET
FAIRHAVEN, MA 02719

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FAX: (508) 979-4079
Selectmen@Fairhaven-MA.gov

APPLICATION FOR LICENSE TO HAVE A PRIVATE LIVERY

The undersigned hereby makes application for a license to have a **Private Livery**.

Signature _____

Residence _____

Telephone # _____

Operator's License # _____

Car _____

Registration # _____

Date of Birth _____

Pursuant to M.G.L. Chapter 62C, section 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 taxes required under law.

Social Security Number or Federal
Identification Number

Signature

Date: _____

Fee: \$10.00 Per Car

Office Use only

Workers' Compensation _____

Building Department _____

Board of Health _____

Taxes _____