



# City of Lynn, Commonwealth of Massachusetts

## APPLICATION FOR LIVERY – ADDITIONAL VEHICLE

Please enter your information: (Please print all information)

Owner's Name (Please Print) \_\_\_\_\_

Owner's Street Address \_\_\_\_\_

Owner's City, State, Zip \_\_\_\_\_

Owner's Telephone Number \_\_\_\_\_

Business Name \_\_\_\_\_

Business Street Address \_\_\_\_\_

Business City, State, Zip \_\_\_\_\_

Business Telephone Number \_\_\_\_\_

Year and Model \_\_\_\_\_

VIN \_\_\_\_\_

Type (Type & Capacity of Vehicle) \_\_\_\_\_

Mass. Registration Number \_\_\_\_\_

Name of Insurer \_\_\_\_\_

\_\_\_\_\_  
OWNER'S SIGNATURE

\_\_\_\_\_  
DATE

### OFFICE USE ONLY

- Proof of Existing Business
- Copy of Identification
- Proof of Garaging Attached
- \$100.00 Fee Paid Per Vehicle

Paid by:  Cash  Check  Credit Card

**Clerk's Initials:** \_\_\_\_\_