



DATE: IN CITY COUNCIL, **OCTOBER 25, 2018**  
TO: HONORABLE MEMBERS OF THE NEW BEDFORD CITY COUNCIL  
FROM: CITY CLERK/CLERK OF CITY COUNCIL  
SUBJECT: LIVERY LICENSE APPLICATION – **RENEWAL**

The undersigned, on behalf of the Applicant, hereby submits a copy of the Application requesting a Private Livery License, under the provisions of MGL, Chapter 159A, Section 1 and amendments thereto, and MGL, Chapter 270, Section 22 (Smoke Free Workplace Law) and all other laws applicable to such operation, to carry passengers for hire over the streets of New Bedford.

NAME	<b>ALI BOKHARI SUMAIRA BOKHARI</b>
BUSINESS NAME	<b>MAGIC WHEELS</b>
ADDRESS	<b>44 LIBERTY STREET</b>
BUSINESS ADDRESS	<b>44 LIBERTY STREET</b>
CITY/STATE/ZIP CODE	<b>NEW BEDFORD, MA 02740</b>
BUSINESS CITY/STATE/ZIP	<b>NEW BEDFORD, MA 02740</b>

Please note that the City Clerk's Office has the Original Application on File, as well as additional paperwork necessary to receive the Private Livery License (CORI, DOR TAX, Smoke-Free Info, etc.).  
Thank you, in advance, for your attention to this matter.

Sincerely,

Dennis W. Farias,  
City Clerk/Clerk of the City Council

DWF:smh

IN CITY COUNCIL, October 25, 2018

Referred to the Committee on Appointments and Briefings.

Dennis W. Farias, City Clerk

a true copy attested

City Clerk

**CITY OF NEW BEDFORD**  
**MASSACHUSETTS**  
**APPLICATION LIVERY LICENSE**  
**M.G.L. Ch. 159A, SECTION 1**  
**M.G.L. Ch. 270 SECTION 22**  
**NEW BEDFORD, MA**

10-18-18  
Date

To the City Clerk:

The undersigned hereby applies for a Livery License under the provisions of the M.G.L. Ch. 159A, Section 1, and M.G.L. Ch. 270, Section 22 (Smoke Free Workplace Law), and furnishes the following statement of facts:

1. Name Ali Bochari, Sumaira Bochari 2. Residence 44 Liberty St, 1st Floor, New Bedford, MA 02740  
 3. a) Age 44, 33 b) Date of Birth 05-20-74 c) Place of Birth Ali (Lahore, Pakistan), Sumaira (Gujrat, Pakistan)  
 4. a) Height 5 ft 6 in. b) Weight 150 lbs. c) Complexion Brown, Brown  
 d) Color of Eyes Black, Black Color of Hair Black, Black  
 5. a) MA Driver's license number S76830258(A) b) Expiration Date 05/20/19 (A)  
SS39388710 (S) 04/03/2023 (S)  
 c) ABSB I am the owner of a motor vehicle licensed for transportation of passengers through streets of New Bedford.  
 d) I am not the owner of a licensed motor vehicle, but I am to be employed by \_\_\_\_\_  
 Registration # \_\_\_\_\_ Make/Model \_\_\_\_\_ Year \_\_\_\_\_ Color see attached

6. a) Have you ever been convicted of larceny, illegal gaming, illegal keeping, transporting or sale of intoxicating liquor, drugs or controlled substances, immoral conduct, driving under the influence of intoxicating liquor or drugs, leaving the scene of an accident after causing injury to a person or property, driving to endanger life or property or the violation of the terms of any city or state license held by you? YES \_\_\_\_\_ NO
- b) Have you ever been convicted of a felony? YES \_\_\_\_\_ NO
- c) Is there a current/open case pending against you? YES \_\_\_\_\_ NO
- d) Is there currently an open Protective/Restraining Order against you? YES \_\_\_\_\_ NO

IF ANSWER TO ANY OF ABOVE IS YES, PLEASE GIVE FULL AND COMPLETE EXPLANATION INCLUDING DATE, CHARGE, DISPOSITION AND COURT:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

7. a) Have you ever had a previous livery license suspended or revoked? YES \_\_\_\_\_ NO
- b) If yes, please provide circumstances \_\_\_\_\_
- c) Are you now, or have you ever been, licensed as a livery operator/driver from a different municipality? YES \_\_\_\_\_ NO
- d) If so, where and when? \_\_\_\_\_
8. a) Have you ever been cited for violating the Smoke Free Workplace Law prohibiting smoking in public transportation vehicles 24 hours a day, 7 days a week? YES \_\_\_\_\_ NO
- b) If yes, please provide circumstances \_\_\_\_\_

**WILLFUL FAILURE TO PROVIDE TRUE, ACCURATE AND COMPLETE INFORMATION SHALL BE GROUNDS FOR DENIAL OF APPLICATION. SIGNED UNDER THE PENALTIES OF PERJURY.**

BUS. NAME Magic Wheels Transportation LLC ADDRESS 44 Liberty St 1st Floor New Bedford MA 02740  
 SIGNATURE [Signature] TEL. # 508-933-6992, 508-296-4398  
 RENEWAL  C.O.R.I. \_\_\_\_\_ D.O.R. TAX \_\_\_\_\_ SMOKE FREE INFO \_\_\_\_\_

ANNUAL FEE: \$25.00

REGISTRATION FEE PER VEHICLE: \$10.00

NUMBER OF VEHICLES 3