

CITY OF NEW BEDFORD

Massachusetts
Date: | April 8, 2001

To the City Council City of New Bedford:

The undersigned respectfully asks that he or she be granted a waiver of the residency requirement in accordance with 15-38 of the City Code to obtain a Secondhand Dealers License for:

COMPANY NAME: EWIPTHE COMP OF	New Bed Four
Address: 1304 Arushnet Arl, Stear Bed	
City/State: New Bedford, Massachusetts	Zip Code: 02946
Applicant Signature:	
Michael Goldstein	
(Name- Please Print)	(Address - Please Print)
Bo57W MA (City/State – Please Print)	02118
(City/State – Please Print)	(Zip Code)
617-695-9408	
(Business - Telephone Number)	(Home - Telephone Number)