

DATE:

IN CITY COUNCIL, APRIL 12, 2022

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	ALBERT WILLIAMS III JEANNE WILLIAMS	
BUSINESS NAME	ELITE TRANSPORTATION, INC.	
ADDRESS	1 DEERFIELD LANE	
BUSINESS ADDRESS	1 DEERFIELD LANE	
CITY/STATE/ZIP CODE	FAIRHAVEN, MA 02719	
BUSINESS CITY/STATE/ZIP	FAIRHAVEN, MA 02719	

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.

Sincer Av

Dennis W. Farias.

City Clerk/Clerk of the City Council

DWF:smh

## CITY OF NEW BEDFORD

## **MASSACHUSETTS**

## APPLICATION FOR VEHICLE FOR HIRE LICENSE

M.G.L. Ch. 159A, SECTION 1, M.G.L. Ch. 270 SECTION 22 CITY CODE C.24 S.IV NEW BEDFORD, MA

Application For:CLASS A orLIVERY	Date: 3/24/	122
1. Business Name: <u>Elite Transportation Inc.</u> a) Business Phone: _	508-9900	0/7
b) Business Address: 1 Deerfield Lane Fairhaven MA		
2. Owner Name Albert M Williams Jeanne Williams		
2. Residence / Derrfield Lane Fair haven		
3. a) Age 72 b) Date of Birth 8/13/49 c) Height 5-10 d) Weight a.) Color of Eyes Brown 1) Complexion white g) Color of Hair	7/0	
e.) Color of Eyes Brown f) Complexion white g) Color of Hair	Bray	
4. a) Have you ever been convicted of larceny, illegal gaming. Illegal keeping, transporting or sale of intoxicating liquor, driving under the influence of intoxicating liquor or drugs, leaving the scene of an accident after causing injury to a person or the violation of the terms of any city or state license held by you?	or property, driving to e	ndanger life or property
b) Have you ever been convicted of a felony?		
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
5. a) Have you ever had a previous Class A or Livery license suspended or revoked?	VFS	NO 1/
b) If yes, please provide circumstances		
c) Are you now, or have you ever been, licensed as a Class A or Livery operator/driver from a different municipality? d) If so, where and when?	YES	NO
6. In addition to owning a Livery service company, will you also be serving as a Driver for the company?	YES <u>/</u>	
7. a) Have you ever been cited for violating the Smoke Free Workplace Law prohibiting smoking in public transportation ve		
24 hours a day, 7 days a week?	YES	NO <u>/</u>
b) If yes, please provide circumstances		<u> </u>
WILLFUL FAILURE TO PROVIDE TRUE, ACCURATE AND COMPLETE INFORMATION SHALL BE GROUND SHALL BE GR	NDS FOR DENIAL OF YPE OF LICENSE	F APPLICATION.
SIGNATURE alle Malillani 3 TEL.# 508-789-	3171	
LICENSE REGISTRATION(S) INSURANCE TAX COMPLIANCE SMOKE F	REEC.O.R	ı
NEW RENEWAL NUMBER OF VEHICLES NUMBER OF DRIVERS EMPLO	DYED 13-15	