



City of Lawrence

Office of the City Clerk

TRANSIENT VENDOR LICENSE INSTRUCTIONS and APPLICATION

1. _____ A current Hawkers and Peddler's License issued by the Commonwealth of Massachusetts must be provided with the application. Contact the Division of Standards for the Commonwealth of Massachusetts to apply for a current Hawkers and Peddler's License at [617] 727-3480; [See, G.L. c. 101, sec. 3];
2. _____ Obtain a current Business Certificate issued by the City of Lawrence if you do not already have one. Business Certificate application must be submitted to the Office of the City Clerk [See, G.L. c. 110, sec. 5];
3. _____ Contact the Lawrence Police Department, 90 Lowell Street, Lawrence, MA [978-794-5900 – Ext. 584] to complete a Public Safety Review which may include, without limitation, fingerprinting and Criminal History Review [CORI] of the applicant.
4. _____ Contact the Lawrence Fire Department, 65 Lowell Street, [978-620-3400] to complete a Fire Safety Inspection. A report from the Lawrence Fire Department must be received before the license may be issued – verification by the Fire Department that the vendor is not using flammables or electric service is required before issuing a license;
5. _____ **FOOD VENDORS:** Must file a completed "Food Vendor" authorization **BEFORE** the license will issue;
6. _____ A Tax Verification Form and release from applicable City Departments is required before a license may issue [attached][See; Ord. Secs. 3.08.110, 5.04.080, and G.L. c..40, Sec 57];
7. _____ Submit a completed Tax Assessment from the Tax Assessor's Office, 200 Common Street, Lawrence, MA. The Tax Assessor [Tax Assessment form is attached for use][See, City Ord. Sec. 5.52.050];
8. _____ Once all information is completed, bring the completed application to the Office of the City Clerk to obtain a date for hearing before the Lawrence City Council. [See, Ord. Sec. 5.52];
9. _____ Upon approval by the City Council, the license is available upon payment of the amount assessed by the Tax Assessor [See, City Ord. Sec. 5.52.050];

NOTE: Employees of Vendors (if any) MUST each file an application and be approved in order to operate as a Transient Vendor or as an employee of an licensed Transient Vendor.

ALL PERMANENT LICENSES EXPIRE ON DECEMBER 31ST

**TEMPORARY LICENSES EXPIRE BY ITS TERMS UNLESS
PERMANENT APPROVAL OF THE CITY COUNCIL IS OBTAINED**



City of Lawrence Office of the City Clerk

TRANSIENT VENDOR LICENSE APPLICATION & PETITION [City Ordinance Sec. 5.52-G.L. c. 101]

(PLEASE PRINT OR TYPE)

Date: _____

Applicant [name]: _____

Date of Birth: _____ Place of Birth: _____

Home Address: _____ City _____ State _____

Home Tel. Num: _____ Fax Number: _____ E-Mail _____

Business Name: _____

Bus. Address: _____ City _____ State _____

Bus. Tel. Num: _____ Fax Number: _____ E-Mail _____

Name of Business Owner: _____

Address of Bus. Owner: _____ City _____ State _____

Bus. Owner Tel: _____ Fax Number: _____ E-Mail _____

Are you incorporated [YES/NO]

IF YES, ATTACHED A COPY OF A CURRENT CERTIFICATE OF GOOD STANDING ISSUED BY THE SECRETARY OF THE COMMONWEALTH OF MASSACHUSETTS.

Please provide a description of the method of sales to be used [ie: door-to-door sales, street vending, etc]:

Description of goods or items for sale: _____

Average value of inventory: \$ _____

Hours & Days of Operation: _____

USE OF FLAMABLES OR ELECTRICAL SERVICE:

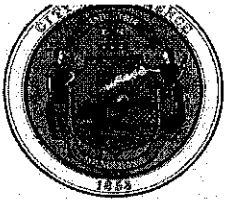
Will sales involve the use of Flammables or Electric Service of any kind: [YES/NO]

***IF YES FIRE DEPARTMENT INSPECTION AND APPROVAL IS REQUIRED.**

***IF NO: A FIRE DEPARTMENT INSPECTION IS REQUIRED TO VERIFY NO UTILITIES ARE IN USE.**

***MULTIPLE VEHICLES OR VENDING STATIONS - A SEPARATE APPLICATION FOR EACH VEHICLE OR VENDING STATION IS REQUIRED.**

***EMPLOYEES OF "TRANSIENT VENDORS": ARE NOT AUTHORIZED TO WORK AS "EMPLOYEES" OF "TRANSIENT VENDOR LICENSE" HOLDERS WITHOUT A CURRENT AND VALID "TRANSIENT VENDOR LICENSE" APPROVED AND ISSUED IN THEIR NAME.**



Commonwealth of Massachusetts
City of Lawrence

In conformity with the provisions of chapter 110, Section 5 of the General Laws and Amendments thereto notice is hereby given that the business of

_____ (NAME OF BUSINESS)

is located at [address] _____ in Lawrence Mass, by the following person (s), entity, partnership, or corporation. [(tel): _____] [e-mail address: _____];

BUSINESS OWNER'S FULL NAME (S):

BUSINESS OWNER 'S ADDRESS (ES):

SIGNATURE(S):

Subscribed and sworn to before me at _____ AM / PM on (DATE) _____ 20____

- NEW.....()
- AMENDED.....()
- WITHDRAWAL.....()
- RENEWAL.....()

CITY CLERK - ASSISTANT CITY CLERK
DESIGNATED CLERK - NOTARY PUBLIC

Received at the City Clerk's Office _____ 20____ At _____ AM / PM.

Zoning Approval _____ DATE _____ 20____
BUILDING INSPECTOR

THIS CERTIFICATE IS ISSUED IN ACCORDANCE WITH THE PROVISIONS OF CHAPTER 337 OF THE ACTS OF 1985 AND CHAPTER 110, SECTIONS 5 & 6 OF THE GENERAL LAWS.

CERTIFICATE EXPIRES _____ (FOUR YEARS FROM DATE FILED)

BOOK _____ PAGE _____



THE COMMONWEALTH OF MASSACHUSETTS
 EXECUTIVE OFFICE OF PUBLIC SAFETY AND SECURITY
 Department of Criminal Justice Information Services

200 Arlington Street, Suite 2200, Chelsea, MA 02150
 TEL: 617-860-4840 | TTY: 617-860-4808 | FAX: 617-860-8973
 MASS.GOV/CJIS



**CRIMINAL OFFENDER RECORD INFORMATION (CORI)
 PERSONAL
 REQUEST FORM**

Use this form only for requesting your own CORI. A bank check or money order for \$25.00 must be submitted with this form. Please note: this is a multi-page request form. Incomplete request forms will not be processed. Requests must be mailed, along with the accompanying payment or indigency waiver, to the address provided above, ATTN: CORI Unit.

Request Type Details

*Are you applying for an indigency waiver? Yes No

If you are applying for an indigency waiver, please go to www.mass.gov/courts/formsandguidelines/aff_indigency.pdf to download the waiver form. You must submit the waiver with the completed application.

If you require a certified copy of your CORI, please check this box.

Requestor Details

Please complete this section using your information. A red asterisk (*) denotes a required field.

*First Name

*Last Name

Middle Initial

Suffix

*Date of Birth

*Last 6 digits of Social Security number

I do not have a Social Security number

*Mailing Address

Street 1

Street 2
(Apt, Suite,
Bldg)

City/Town

State

Zip

Phone

Ext.

Email

Personal CORI Request Authorization

I hereby swear, under the penalties of perjury, that the information I have provided above is true to the best of my knowledge and belief.

Signature of individual named in criminal record

Date

Authentication of Signature By Notary Public or Correctional Facility

On this ____ day of _____, 20__, before me, the undersigned notary public, personally appeared _____ (name of document signer), proved to me through satisfactory evidence of identification, which were _____, to be the person whose name is signed on the preceding or attached document, and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose.

Notary Public

Correctional Facility Official (give rank and title)

My Commission Expires

Correctional Facility Address and Phone

**For additional forms or information, contact
the Department of Criminal Justice Information Services (DCJIS):**

CONTACT INFORMATION

Department of Criminal Justice Information Services (DCJIS):

200 Arlington Street

Suite 2200

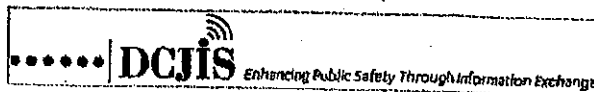
Chelsea, MA 02150

Main Phone: (617) 660-4600

Fax: (617) 660-4613

TTY: (617) 660-4606

Web Site Access: <http://www.mass.gov/eopss/agencies/dcjis/>





City of Lawrence
Office of the City Clerk

TRANSIENT VENDOR LICENSE/PUBLIC SAFETY REVIEW
[For Transient Vendor Application]

(PLEASE PRINT OR TYPE)

Applicant Name:
(please print or type)

POLICE DEPARTMENT USE ONLY

Date Public Safety review completed:

(place a check mark for all that apply)

- A Public Safety Review has been completed on the applicant for this license [check all reviews completed];
CORI REVIEW OF APPLICANT COMPLETED;
FINGERPRINTS FOR APPLICANT COMPLETED;
OTHER:

Public Safety Review fee has been paid: Amount paid:

THIS APPLICANT IS APPROVED THIS APPLICANT IS DENIED

COMMENTS:

(Authorized by the Lawrence Police Department)(signature)

(print name and provide badge #)



**City of Lawrence
Office of the City Clerk**

**TRANSIENT VENDOR LICENSE
FIRE DEPARTMENT SAFETY REVIEW
[Transient Vendor ONLY]
[City Ordinance Sec. 5.52]**

Applicant Name: _____
(please print or type)

FIRE DEPARTMENT USE ONLY

DATE OF INSPECTION: _____

(please check all that apply)

- FLAMMABLES AND ELECTRICAL SERVICE NOT IN USE-VERIFIED BY INSPECTION;
- APPROVED FLAMMABLE INSPECTION;
- APPROVED ELECTRICAL INSPECTION;
- SAFETY INSPECTION FAILED [PLEASE STATE REASON(S) BELOW];

COMMENTS: _____

AUTHORIZATION:

Authorized Lawrence Fire Department Official

date



**City of Lawrence
Office of the City Clerk**

**TRANSIENT VENDOR LICENSE
FOOD PERMITS AUTHORIZATION
[Transient Vendor ONLY]**

Applicant Name: _____
(please print or type)

INSPECTIONAL SERVICES USE ONLY

DATE OF REVIEW: _____

(please check all that apply)

- All necessary Food Permits and inspections have been completed AND approved;
- Additional Inspections required;

COMMENTS: _____

AUTHORIZATION:

Authorized Inspectional Services Official

date



City of Lawrence
Office of the City Clerk
TRANSIENT VENDOR LICENSE
TAX ASSESSOR APPROVAL FORM
[Transient Vendor ONLY]
[City Ordinance Sec. 5.52]

Applicant Name: _____
(please print or type)

TAX ASSESSOR USE ONLY

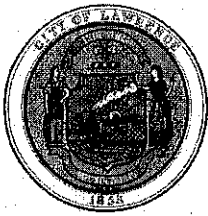
The City Tax Assessor has reviewed the average value of the goods/inventory offered for sale by the petitioner as stated by the petition and sets the tax assessed to be in the amount of \$ _____. [not less than \$50.00][See; Ord. Sec. 5.52.050].

***FEE TO BE COLLECTED BY CITY CLERK UPON ISSUANCE OF LICENSE.**

 Tax Assessor/Staff

 date

COMMENTS: _____



**CITY OF LAWRENCE
LICENSE APPLICATION
[TAX ASSESSMENT AND VERIFICATION FORM]
CITY ORDINANCE: 3.08.110 AND 5.04.080
& G.L. C. 40, SEC. 57 COMPLIANCE LIST**

**ALL PAYMENTS REQUIRED BEFORE ISSUANCE OF PERMITS OR LICENSES
(Please print)**

Name of Applicant

Applicant's current Address

Applicant's Telephone No.

City State, Zip

Property Owner's Name

Property Owner's Address

Owner's Telephone No.

City State, Zip

DO YOU OWN OTHER PROPERTIES IN THE CITY OF LAWRENCE? YES NO
Please list below

List of Applicant's Other Properties *(Must attach Assessor's print out of all applicant's properties)*

Address Map and Lot

Address Map and Lot

Address Map and Lot

More space needed - See attached list. Attachment must be signed and dated and stamped by City departments

Applicant's Signature

I declare under the pains and penalties of Perjury that the statements made on this application are true and correct. I also certify that all information herein is true and complete. I understand that any misleading or incorrect statements render this application void and can be grounds for revocation of permit or license. I have not knowingly and willfully made false statements or included false documents in support of this application or permit

Tax Collector's Stamp

(Taxes
Demolition
Liens)

Tax Collector's Staff Name

Signature Date

Water Department's Stamp

(Water &
Sewer)

Water Department's Staff Name

Signature Date

Inspectional Services' Stamp

(Trash
Tickets,
etc...)

Inspectional Services Staff Name

Signature Date

This sign off list must be attached to all permits or license applications.

All sign off must include department stamps, signatures and dates.

PHOTOCOPIES WILL NOT BE ACCEPTED.

Lawrence City Ordinance 3.08.110- Payments due prior to issuance of licenses or permits.

A. The city shall deny any application for and shall revoke or suspend any license or permit, including renewals and transfers, issued by any board, officer or department for any person, corporation or business enterprise who has neglected or refused to pay any local taxes, fees, assessments, betterments or any other municipal charges, or with respect to any activity, event or other matter which is the subject of such license or permit and which activity, event or matter is carried out or exercised on or about real estate whose owner has neglected or refused to pay any local taxes, fees, assessments, betterments or any other municipal charges.

B. This section shall be administered in accordance with General laws, chapter 40, section 57, as amended from time to time.

(Ord. dated 8/2/95: prior code § 25-11)

Lawrence City Ordinance 5.04.080 - Denial, revocation, or suspension of licenses and permits for failure to pay municipal taxes or charges.

A. The tax collector shall annually furnish to each department, board, commission or division, hereinafter referred to as the licensing authority, that issues licenses or permits including renewals and transfers, a list of any person, corporation, or business enterprise, hereinafter referred to as the party, that has neglected or refused to pay any local taxes, fees, assessments, betterments or other municipal charges for not less than a 12-month period, and that such party has not filed in good faith a pending application for an abatement of such tax of a pending petition before the appellate tax board.

B. The licensing authority may deny, revoke or suspend any license or permit, including renewals and transfers of any party whose name appears on said list furnished to the licensing authority from the tax collector or with respect to any activity, event or other matter which is the subject of such license or permit and which activity, event or matter is carried out or exercised or is to be carried out or exercised on or about real estate owned by any party whose name appears on said list furnished to the licensing authority from the tax collector, as required by applicable provisions of law, and the party is given a hearing, to be held not earlier than 14 days after said notice. Said list shall be prima facie evidence for denial, revocation or suspension of said license or permit to any party. The tax collector shall have the right to intervene in any hearing conducted with respect to such license denial, revocation or suspension. Any findings made by the licensing authority with respect to such license denial, revocation or suspension shall be made only for the purposes of such proceeding and shall not be relevant to or introduced in any other proceeding at law, except for any appeal from such license denial, revocation or suspension. Any license or permit denied, suspended or revoked under this section shall not be reissued or renewed until the license authority receives a certificate issued by the tax collector that the party is in good standing with respect to any and all local taxes, fees, assessments, betterments or other municipal charges, payable to the municipality as the date of issuance of said certificate. *Ord. dated 5/3/05)*

Massachusetts General Laws (MGL) Ch 40, Section 57. - For full language of this law visit <http://www.malegislature.gov/Laws/Search>.



City of Lawrence
Office of the City Clerk
TRANSIENT VENDOR LICENSE - CITY CLERK REVIEW

Applicant Name: _____

----- **CITY CLERK'S OFFICE USE ONLY** -----

CHECK EACH ITEM AS COMPLETED:

1. _____ **Current Business Certificate [required] [G.L. c. 110, sec. 5];**
2. _____ **Current State Hawkers and Peddlers License [required][copy only][See, G.L. c. 101, sec. 3];**
3. _____ **Public Safety review completed – LPD authorized;**
4. _____ **FOOD VENDORS – Food Permit Authorization completed and verified by Inspectional Services;**
5. _____ **Tax Assessor Review of Inventory in an amount of no less than \$50.00 [due upon issuance of license];**
6. _____ **Tax Assessment Verification form has been completed;**
7. _____ **FOOD VENDOR – Food Permit Application completed as verified by Inspectional Services;**
8. _____ **SCHEDULE THE APPLICANT FOR HEARING BEFORE CITY COUNCIL [Ord. Sec. 5.52 and G.L. c. 101, sec. 3] - [doc. # _____];**

PRIOR TO ISSUING THE LICENSE

9. _____ **Tax Assessment due [City Ord. Sec. 5.52.050][NO LESS THAN \$50.00];**
10. _____ **Inform Applicant that each license issued [expires December 31st regardless of date issued [See G.L. c. 101. sec. 5];**
11. _____ **FAX/E-MAIL A COPY OF THE LAWRENCE POLICE DEPARTMENT;**

Office of the City Clerk – Staff Initial

date