



# City of Framingham

License Administration  
150 Concord Street – Memorial Building – Room 213  
Framingham, MA 01702-8325  
Telephone: 508-532-5402 FAX 508-532-5769  
[licensing@framinghamma.gov](mailto:licensing@framinghamma.gov)

## LIVERY LICENSE APPLICATION

Application Fee \$15.00 – Licensing Fee: \$50.00

\_\_\_\_\_ Date

Company: \_\_\_\_\_

Street Address: \_\_\_\_\_

City/Town: \_\_\_\_\_

Owner: \_\_\_\_\_

Federal ID #: \_\_\_\_\_ *if none*, Social Security# \_\_\_\_\_

Telephone #: \_\_\_\_\_ FAX # \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Present # of Vehicles: \_\_\_\_\_

Vehicle Plate # \_\_\_\_\_ Massachusetts Driver License # \_\_\_\_\_  
(Submit copy Driver's License)

Vehicle must display livery plates. Vehicle cannot resemble a taxicab or have similar markings on it. Fares cannot be determined on a per mile basis. No solicitation on the public way allowed. Business address must comply with local zoning. All drivers must be licensed by the Framingham Police department

I have read and understand the Policy for the Regulation of Taxicabs/Livery Vehicles and the Operation thereof in the City of Framingham.

I certify under the penalties of perjury that all taxes, fees and fines owed to the Commonwealth of Massachusetts and to the City of Framingham have been paid.

Signature of Applicant: \_\_\_\_\_

*For city use only:*

Police \_\_\_\_\_ Date

Treasurer \_\_\_\_\_ Date

Inspectional Services \_\_\_\_\_ Date

The following information must be completed by each driver.

Have you ever been convicted of any crime, felony or misdemeanor in the Commonwealth of Massachusetts, or any other state, or violation of any municipal ordinance or by-law?

Yes \_\_\_\_ No \_\_\_\_

If yes, please state offense: \_\_\_\_\_

\_\_\_\_\_

What was the disposition? \_\_\_\_\_

\_\_\_\_\_

I, the undersigned, understand that any false statements or misrepresentation is just cause for denial of license or permit. I grant authorization for the Framingham Police Department to conduct a criminal records check (CORI).

Signature : \_\_\_\_\_

Print Name: \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Drivers must apply to the Framingham Police Department for a Hackney License.

Attach copy of driver's license.

Please submit the following:

- Business Plan - Letter requesting approval from the City Council
- Completed & Signed Application
- \$15.00 Application Fee made payable to the City of Framingham (Additional driver(s) must complete Additional Driver Application(s))
- Copy of Vehicle Registration.
- Copy of Certificate of Insurance - Vehicle
- Copy of Driver's License
- Copy of RMV Driving Record
- Copy of Birth Certificate
- Business Certificate (if sole proprietorship or if operating business under name other than company name) and/or Articles of Incorporation
- Signed Workers' Comp. Affidavit
- Workers' Compensation Policy Information Page/Certificate of Insurance naming City of Framingham Licensing Coordinator as Certificate Holder

**Applicant's attendance at a hearing is required.**