

MASSACHUSETTS DEPARTMENT OF REVENUE
INSTRUCTIONS FOR ANNUAL LICENSE INFORMATION FORM (ALIF)

1. Who is subject to the reporting requirements of the law?

Section 47 A, Chapter 62C of Massachusetts General Laws, requires agencies and subdivisions of the Commonwealth to furnish to the Commissioner of Revenue an annual report of all licenses to conduct a profession, trade or business issued or renewed by the agency or subdivision during the preceding calendar year.

2. What is a license?

A license is any license or other authority to conduct a profession, trade or business.

3. Filing Requirements

a) How to File

Before the end of each calendar year, agencies and subdivisions of the Commonwealth will receive an Annual License Information Form (ALIF). Agencies and subdivisions must complete and file the Form ALIF. The form is now available at www.mass.gov/dor, under Cities and Towns. If you can not list all of your licensees in the Form ALIF, you may report additional licensees on additional sheets, noting page numbers (e.g., page 1 of 3, page 2 of 3 etc.) Also, you may use your own sheets in place of Form ALIF as long as each sheet contains the name of the agency or subdivision and all data is listed in the same format as Form ALIF. If the web site version of the Form ALIF is used, it must be printed, signed and sent through US Mail.

b) When to File

The annual report must be submitted by February 1st of each year for the preceding calendar year.

4. Information TO Be Contained In An Annual Report

a) The licensee's name (last name first, first name and middle initial) and address (street, city or town and zip code) must be entered in the first column. i.e. Brown, Arthur J., 100 Cambridge Street, Boston, MA 02204.

If the licensee is a business, list individual owner, name of partnership or corporation and business name if different. i.e. Acme Products, Inc. d/b/a/Acme Business Center.

b) The licensee's social security or federal identification number must be entered in the second column.
c) The licensee number and type of license issued or renewed to the licensee must be entered in the third column.

**MAGNETIC TAPE AND/OR DISKETTE SPECIFICATIONS
for ALIF**

MAGNETIC TAPE SPECIFICATIONS FOR REPORTING REAP INFORMATION

The Commissioner of Revenue has authorized the Department of Revenue to accept REAP reporting information on magnetic tapes.

Record specifications are shown below.

Specific instructions:

1. Each reel of tape must be externally identified with a stick-on-label giving agency or subdivision, name, year, tape density and parity, blocking factor and reel sequence number. If an internal label is included, it must be externally noted on the tape. Please include a tape dump of the first (100) records with each tape sent.
2. A transmittal letter giving the number of reels and indicating if labeled or unlabeled must be mailed to Massachusetts Department of Revenue, Compliance Division, REAP Unit, PO Box 7021, Boston, MA 02204. A copy of the transmittal letter must accompany the shipment of magnetic tapes. Also, include an address label for returning the magnetic tape to you. The tape container(s) and mailing container should be durable enough to protect the shipment in transit and be suitable for use in returning the magnetic tape to you. All possible care will be given to safeguard the reels of tape while they are in our custody, but the Department of Revenue cannot assume responsibility for loss or damage in transit.
3. All record entries must be left justified within each field.

NO DEVIATIONS FROM THESE SPECIFICATIONS WILL BE ALLOWED

TAPE MUST BE	9 Track 1600BPI	EBCDIC
EITHER	Unlabeled or O.S.	Standard Label
RECORD LENGTH	200 Characters	
BLOCKED	10 Records	

RECORD NAME: AGENCY RECORD FOR LICENSES

<u>LOCATION</u>	<u>FIELD</u>	<u>LENGTH</u>	<u>REMARKS</u>
1-2	Record Identifier	2	Constant "LA"
3-32	Agency Name	30	Alpha/Numeric
33-36	Year Reporting	4	Alpha/Numeric
37-46	Licensee Record Count	10	Numeric
47-200	Blank	154	

RECORD NAME: LICENSEE RECORD

<u>LOCATION</u>	<u>FIELD</u>	<u>LENGTH</u>	<u>REMARKS</u>
1-2	Record Identifier	2	Constant "LB"
3-32	Individual Licensee Last Name	30	Corporate/Business Name
33-62	Individual Licensee First Name	30	can use 60 Positions starting in 3
63-86	Street	24	Alpha/Numeric
87-102	City	16	Alpha/Numeric
103-104	State	2	Alpha/Numeric
105-113	Zip Code	9	Alpha/Numeric
114-122	Social Security/Federal I.D.	9	Alpha/Numeric
123-134	License Number	12	Alpha/Numeric
135-146	Type License Code	12	Alpha/Numeric
147-176	Agency Name	30	Alpha/Numeric
177-300	Blank	24	

**DISKETTE SPECIFICATIONS FOR REPORTING REAP INFORMATION
for ALIF**

The Commissioner of Revenue has authorized the Department of Revenue to accept REAP reporting information on magnetic media.

Record specifications are shown below.

Specific instructions:

1. Each diskette must be externally identified with a stick-on-label giving agency or subdivision, name, year, diskette density and sequence number (e.g., Vol. 2 of 3). Please include a printout of the first (10) records with each diskette sent.
2. Each volume should contain ASCII file as per specifications below. The file should be named 'REAPx.DAT', where 'x' denotes the volume number (e.g., the file name for the ASCII file on volume 2 should read REAP2.DAT).
3. A transmittal letter giving the number of diskettes must be mailed to Massachusetts Department of Revenue, Compliance Division, REAP Unit, PO Box 7021, Boston, MA 02204. A copy of the transmittal letter must accompany the shipment of diskettes. Also, include an address label for returning the diskettes to you. The mailing container should be durable enough to protect the shipment in transit and be suitable for use in returning the diskette(s) to you. All possible care will be given to safeguard the diskettes while they are in our custody, but the Department of Revenue cannot assume responsibility for loss or damage in transit.
4. All record entries must be left justified within each field.

NO DEVIATIONS FROM THESE SPECIFICATIONS WILL BE ALLOWED

DISKETTE MUST BE	3 1/2 INCH OR 5 1/4 INCH, DOS Formatted
DENSITY	Double or High
RECORD LENGTH	200 Characters
FILE TYPE	ASCII

<u>LOCATION</u>	RECORD NAME: AGENCY RECORD FOR LICENSES		
	<u>FIELD</u>	<u>LENGTH</u>	<u>REMARKS</u>
1-2	Record Identifier	2	Constant "LA"
3-32	Agency Name	30	Alpha/Numeric
33-36	Year Reporting	4	Alpha/Numeric
37-46	Licensee Record Count	10	Numeric
47-200	Blank	154	

<u>LOCATION</u>	RECORD NAME: LICENSEE RECORD		
	<u>FIELD</u>	<u>LENGTH</u>	<u>REMARKS</u>
1-2	Record Identifier	2	Constant "LB"
3-32	Individual Licensee Last Name	30	Corporate/Business Name
33-62	Individual Licensee First Name	30	can use 60 Positions starting in 3
63-86	Street	24	Alpha/Numeric
87-102	City	16	Alpha/Numeric
103-104	State	2	Alpha/Numeric
105-113	Zip Code	9	Alpha/Numeric
114-122	Social Security/Federal I.D.	9	Alpha/Numeric
123-134	License Number	12	Alpha/Numeric
135-148	Type License Code	12	Alpha/Numeric
147-176	Agency Name	30	Alpha/Numeric
177-200	Blank	24	