



Commonwealth of Massachusetts
 Division of Standards
 One Ashburton Place, Rm 1115
 Boston, MA 02108
 Telephone : 617-727-3480
 Fax: 617-727-5705

- New Application
 Renewal Application

Office Use Only
Issue Date: _____
Issued By: _____

Renewals Only Please Provide Current **Auctioneer Number : AU**

Application for Auctioneer's License

Mail signed application to: Division of Standards, One Ashburton Place, Room 1115, Boston, Ma. 02108

In addition to the license fee of One Hundred Dollars (\$100.00), a surety bond for Ten Thousand dollars (\$10,000.00) must accompany this application in accordance with the requirements of Section 3 of Chapter 100 of the General Laws.

To the Deputy Director of Standards

Name of Applicant

Legal Residence

City State Zip Code

Mailing Address

Phone Number Email Address Date of Birth : MM/DD/YYYY

Cell Phone FED ID Number SS# 000-00-0000

If applicant is a firm, partnership, association or corporation the following must be completed:

Name of Business Entity

Officers:

Name	<input style="width: 95%; height: 25px;" type="text"/>	Address	<input style="width: 95%; height: 25px;" type="text"/>
Name	<input style="width: 95%; height: 25px;" type="text"/>	Address	<input style="width: 95%; height: 25px;" type="text"/>
Name	<input style="width: 95%; height: 25px;" type="text"/>	Address	<input style="width: 95%; height: 25px;" type="text"/>
Name	<input style="width: 95%; height: 25px;" type="text"/>	Address	<input style="width: 95%; height: 25px;" type="text"/>

The names and residences of other persons having a direct or indirect financial interest in the business to be conducted by me under this license are as follows:

Name	<input style="width: 95%; height: 25px;" type="text"/>	Address	<input style="width: 95%; height: 25px;" type="text"/>
Name	<input style="width: 95%; height: 25px;" type="text"/>	Address	<input style="width: 95%; height: 25px;" type="text"/>

Have you ever been charged with, indicted for or convicted of any fraudulent or illegal act in any transactions of any kind? If yes, give details below.

Yes No

Comment

Have you ever been or are you now a party in any proceedings pending in any court involving fraud, deceit or misrepresentation? If yes, give details below.

Yes No

Comment

Letters of Recommendation: NEW Only (not needed for RENEWALS)

We the undersigned, recommend the applicant names herein, _____, for licensure as an Auctioneer in the Commonwealth of Massachusetts.

Name	<input type="text"/>	Address	<input type="text"/>	City	<input type="text"/>	Designation	<input type="text"/>
Name	<input type="text"/>	Address	<input type="text"/>	City	<input type="text"/>	Designation	<input type="text"/>

* Letters of Recommendation must be signed by a licensed auctioneer, and a elected public official, or a member of the Massachusetts Bar.

Pursuant to Massachusetts General Laws Chapter 62C, Section 49A, I certify under the penalties of perjury that I have filed all state tax returns and paid all state taxes required under law. Further, all the statements contained in this application, to the best of my knowledge and belief, are true.

Date

Signature of Applicant

If the applicant is a firm, partnership, association or corporation:

Date

Signature of Applicant

Mail signed application to: Division of Standards, One Ashburton Place, Room 1115, Boston, Ma. 02108

Please Print and Sign Application and mail to the address above