



Office of Outdoor Advertising
Ten Park Plaza, Room 6133
Boston, MA 02116-3969

Telephone: (857) 368-9700
<http://www.mass.gov/massdot/ooa>

For Internal Office Use
Application # _____

**APPLICATION FOR LICENSE
TO CONDUCT BUSINESS OF OUTDOOR ADVERTISING**

Application is hereby made for a license to engage in the business of Outdoor Advertising in accordance with the rules and regulations of 700 C.M.R. 3.00 et. seq. The applicant also agrees to abide by all applicable state and federal laws.

PLEASE PRINT OR TYPE:

1) Applicant Name: _____

Principal Business Address: (Street address must be included) _____

City/Town _____ State _____ Zip _____

Billing Address: _____
(if different)

City/Town _____ State _____ Zip _____

Contact: (Name & Title) _____

Telephone #: _____ Fax #: _____

Email: _____

The undersigned warrants and represents that he/she is duly authorized to sign this document.

Authorized Signature: _____ Date: _____

2) Applicant's business is conducted by:

_____ Individual _____ Partnership _____ Corporation or Limited Liability Company (LLC)

_____ Other (describe) _____

3) If a corporation, in what state is the business incorporated? _____

4) Name, principal business address and state of incorporation of any parent, subsidiary, board or other person affiliated with the applicant which engages in the business of outdoor advertising in any state: *(If none, indicate "N/A" do not leave blank)*

5) Describe any federal, state or local governmental enforcement proceedings commenced against the applicant or any other person identified in the response to item 2 of the application within six (6) years immediately preceding the application, together with details of the current status or resolution of any such proceedings (attach a separate sheet if necessary): *(If none, indicate "N/A" do not leave blank)*

6) **TAX CERTIFICATION:**

ALL APPLICANTS: A completed W-9 *Request for Taxpayer Identification Number and Certification* form must accompany this application. The most current version of the W-9 form may be found on the Internal Revenue Service website: <http://www.irs.gov>

CORPORATIONS AND LIMITED LIABILITY COMPANIES ONLY: A Certificate of Good Standing issued by the Massachusetts Department of Revenue must accompany this application. Detailed instructions for the application for a Certificate of Good Standing can be found on the MA Department of Revenue website: <http://www.mass.gov/dor> Or contact by telephone: (617) 887-6367

ALL APPLICANTS: The applicant certifies under the penalties of perjury that the applicant has paid all local and all state taxes due and payable as required by M.G.L. Chapter 62C, Sec. 49A.

Signature of Individual or Corporate Officer

Individual or Business Name
(Please Print)

Date

Social Security # (Individual) *or*
Federal ID # (Business)

7) **FEES:**

A new license fee in the amount of One Thousand Dollars (\$ 1,000.00) must accompany this application as defined in 700 C.M.R. 3.03(1)(a)

Check or money order enclosed in the sum of:

\$ _____

**Make payable to: MassDOT*

For Internal Office Use

Applicant _____ Application #: _____

DIRECTOR'S REPORT

_____ LICENSE APPROVED _____ LICENSE DENIED

License #:

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If denied, please state reason(s): _____

Date

Director