

## **CAMBRIDGE LICENSE COMMISSION**

831 Massachusetts Avenue, First Floor, Cambridge, Massachusetts 02139

## **WAIVER OF DISCIPLINARY HEARING**

I, (print your name)		, as a duly authorized representative	
of (print name of busines	s/licensee)		located at
(print address of business	3)		with
license number	, accept the facts as stated on License Commission/Police Incident		
Report #	("Report") and waive any hearing set by the Cambridge License		
Commission with regard t	to the violation(s) noted therei	n.	
I understand that by signi	ng this document I am: (1) ad	mitting that the violat	ion(s) occurred as stated in
the Report and Notice of	Disciplinary Hearing; (2) provi	ding the Commissior	the right to take action and, it
applicable, impose a sand	ction based solely on the cont	ents of the Report an	d Notice; (3) waiving any
rights to appeal the fact	s; and (4) not waiving rights	to appeal the sanc	tions imposed by the
Cambridge License Com	mission as to the admitted vio	lation(s).	
Signed under the pains a	nd penalties of perjury this	day of	·
Sign:		<u> </u>	
Print Name:		<u></u>	
Title as it relates to Busin	ess:		
		<u> </u>	