



CAMBRIDGE LICENSE COMMISSION

831 Massachusetts Avenue, Cambridge, MA 02139
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License@cambridgema.gov

FEE: \$100.00

ANNUAL AUCTIONEER LICENSE APPLICATION

Corporate Name: _____ Doing Business As (d.b.a): _____

Owner's Name: _____

Business Address: _____

Mailing Address: _____

Phone Number: _____ Email Address: _____

Auctioneer's Name: _____ MA State Auctioneer License No.: _____

Auctioneer's Address: _____

The hours which the auction is to be conducted: _____

General description of the goods to be auctioned: _____

Please provide:

- a 8.5X11 inch floor plan
- a Certificate of Good Standing or a DBA certificate
- a Commonwealth of Massachusetts Auctioneer's license
- Licensed Premises Approval Form
- Proof of Worker's Compensation if you have employees
- Signed lease or letter of intent from the landlord

The undersigned, being the owner/holder/manager of the license, hereby certifies under the pains and penalties of perjury, that: the information above is accurate; there have been no changes to the business or interest holders since last year; and that the above-listed licensee is currently conducting the licensed business in accordance with the laws of the Commonwealth of Massachusetts and the City of Cambridge. It is further attested that the licensee has filed all state tax returns, paid all state taxes required by law, and has submitted simultaneously herewith a Workers' Compensation Affidavit with any necessary supporting documentation.

Print Name: _____ Relation to Business: _____

Sign: _____ Date: _____

Telephone/Cellphone: _____ Email: _____

For Official Use Only

Renewal Approved: _____ Renewal Denied: _____

Conditions/Notes: _____