

**COMMONWEALTH OF MASSACHUSETTS  
TOWN OF GREAT BARRINGTON  
APPLICATION FOR AUCTIONEERS LICENSE**

FEE: \$100.00

DATE: \_\_\_\_\_

LICENSE NUMBER: \_\_\_\_\_

TO THE LICENSING AUTHORITY:

The undersigned hereby applies for an Auctioneers License in accordance with the provisions relating thereto:

APPLICANTS NAME: \_\_\_\_\_

APPLICANTS ADDRESS: \_\_\_\_\_

HOME TELEPHONE: \_\_\_\_\_

NAME OF BUSINESS: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

BUSINESS TELEPHONE: \_\_\_\_\_

BUSINESS EMAIL: \_\_\_\_\_

MA AUCTIONEERS LICENSE # \_\_\_\_\_

Pursuant to M.G.L. Ch. 62C, Sec. 49A. I certify under the penalties of perjury that I, to my best knowledge and belief, have filed all state tax returns and paid all state taxes required under law.

\_\_\_\_\_  
Signature of Individual or Corporate  
Name

by: \_\_\_\_\_  
Corporate Officer (if applicable)

FID# \_\_\_\_\_