



**Town of Middleton**  
Memorial Hall  
48 South Main Street  
Middleton, Massachusetts  
01949-2253  
978-774-3589  
*www.middletonma.gov*

To: Class Two (Used Car Dealer) License Applicants  
From: Middleton Board of Selectmen, (as Class Two Licensing Authority)  
Subject: Procedure and Check List for Class Two Used Car Dealer Applicants  
Date: September 2019

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As of March 19, 2009, used car dealers in Middleton are not permitted by the Town's Zoning Bylaws, and the Board of Selectmen, as the Licensing Authority, is not authorized to consider or grant licenses for any **new** locations.

For those who are seeking to obtain licenses through a lease or purchase of an existing land parcel where a non-conforming used car dealer's license is currently in place, (and where the right to hold a license has not been discontinued), the following are the minimum requirements for the application process **in the strict order** show below.

1. Obtain copies of any written decisions from the Middleton Board of Appeals demonstrating approval of the Site Plan and any Zoning Bylaw conditions made a permanent part of the use conditions of the parcel. Applicants may submit an application to the licensing Authority, (Board of Selectmen) for a Class Two License with copies of approved Site Plans and written decision attached to the application.
2. All questions on the Class Two License Application must be completely answered and the Licensing Board requires every applicant to submit to a CORI, (Criminal History Report) and background investigation, which will be conducted by the Middleton Police Department.
3. The Selectmen's Office will schedule a public hearing to review the application to determine whether the applicant is a "proper person" and that "he has available a place of business suitable for the purpose" in accordance with the provisions of Massachusetts General Laws, Chapter 140, Section 58 and 59 et al. No hearings will be scheduled until the application and submission requirements are deemed complete.
4. Should the Licensing Board vote to issue a Class Two License, applicants are required to provide a \$25,000 Bond prior to release of the license.



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**Application for Class II Used Car Dealer’s License**

**SECTION 1:**

Name to Appear on the License: \_\_\_\_\_

Business Name (d/b/a, if different): \_\_\_\_\_

Manager of Record: \_\_\_\_\_

Address of Premises: \_\_\_\_\_

Phone Number of Premises: \_\_\_\_\_

**SECTION 2:** Person (attorney if applicable) who can be contacted concerning this application):

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**SECTION 3:** Give a full description of the premises to be licensed, including location of all entrances and exits:  
(Please attach a copy of the Site Plan Approval and written decision of the Board of Appeals)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SECTION 4:** Lot Capacity and Vehicle Display

Total Lot Capacity \_\_\_\_\_ (in vehicles)

How many vehicles do you wish to display for sale? \_\_\_\_\_

**SECTION 5:**

Applicant is an:

- |                                      |   |                                     |
|--------------------------------------|---|-------------------------------------|
| <input type="checkbox"/> Association | <input type="checkbox"/> Corporation            | <input type="checkbox"/> Individual |
| <input type="checkbox"/> Partnership | <input type="checkbox"/> Non-Profit Corporation | <input type="checkbox"/> LLC        |



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**SECTION 6:**

If applicant is an individual or partnership – List for individual, each partner or LLC:

Full Name: Home Address: DOB: SSN/FID:

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Is individual or all partners United States citizens? ( ) Yes ( ) No

If no, specify citizenship: \_\_\_\_\_

Is individual or all partners involved at least twenty-one years old? ( ) Yes ( ) No

**SECTION 7:**

If applicant is a corporation, complete the following:

State of Incorporation: \_\_\_\_\_ Date of Incorporation \_\_\_\_\_

Fiscal Year Ends: \_\_\_\_\_ Date Qualified to do business in MA: \_\_\_\_\_

**SECTION 8:**

Will there be any construction, remodeling, redecorating, or building on the premises for this license?  
( ) Yes ( ) No If yes, complete the following:

Give an exact description of the construction, remodeling, redecorating or building on the premises:

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What are the estimated costs: \_\_\_\_\_

What is the construction schedule: \_\_\_\_\_

State all sources of construction financing: \_\_\_\_\_

\_\_\_\_\_

**SECTION 9:**

Do you own the premises? ( ) Yes ( ) No If yes, please respond to the question below.

( ) As an individual ( ) Jointly ( ) Other

Name of Realty Trust: \_\_\_\_\_

Name of Corporation: \_\_\_\_\_

Other: \_\_\_\_\_

(If you do not own the premises to be licensed, provide the following information about the owner).

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

**SECTION 10:**

If a lease or rental, you must provide the following information:

1. Copy of Lease

2. Beginning date of Lease: \_\_\_\_\_ End date of Lease: \_\_\_\_\_

3. Rent per month/year: \_\_\_\_\_



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**SECTION 11: OWNERSHIP INTERESTS**

State the following information for all persons or entities who will have any direct or indirect beneficial or financial interest in this license:

Full Name	Home Address	DOB	SSN/FID	Phone Number
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Describe all types of beneficial or financial interest each person or entity identified above will have in this license.

Person or Entity	License Name and Address	Description of Interest
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_____	_____	_____
_____	_____	_____
_____	_____	_____

Has any person or entity named above held a license or a beneficial interest in a license issued under Chapter 149 which is not presently held?     Yes         No

(If yes, provide the following for each person or entity)

Full Name	License Name And Address	Type of of License	Date Ownership Surrendered
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_____	_____	_____	_____
_____	_____	_____	_____



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Has any person or entity named above ever had a license suspended, revoked or cancelled?  
( ) Yes ( ) No

(If yes, provide the following information)

Date	License	License #	Reason why the license was suspended, revoked or cancelled
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Has any person or entity named above ever been convicted of violating any state, federal or military law?  
( ) Yes ( ) No

**SECTION 12:**

- A. Each individual applicant must sign.
- B. Applications by a partnership must be signed by a majority of the partners.
- C. Applications by a corporation must be signed by an officer authorized by a vote of the corporation Board of Directors.
- D. Applications by an association must be signed by a majority of the members of the governing body. All signatures must have answered Section 6.
- E. False information or failure to disclose are reasons to revoke a license or deny Class II Used Car Dealer License.

Signed and subscribed to under the penalty of perjury, the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_

By: **Signature of Full Name**

**Title:**

\_\_\_\_\_

Print Name: \_\_\_\_\_

Print Title: \_\_\_\_\_