

**THE COMMONWEALTH OF MASSACHUSETTS
TOWN OF BOURNE
APPLICATION FOR LICENSE
(AUCTIONEER'S)**

No: _____

Date: _____

To the License Authorities:

The undersigned applies for an Auctioneer's License in accordance with the provisions of the Statutes relating thereto.

Name: _____
(full name of person/firm/corporation making application)

Home Address: _____

Mail Address: _____

Telephone: _____
(Business) (Home) (Cell)

State Auctioneer's License#: _____ State Bond: _____ yes _____ no

Address of Auction: _____

Date(s) of Auction: _____

In said Town of Bourne in accordance with the rules and regulations made under authority of said statutes.

Signature of Applicant

Approved: _____ (yes) _____ (no) License Granted this _____ day of _____

Chairman, Board of Selectmen _____