

APPLICATION FOR TAXICAB LICENSE

Northampton, Mass. April 5 2018

TO THE CITY COUNCIL OF THE CITY OF NORTHAMPTON

I hereby respectfully petition your honorable body for a License to operate an Automobile for the Conveyance of Passengers for Hire within the City of Northampton.

NAME Jeffrey Miller

PLACE OF RESIDENCE 99 Pines Edge Dr. Northampton, MA

PLACE OF BUSINESS Cosmic Cab Co. 160 Main St. #8 Northampton

DESCRIPTION OF MOTOR VEHICLE 2003 Chrysler PT Cruiser - Red

REGISTRATION NUMBER TA 26977

VEHICLE IDENTIFICATION NUMBER 3C8FY68B83T540956

CAPACITY 5 ppl PASSENGERS (ONLY) NO. OF SEATBELTS 5

HOURS OF OPERATION 6am - 3am

PROOF OF VALID VEHICLE INSPECTION FILED #1 APR 13 2018

#2 _____

(Signed) 

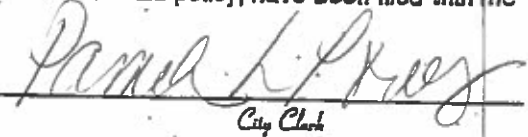
County of Hampshire

State of Massachusetts } ss

Sworn to before me this 13th day of April 2018


Notary Public

I hereby certify that an acceptable policy of insurance covering the foregoing motor vehicle, also a certificate from the insurance company guaranteeing required notice of cancellation of the said policy, have been filed with me in accordance with the provisions of the City Ordinances.


City Clerk

In City Council, _____ Voted that Petition be granted.

Attest: _____ City Clerk.



CERTIFICATE OF REGISTRATION

M.G.L. Chapter 90 Section 24B makes it a crime to alter this Certificate

RMV Division

PLATE TYPE TAN	REGISTRATION NUMBER TA26977	REGISTRATION TYPE TAXI	EFFECTIVE DATE 12/01/17	EXPIRES LAST DAY OF 11 18	MONTH	YEAR	TRANSACTION NUMBER 02733249130113
AFIS MODEL YEAR 2003	MAKE CHRY	MODEL PTCRUI	BODY STYLE TYPE VAN	COLOR RED	Not valid without official signature of Registrar		IF VEHICLE CARRYING PASSENGERS FOR HIRE MAXIMUM NUMBER OF PASSENGERS THAT CAN BE SEATED
VEHICLE IDENTIFICATION NUMBER 3C8FY68B83T540956		INSURANCE COMPANY NEW HAMPSHIRE INS		TITLE NUMBER BS067792		REGISTRAR <i>Chew C. Juvary</i>	
RESIDENTIAL ADDRESS (IF DIFFERENT) 99 PINES EDGE DR NORTHAMPTON, MA 01060-1563							
NAME(S) OF OWNER(S) AND MAILING ADDRESS MILLER, JEFFREY D BX 26 NORTHAMPTON, MA 01061-0026					FEES		
					REGISTRATION 60.00		
					TITLE 0.00		
					SPECIAL PLATES 0.00		
					SALES TAX 0.00		
					TOTAL 60.00		
MASSACHUSETTS DEPARTMENT OF TRANSPORTATION REGISTRY OF MOTOR VEHICLES DIVISION The records of the RMV database constitute the official status of the vehicle registration.							

SPECIAL MESSAGE IF THIS VEHICLE IS NEWLY ACQUIRED, IT MUST BE INSPECTED WITHIN SEVEN (7) DAYS OF REGISTRATION.	CHANGE OF ADDRESS STREET ADDRESS _____ CITY, STATE, ZIP CODE _____
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Important Information for Vehicle Owners

- Every person operating a motor vehicle shall have the Certificate of Registration for the motor vehicle and for the trailer, if any, and his/her license to operate, upon his/her person or in the vehicle, in some easily accessible place.
- By law, you must report any change of address to the RMV within 30 days in writing. Address changes can be made on the RMV website: www.massrmv.com or by mail to: RMV, P.O. Box 55889, Boston, MA 02205-5889. Once you have reported the address change to the RMV, please write corrected address in box provided above.
- Return the registration plates to the RMV immediately if:
 - The vehicle has been sold or junked and the registration is not going to be transferred to another vehicle. Keep a copy of the *Bill of Sale, Title, and completed Reassignment of Title* for your records to document the transfer.
 - You move to another state and you register the vehicle in that state.
 - The insurance policy is not renewed or is cancelled and there is no plan to obtain a new policy.

Transferring Your Plates: Massachusetts law (M.G.L. Chapter 90, Section 2) allows you to transfer valid registration plates from this vehicle to a newly acquired new or used motor vehicle or trailer while you obtain insurance and a new registration. **All** of the following must be met: 1. You are at least 18 years of age and you own the motor vehicle or trailer identified on this *Registration Certificate*; 2. You transfer ownership of this vehicle to another person or permanently lose possession of it (such as through repossession, etc.); 3. The newly acquired vehicle is of the **same vehicle type** (passenger vehicle to passenger vehicle, trailer to trailer, etc.); the **same registration type** (passenger to passenger, commercial to commercial); and has the **same number of wheels**; and, 4. The **seller and buyer** properly complete the Assignment of the Certificate of Title (for the newly acquired "used" vehicle) or Certificate of Origin (if a "new" vehicle). If **all** of the above are met, you may operate the newly acquired vehicle with the transferred plates **up to 5:00 pm of the 7th calendar day** following the date of transfer (or loss of possession). The day of transfer or loss is day #1. During those 7 days, you **must** carry the *Bill of Sale* (or the dealer's *Purchase Contract*) for the newly acquired vehicle **and** this *Registration Certificate* when operating the vehicle. See *FAQs About the Seven-Day Registration Transfer Law* on the RMV's website at www.massrmv.com.

No Insurance Card Required: Massachusetts's law does **not** require an insurance card. The law, M.G.L. Chapter 90, Section 34A and Chapter 175, Section 113A requires the vehicle's owner to maintain a compulsory motor vehicle liability insurance policy or bond for bodily injury coverage and property damage insurance. If an insurer is identified on the face of this *Registration Certificate*, it is required by law to electronically notify the RMV (Registry of Motor Vehicles) if coverage lapses. The vehicle owner is then notified by the RMV to obtain new insurance within 10 days or the registration will be revoked. Bonds are filed with the State Treasurer's office.

Be first in line by going online at www.massrmv.com

- | | |
|---------------------------------|----------------------------------|
| Schedule a Road Test | Request a Duplicate Title |
| Renew Your Driver's License | Request a Duplicate Registration |
| Renew Your Registration | Change Your Address |
| Pay Citations/Court Hearing Fee | Cancel My Plate/Registration |
| Replace Your Driver's License | Order a Special Plate |

NEED TO VISIT AN RMV OFFICE?
SAVE TIME
Complete Your
Application Online!

VISIT OUR WEBSITE FOR A FULL LIST OF AVAILABLE TRANSACTIONS



Vehicle Inspection Report

Please Review This Important Information

Your vehicle has **PASSED** its **SAFETY TEST**. The results are summarized in this report.

Questions? Visit www.mass.gov/vehiclecheck or call Customer Service at 1-844-358-0135. Customer Service is staffed from 7 a.m. to 5 p.m. Monday, Wednesday, Friday, and Saturday, and from 7 a.m. to 8 p.m. on Tuesday and Thursday.

Overall Result: PASS		Vehicle Information		Station Information	
Safety Result	PASS	VIN	3C8FY68B83T540956	ERNIES GARAGE, LLC	
Emissions Result	N/A	License Plate	TA26977	72 KING STREET	
Start Test Date/Time	4/6/2018 11:35 AM	Plate Type/State	TAN / MA		
End Test Date/Time	4/6/2018 11:39 AM	Vehicle Type	PASSENGER	4135840716	
Test Type	Regular	Year / Make	2003 Chrysler	NORTHAMPTON	MA
Sticker Number	192139201	Model	PT Cruiser	Station Number	PB005056
Inspection Type	Initial	Fuel Type	GASOLINE	Workstation Number	MAW00000648
Inspection Counter	1	Engine Cyl / Size	4 / 2.4L	Inspector Number	*****2820
		GVWR	5000		
		Odometer	168236		
				Inspection Fee	\$35.00

Safety Inspection Results

License Plate Mounting and Condition	PASS	Service Brakes	PASS	Parking Brake	PASS
Horn	PASS	Stop Lights and Tail Lights	PASS	Headlight Aim and Operation	PASS
Lighting Devices and Reflectors	PASS	Directional Signals and 4-Ways	PASS	Front End	PASS
Steering and Suspension	PASS	Frame	PASS	Windshield Wipers and Cleaner	PASS
Safety Belts	PASS	Air Bags	PASS	Muffler and Exhaust System	PASS
Window Tint	PASS	Windshield	PASS	Rear View Mirror	PASS
Bumpers/Fenders/Exterior Sheet Metal	PASS	Fuel Tank Filler Cap	PASS	Fuel Tank Filler Neck and Components	PASS
Visible Smoke	PASS	Altered Vehicle Height	PASS	Tires	PASS
Other	PASS				

Inspection Comments

None

VIR Number



Scan to visit website



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Northampton, Mass. April 5 2018

TO THE CITY COUNCIL OF THE CITY OF NORTHAMPTON

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NAME Jeffrey Miller

PLACE OF RESIDENCE 99 Pines Edge Dr. Northampton, MA

PLACE OF BUSINESS Cosmic Cab Co. 160 Main St. #8 Northampton

DESCRIPTION OF MOTOR VEHICLE 2003 Chrysler PT Cruiser Brown

REGISTRATION NUMBER TA 603C

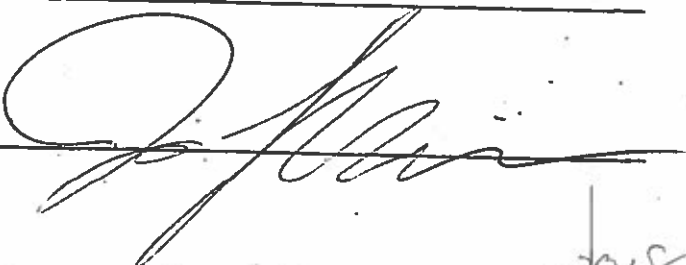
VEHICLE IDENTIFICATION NUMBER 3C4FY58B83T625145

CAPACITY 5 ppl PASSENGERS (ONLY) NO. OF SEATBELTS 5

HOURS OF OPERATION 6am - 3am

PROOF OF VALID VEHICLE INSPECTION FILED #1 APR 12 2018

#2 _____

(Signed) 

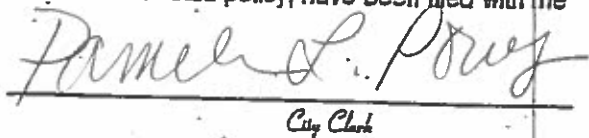
County of Hampshire

State of Massachusetts }^{ss}

Sworn to before me this 12th day of April 2018


Notary Public

I hereby certify that an acceptable policy of insurance covering the foregoing motor vehicle, also a certificate from the insurance company guaranteeing required notice of cancellation of the said policy, have been filed with me in accordance with the provisions of the City Ordinances.


City Clerk

In City Council, _____ Voted that Petition be granted.

Attest _____ City Clerk.

PLATE TYPE TAN	REGISTRATION NUMBER TA603C	REGISTRATION TYPE TAXI	EFFECTIVE DATE 12/01/17	EXPIRES LAST DAY OF →	MONTH 11	YEAR 18	TRANSACTION NUMBER 02733249130115	
MFY MODEL YEAR 2003	MAKE CHRY	MODEL PTCRUI	BODY STYLE/TYPE VAN	COLOR BROWN	Not valid without official signature of Registrar		IF VEHICLE CARRYING PASSENGERS FOR HIRE: MAXIMUM NUMBER OF PASSENGERS THAT CAN BE SEATED.	TOTAL REGISTERED WEIGHT FOR A COMMERCIAL VEHICLE OR TRAILER
VEHICLE IDENTIFICATION NUMBER 3C4FY58B83T625145		INSURANCE COMPANY NEW HAMPSHIRE INS		TITLE NUMBER BL938363		REGISTRAR <i>Chas C. Dewney</i>		
RESIDENTIAL ADDRESS (IF DIFFERENT) 99 PINES EDGE DR NORTHAMPTON, MA 01060-1563								
NAME(S) OF OWNER(S) AND MAILING ADDRESS MILLER, JEFFREY D BX 26 NORTHAMPTON, MA 01061-0026						FEES REGISTRATION 60.00 TITLE 0.00 SPECIAL PLATES 0.00 SALES TAX 0.00 TOTAL 60.00		
MASSACHUSETTS DEPARTMENT OF TRANSPORTATION REGISTRY OF MOTOR VEHICLES DIVISION The records of the RMV database constitute the official status of the vehicle registration.								

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<ul style="list-style-type: none"> Schedule a Road Test Renew Your Driver's License Renew Your Registration Pay Citations/Court Hearing Fee Replace Your Driver's License 	<ul style="list-style-type: none"> Request a Duplicate Title Request a Duplicate Registration Change Your Address Cancel My Plate/Registration Order a Special Plate
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Overall Result:	PASS	Vehicle Information		Station Information	
Safety Result	PASS	VIN	3C4FY58B83T625145	ERNIES GARAGE, LLC	
Emissions Result	N/A	License Plate	TA603C	72 KING STREET	
Start Test Date/Time	2/27/2018 1:17 PM	Plate Type/State	TAN / MA	4135840716	
End Test Date/Time	2/27/2018 1:24 PM	Vehicle Type	TRUCK	NORTHAMPTON	MA
Test Type	Regular	Year / Make	2003 Chrysler	Station Number	PB005056
Sticker Number	190079799	Model	PT Cruiser	Workstation Number	MAW00000648
Inspection Type	Initial	Fuel Type	GASOLINE	Inspector Number	*****5128
Inspection Counter	1	Engine Cyl / Size	4 / 2.4L		
		GVWR	5000		
		Odometer	274851		

Inspection Fee	\$35.00
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Safety Inspection Results

License Plate Mounting and Condition	PASS	Service Brakes	PASS	Parking Brake	PASS
Horn	PASS	Stop Lights and Tail Lights	PASS	Headlight Aim and Operation	PASS
Lighting Devices and Reflectors	PASS	Directional Signals and 4-Ways	PASS	Front End	PASS
Steering and Suspension	PASS	Frame	PASS	Windshield Wipers and Cleaner	PASS
Safety Belts	PASS	Air Bags	PASS	Muffler and Exhaust System	PASS
Window Tint	PASS	Windshield	PASS	Rear View Mirror	PASS
Bumpers/Fenders/Exterior Sheet Metal	PASS	Fuel Tank Filler Cap	PASS	Fuel Tank Filler Neck and Components	PASS
Visible Smoke	PASS	Altered Vehicle Height	PASS	Tires	PASS
Other	PASS				

Inspection Comments

None

VIR Number



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NAME Jeffrey Miller

PLACE OF RESIDENCE 99 Pines Edge Dr. Northampton, MA

PLACE OF BUSINESS Cosmic Cab Co. 160 Main St. #8 Northampton

DESCRIPTION OF MOTOR VEHICLE 2000 Chevy Suburban SUV Brown

REGISTRATION NUMBER TA 20664

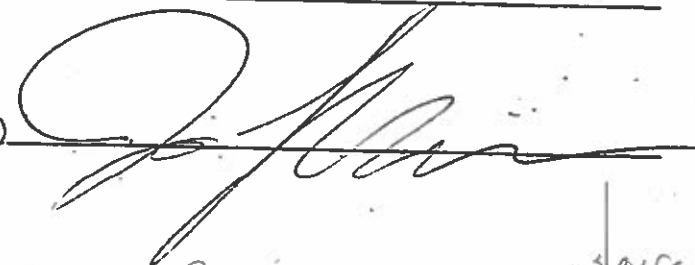
VEHICLE IDENTIFICATION NUMBER 3GNFK16T6YG124333

CAPACITY 7 ppl PASSENGERS (ONLY) NO. OF SEATBELTS 7

HOURS OF OPERATION 6am - 3am

PROOF OF VALID VEHICLE INSPECTION FILED #1 APR 12 2018

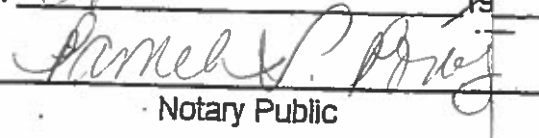
#2 _____

(Signed) 

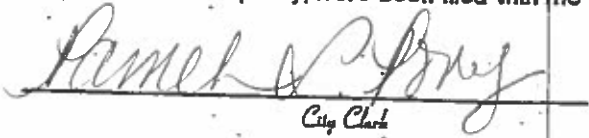
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State of Massachusetts } ss

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City Clerk

In City Council, _____ Voted that Petition be granted.

Attest: _____ City Clerk

CERTIFICATE OF REGISTRATION

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RMV Division

PLATE TYPE TAN	REGISTRATION NUMBER TA20664	REGISTRATION TYPE TAXI	EFFECTIVE DATE 12/01/17	EXPIRES LAST DAY OF →	MONTH 11	YEAR 18	TRANSACTION NUMBER 02733249130118												
MFHS MODEL YEAR 2000	MAKE CHEV	MODEL SUBU	BODY STYLE/TYPE SUV	COLOR BROWN	Not valid without official signature of Registrar		IF VEHICLE CARRYING PASSENGERS FOR HIRE: MAXIMUM NUMBER OF PASSENGERS THAT CAN BE SEATED.												
VEHICLE IDENTIFICATION NUMBER 3GNFK16T6YG124333		INSURANCE COMPANY NEW HAMPSHIRE INS		TITLE NUMBER BP052298		REGISTRAR <i>Chew C. Dewney</i>													
RESIDENTIAL ADDRESS (IF DIFFERENT) 99 PINES EDGE DR NORTHAMPTON, MA 01060-1563																			
NAME(S) OF OWNER(S) AND MAILING ADDRESS MILLER, JEFFREY D BX 26 NORTHAMPTON, MA 01061-0026																			
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">FEES</td> <td></td> </tr> <tr> <td style="text-align: right;">REGISTRATION</td> <td style="text-align: right;">60.00</td> </tr> <tr> <td style="text-align: right;">TITLE</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td style="text-align: right;">SPECIAL PLATES</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td style="text-align: right;">SALES TAX</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td style="text-align: right;">TOTAL</td> <td style="text-align: right;">60.00</td> </tr> </table>								FEES		REGISTRATION	60.00	TITLE	0.00	SPECIAL PLATES	0.00	SALES TAX	0.00	TOTAL	60.00
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MASSACHUSETTS DEPARTMENT OF TRANSPORTATION REGISTRY OF MOTOR VEHICLES DIVISION <small>The records of the RMV database constitute the official status of the vehicle registration.</small>																			

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VEHICLE CHECK

Cleaner Air • Safer Roads



183239502

Vehicle Inspection Report

Please Review This Important Information

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Questions? Visit www.mass.gov/vehiclecheck or call the Motorist Hotline at 1-866-941-6277. The Hotline is staffed from 7 a.m. to 5 p.m. Monday, Wednesday, Friday, and Saturday, and from 7 a.m. to 8 p.m. on Tuesday and Thursday.

Overall Result:	Pass	Vehicle Information		Station Information	
Safety Result	Pass	VIN	3GNFK16T6YG124333	Name:	ERNIES GARAGE, LLC
Emissions Result	N/A	License Plate	TA20664	Address:	72 KING STREET
Test Date	8/12/2017	Plate Type/State	TAN / MA		NORTHAMPTON, MA 01060
Test Time	10:28:55AM	Vehicle Type	Truck		413-584-0716
Test Type	Regular	Year / Make	2000 CHEVROLET	Station Number	PB005056
Sticker Number	183239502	Model	K1500 SUBURBAN	Workstation Number	ST001746
Inspection Type	Initial	Fuel Type	Gasoline	Inspector Number	*****5128
Inspection Count	1	GVWR	8500	Test Fee	\$35.00
		Odometer	242860		

*Paid
Cash
35.00
Er.*

Safety Inspection Results

Visual Plate Check	Pass	Service Brakes	Pass	Horn Check	Pass
Stop and Tail Lights Check	Pass	Headlamp Check	Pass	Lighting/Reflector Check	Pass
Directional Lights Check	Pass	Frontend Check	Pass	Suspension Check	Pass
Frame Check	Pass	Wipers and Cleaner Check	Pass	Safety Belts Check	Pass
Air Bags Check	Pass	Exhaust Check	Pass	Window Tint Check	Pass
Windshield Check	Pass	Rear View Mirror Check	Pass	Bumpers/Fenders Check	Pass
Fuel Tank Fill Cap Check	Pass	Fuel Tank Fill Neck Check	Pass	Visible Smoke Check	Pass
Vehicle Height Check	Pass	Tires Check	Pass	Parking Brake Check	Pass
Other	Pass				

Safety Inspection Comments



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DESCRIPTION OF MOTOR VEHICLE 2008 Dodge Caravan Brown

REGISTRATION NUMBER TA 629 D

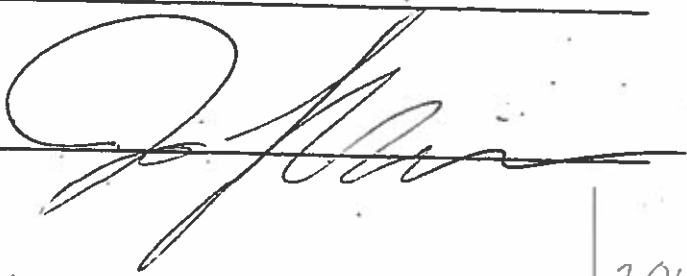
VEHICLE IDENTIFICATION NUMBER 1D8HN44H18B184670

CAPACITY 7 ppl PASSENGERS (ONLY) NO. OF SEATBELTS 7

HOURS OF OPERATION 6am - 3am

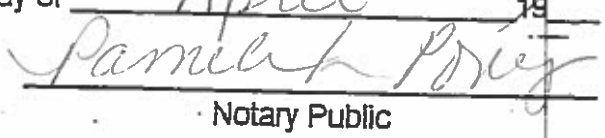
PROOF OF VALID VEHICLE INSPECTION FILED #1 APR 12 2018

#2 _____

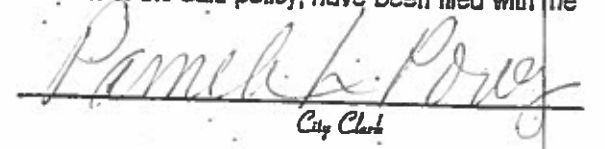
(Signed) 

County of Hampshire }
State of Massachusetts }

Sworn to before me this 12th day of April 2018


Notary Public

I hereby certify that an acceptable policy of insurance covering the foregoing motor vehicle, also a certificate from the insurance company guaranteeing required notice of cancellation of the said policy, have been filed with me in accordance with the provisions of the City Ordinances.


City Clerk

In City Council, _____ Voted that Petition be granted.

Attest: _____ City Clerk.



CERTIFICATE OF REGISTRATION

M.G.L. Chapter 90 Section 24B makes it a crime to alter this Certificate

RMV Division

PLATE TYPE TAN	REGISTRATION NUMBER TA629D	REGISTRATION TYPE TAXI	EFFECTIVE DATE 01/05/18	EXPIRES LAST DAY OF 11 18	MONTH 11	YEAR 18	TRANSACTION NUMBER 01800549050109										
MFRS MODEL YEAR 2008	MAKE DODG	MODEL CARAVA	BODY STYLE/TYPE VAN	COLOR BROWN	Not valid without official signature of Registrar		IF VEHICLE CARRYING PASSENGERS FOR HIRE: MAXIMUM NUMBER OF PASSENGERS THAT CAN BE SEATED.										
VEHICLE IDENTIFICATION NUMBER 1D8HN44H19B184670		INSURANCE COMPANY NEW HAMPSHIRE INS		TITLE NUMBER	REGISTRAR <i>Chw C. Jurney</i>		TOTAL REGISTERED WEIGHT FOR A COMMERCIAL VEHICLE OR TRAILER.										
RESIDENTIAL ADDRESS (IF DIFFERENT)																	
NAME(S) OF OWNER(S) AND MAILING ADDRESS MILLER, JEFFREY D BX 26 NORTHAMPTON, MA 01061-0026					FEES												
					<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right;">REGISTRATION</td> <td style="text-align: right;">25.00</td> </tr> <tr> <td style="text-align: right;">TITLE</td> <td style="text-align: right;">75.00</td> </tr> <tr> <td style="text-align: right;">SPECIAL PLATES</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td style="text-align: right;">SALES TAX</td> <td style="text-align: right;">200.00</td> </tr> <tr> <td style="text-align: right;">TOTAL</td> <td style="text-align: right;">300.00</td> </tr> </table>			REGISTRATION	25.00	TITLE	75.00	SPECIAL PLATES	0.00	SALES TAX	200.00	TOTAL	300.00
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TOTAL	300.00																
MASSACHUSETTS DEPARTMENT OF TRANSPORTATION REGISTRY OF MOTOR VEHICLES DIVISION <small>The records of the RMV database constitute the official status of the vehicle registration.</small>																	

SPECIAL MESSAGE IF THIS VEHICLE IS NEWLY ACQUIRED, IT MUST BE INSPECTED WITHIN SEVEN (7) DAYS OF REGISTRATION.	CHANGE OF ADDRESS STREET ADDRESS _____ _____ CITY, STATE, ZIP CODE _____
--	---

Important Information for Vehicle Owners

- | | |
|---|--|
| <ul style="list-style-type: none"> • Every person operating a motor vehicle shall have the Certificate of Registration for the motor vehicle and for the trailer, if any, and his/her license to operate, upon his/her person or in the vehicle, in some easily accessible place. • By law, you must report any change of address to the RMV within 30 days in writing. Address changes can be made on the RMV website: www.massrmv.com or by mail to: RMV, P.O. Box 55889, Boston, MA 02205-5889. Once you have reported the address change to the RMV, please write corrected address in box provided above. | <ul style="list-style-type: none"> • Return the registration plates to the RMV immediately if: <ul style="list-style-type: none"> - The vehicle has been sold or junked and the registration is not going to be transferred to another vehicle. Keep a copy of the <i>Bill of Sale, Title</i>, and completed <i>Reassignment of Title</i> for your records to document the transfer. - You move to another state and you register the vehicle in that state. - The insurance policy is not renewed or is cancelled and there is no plan to obtain a new policy. |
|---|--|

Transferring Your Plates: Massachusetts law (M.G.L. Chapter 90, Section 2) allows you to transfer valid registration plates from this vehicle to a newly acquired new or used motor vehicle or trailer while you obtain insurance and a new registration. All of the following must be met: 1. You are at least 18 years of age and you own the motor vehicle or trailer identified on this *Registration Certificate*; 2. You transfer ownership of this vehicle to another person or permanently lose possession of it (such as through repossession, etc.); 3. The newly acquired vehicle is of the same vehicle type (passenger vehicle to passenger vehicle, trailer to trailer, etc.); the same registration type (passenger to passenger, commercial to commercial); and has the same number of wheels; and, 4. The seller and buyer properly complete the Assignment of the Certificate of Title (for the newly acquired "used" vehicle) or Certificate of Origin (if a "new" vehicle). If all of the above are met, you may operate the newly acquired vehicle with the transferred plates up to 5:00 pm of the 7th calendar day following the date of transfer (or loss of possession). The day of transfer or loss is day #1. During those 7 days, you must carry the *Bill of Sale* (or the dealer's *Purchase Contract*) for the newly acquired vehicle and this *Registration Certificate* when operating the vehicle. See *FAQs About the Seven-Day Registration Transfer Law* on the RMV's website at www.massrmv.com.

No Insurance Card Required: Massachusetts's law does not require an insurance card. The law, M.G.L. Chapter 90, Section 34A and Chapter 175, Section 113A requires the vehicle's owner to maintain a compulsory motor vehicle liability insurance policy or bond for bodily injury coverage and property damage insurance. If an insurer is identified on the face of this *Registration Certificate*, it is required by law to electronically notify the RMV (Registry of Motor Vehicles) if coverage lapses. The vehicle owner is then notified by the RMV to obtain new insurance within 10 days or the registration will be revoked. Bonds are filed with the State Treasurer's office.

Be first in line by going online at www.massrmv.com

- | | |
|---------------------------------|----------------------------------|
| Schedule a Road Test | Request a Duplicate Title |
| Renew Your Driver's License | Request a Duplicate Registration |
| Renew Your Registration | Change Your Address |
| Pay Citations/Court Hearing Fee | Cancel My Plate/Registration |
| Replace Your Driver's License | Order a Special Plate |

NEED TO VISIT AN RMV OFFICE?

**SAVE TIME
Complete Your
Application Online!**

VISIT OUR WEBSITE FOR A FULL LIST OF AVAILABLE TRANSACTIONS



Vehicle Inspection Report

Please Review This Important Information

Your vehicle has **PASSED** both its **SAFETY TEST** and its **EMISSIONS TEST**. The results are summarized in this report.

Questions? Visit www.mass.gov/vehiclecheck or call Customer Service at 1-844-358-0135. Customer Service is staffed from 7 a.m. to 5 p.m. Monday, Wednesday, Friday, and Saturday, and from 7 a.m. to 8 p.m. on Tuesday and Thursday.

Overall Result:	PASS	Vehicle Information		Station Information	
Safety Result	PASS	VIN	1D8HN44H18B184670	ERNIES GARAGE, LLC	
Emissions Result	N/A	License Plate	TA629D	72 KING STREET	
Start Test Date/Time	1/15/2018 9:48 AM	Plate Type/State	TAN / MA		
End Test Date/Time	1/15/2018 9:50 AM	Vehicle Type	TRUCK	4135840716	
Test Type	Regular	Year / Make	2008 Dodge	Station Number	PB005056
Sticker Number	192139073	Model	Grand Caravan	Workstation Number	MAW00000648
Inspection Type	Retest	Fuel Type	GASOLINE	Inspector Number	*****2820
Inspection Counter	2	Engine Cyl / Size	6 / 3.3L		
		GVWR	7000		
		Odometer	165301		

Inspection Fee **30.00**

Safety Inspection Results

License Plate Mounting and Condition	PASS	Service Brakes	PASS	Parking Brake	PASS
Horn	PASS	Stop Lights and Tail Lights	PASS	Headlight Aim and Operation	PASS
Lighting Devices and Reflectors	PASS	Directional Signals and 4-Ways	PASS	Front End	PASS
Steering and Suspension	PASS	Frame	PASS	Windshield Wipers and Cleaner	PASS
Safety Belts	PASS	Air Bags	PASS	Muffler and Exhaust System	PASS
Window Tint	PASS	Windshield	PASS	Rear View Mirror	PASS
Bumpers/Fenders/Exterior Sheet Metal	PASS	Fuel Tank Filler Cap	PASS	Fuel Tank Filler Neck and Components	PASS
Visible Smoke	PASS	Altered Vehicle Height	PASS	Tires	PASS
Other	PASS				

Inspection Comments

None

On-Board Diagnostic (OBD) Results	OBD Readiness Monitor Results	OBD Additional Data
Tampering Check	N/A	Catalyst
Connector Result	N/A	Catalyst Heater
RPM Result	N/A	Evaporative System
Key-On Bulb Check	N/A	Secondary Air System
Engine-Running Bulb Check	N/A	A/C System
Scan Tool Check	N/A	Oxygen Sensor
Communication Result	N/A	Oxygen Sensor Heater
MIL Status Result	N/A	EGR and/or VVT System
Readiness Result	N/A	
		Miles Since Code Clearing
		Warm-Ups Since Code Clearing
		Pin 16 Voltage
		OBD Diagnostic Trouble Codes
		N/A
		OBD Permanent Fault Codes
		N/A

Scan to visit website



VIR Number



APPLICATION FOR TAXICAB LICENSE

Northampton, Mass. April 5 2018

TO THE CITY COUNCIL OF THE CITY OF NORTHAMPTON

I hereby respectfully petition your honorable body for a License to operate an Automobile for the Conveyance of Passengers for Hire within the City of Northampton.

NAME Jeffrey Miller

PLACE OF RESIDENCE 99 Pines Edge Dr. Northampton, MA

PLACE OF BUSINESS Cosmic Cab Co. 160 Main St. #8 Northampton

DESCRIPTION OF MOTOR VEHICLE 2008 Dodge Caravan - Black

REGISTRATION NUMBER TA 26981

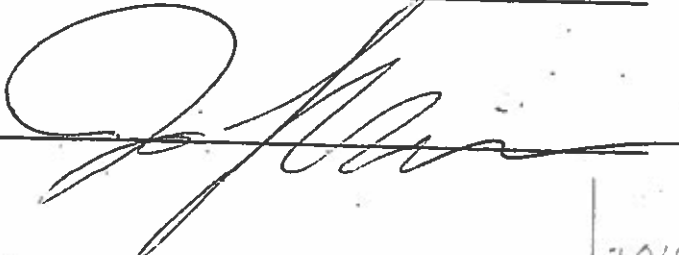
VEHICLE IDENTIFICATION NUMBER 1D8HN44H08B162479

CAPACITY 7 ppl PASSENGERS (ONLY) NO. OF SEATBELTS 7

HOURS OF OPERATION 6am - 3am

PROOF OF VALID VEHICLE INSPECTION FILED #1 APR 12 2018

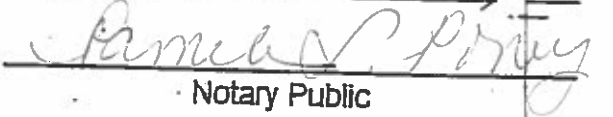
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(Signed) 

County of Hampshire

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Notary Public

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City Clerk

In City Council, _____ Voted that Petition be granted.

Attest: _____ City Clerk.

CERTIFICATE OF REGISTRATION

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RMV Division

PLATE TYPE TAN	REGISTRATION NUMBER TA26981	REGISTRATION TYPE TAXI	EFFECTIVE DATE 12/01/17	EXPIRES LAST DAY OF →	MONTH 11	YEAR 18	TRANSACTION NUMBER 02733249130117										
MFYS MODEL YEAR 2008	MAKE DODG	MODEL CARAVA	BODY STYLE/TYPE VAN	COLOR BLACK	Not valid without official signature of Registrar		IF VEHICLE CARRYING PASSENGERS FOR HIRE MAXIMUM NUMBER OF PASSENGERS THAT CAN BE SEATED										
VEHICLE IDENTIFICATION NUMBER 1D8HN44H08B162479		INSURANCE COMPANY NEW HAMPSHIRE INS		TITLE NUMBER BS088668		REGISTRAR <i>Cher C. Dewey</i>											
RESIDENTIAL ADDRESS (IF DIFFERENT) 99 PINES EDGE DR NORTHAMPTON, MA 01060-1563				FEEES													
NAME(S) OF OWNER(S) AND MAILING ADDRESS MILLER, JEFFREY D BX 26 NORTHAMPTON, MA 01061-0026				<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">REGISTRATION</td> <td style="width: 20%; text-align: right;">60.00</td> </tr> <tr> <td>TITLE</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td>SPECIAL PLATES</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td>SALES TAX</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td style="text-align: right;">TOTAL</td> <td style="text-align: right; border-top: 1px solid black;">60.00</td> </tr> </table>				REGISTRATION	60.00	TITLE	0.00	SPECIAL PLATES	0.00	SALES TAX	0.00	TOTAL	60.00
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- | | |
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Vehicle Inspection Report

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Overall Result: PASS		Vehicle Information		Station Information	
Safety Result	PASS	VIN	1D8HN44H08B162479	ERNIES GARAGE, LLC	
Emissions Result	PASS	License Plate	TA26981	72 KING STREET	
Start Test Date/Time	12/18/2017 10:43 AM	Plate Type/State	TAN / MA		
End Test Date/Time	12/18/2017 10:47 AM	Vehicle Type	TRUCK	4135840716	
Test Type	Regular	Year / Make	2008 Dodge		
Sticker Number	189166116	Model	Grand Caravan	Station Number	PB005056
Inspection Type	Initial	Fuel Type	GASOLINE	Workstation Number	MAW00000648
Inspection Counter	1	Engine Cyl / Size	6 / 3.3L	Inspector Number	*****5128
		GVWR	7000		
		Odometer	179210		

Inspection Fee	\$35.00
-----------------------	----------------

Safety Inspection Results

License Plate Mounting and Condition	PASS	Service Brakes	PASS	Parking Brake	PASS
Horn	PASS	Stop Lights and Tail Lights	PASS	Headlight Aim and Operation	PASS
Lighting Devices and Reflectors	PASS	Directional Signals and 4-Ways	PASS	Front End	PASS
Steering and Suspension	PASS	Frame	PASS	Windshield Wipers and Cleaner	PASS
Safety Belts	PASS	Air Bags	PASS	Muffler and Exhaust System	PASS
Window Tint	PASS	Windshield	PASS	Rear View Mirror	PASS
Bumpers/Fenders/Exterior Sheet Metal	PASS	Fuel Tank Filler Cap	PASS	Fuel Tank Filler Neck and Components	PASS
Visible Smoke	PASS	Altered Vehicle Height	PASS	Tires	PASS
Other	PASS				

Inspection Comments

None

On-Board Diagnostic (OBD) Results		OBD Readiness Monitor Results		OBD Additional Data	
Tampering Check	PASS	Catalyst	READY	Miles Since Code Clearing	15067
Connector Result	PASS	Catalyst Heater	UNSUPPORTED	Warm-Ups Since Code Clearing	255
RPM Result	PASS	Evaporative System	READY	Pin 16 Voltage	13.4
Key-On Bulb Check	N/A	Secondary Air System	UNSUPPORTED	OBD Diagnostic Trouble Codes	
Engine-Running Bulb Check	N/A	A/C System	UNSUPPORTED	OBD Permanent Fault Codes	
Scan Tool Check	PASS	Oxygen Sensor	READY	7F 0A 80	
Communication Result	PASS	Oxygen Sensor Heater	READY		
MIL Status Result	PASS	EGR and/or VVT System	READY		
Readiness Result	PASS				

Scan to visit website



VIR Number





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
04/08/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).


PRODUCER Lighthouse Insurance Agency, Ltd 470 West Broadway South Boston MA 02127		CONTACT NAME: PHONE (A/C, No, Ext): (617) 464-3777 FAX (A/C, No): (617) 464-3888 E-MAIL ADDRESS:																						
INSURED Jeff Miller, DBA: Cosmic Cab 78 Conz St, Suite C Rear Northampton MA 01060		<table border="1"> <tr> <th colspan="2">INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A:</td> <td>Protective Insurance Co</td> <td></td> </tr> <tr> <td>INSURER B:</td> <td></td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> <td></td> </tr> </table>		INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A:	Protective Insurance Co		INSURER B:			INSURER C:			INSURER D:			INSURER E:			INSURER F:		
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INSURER C:																								
INSURER D:																								
INSURER E:																								
INSURER F:																								

COVERAGES **CERTIFICATE NUMBER:** CL184634590 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY	Y		DG0001504-00	01/18/2018	01/18/2018	COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ 100,000 BODILY INJURY (Per accident) \$ 300,000 PROPERTY DAMAGE (Per accident) \$ 50,000 Underinsured motorist BI \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Certificate is provided to Holder as proof of active coverage for above Named Insured.
2003 Chevy PT Cruiser (3C8FY68B83T540956) TA26977 ✓
2003 Chrysler PT Cruiser (3C4FY58B83T625145) TA603C ✓
2000 Chevy Suba (3GNFK16T6YG124333) TA20664 ✓
2008 Dodge Carav (1D8HN44H08B162479) TA26981 ✓
2008 Dodge Caravan (1D8HN44H18B184670) TA629D ✓

CERTIFICATE HOLDER City of North Adams North Adams City Hall 10 Main Street North Adams MA 01247	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
--	--

Cosmic Cab Company

Child Safety Seat Plan 2018

As Per order of the city of Northampton. Cosmic Cab will make available car seats(front or rear facing) and booster seats to any customer needing such accomodations. Customer will have to make a reservation for a cab with a car seat at least 1 hour prior to their pickup.

Cosmic Cab Company
413-230-6119

Jeffrey Miller / Owner


Certification of Status in Good Standing
For State Tax Filing & Payment

Your social security number may be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing or tax payment obligations. Licensees who fail to correct their non-filing or delinquency **will be subject to license suspension or revocation.** Your request to furnish this information is made under the authority of Massachusetts General Law, Chapter 62C, Section 49A.

Business Name: Cosmic Cab

Individual reporting on behalf of the business: Jeffrey Miller

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 as required under law.

Signature of Individual: 

Social Security Number: _____ (voluntary)

OR

Signature of Corporate Officer: _____

Federal Identification Number: _____

COUNCILORS



AT LARGE

William H. Dwight - President
Ryan R. O'Donnell - Vice-President

WARD

- 1 Maureen T. Carney
- 2 Dennis P. Bidwell
- 3 James Nash
- 4 Gina-Louise Sciarra
- 5 David A. Murphy
- 6 Marianne L. LaBarge
- 7 Alisa F. Klein

CITY COUNCIL
CITY OF NORTHAMPTON
MASSACHUSETTS

WAGE COMPLIANCE CERTIFICATES REQUIRED FOR LICENSES 17.235

The Northampton City Council, in determining whether to issue, re-issue, modify, suspend or revoke a license under G.L. c. 140, shall require that a potential or current licensee certify that they are not subject to a federal or state criminal or civil judgment, administrative citation, order or final administrative determination resulting from a violation of G.L. c. 149, c. 151, or the Fair Labor Standards Act. The City Council may require a wage bond or insurance be posted by any potential licensee who does not certify that they are not subject to a federal or state criminal or civil judgment, administrative citation, order or final administrative determination resulting from a violation of G.L. c. 149, c. 151, or the Fair Labor Standards Act. Licensees that are subject to a state or federal debarment for violation of the above laws, either voluntarily or involuntarily, or that have been prohibited from contracting with the Commonwealth or any of its agencies or subdivisions shall be prohibited from holding, or continuing to hold, licenses issued under G.L. c. 140, for the entire period of debarment or other stated time period.

Applicants must check box 1 or box 2 as applicable and must sign this Form, certifying compliance with the requirements set out in this Form. This Form must be included with the application.

AFFIDAVIT

This License applicant is not subject to a federal or state criminal or civil judgment, administrative citation, order or final administrative determination resulting from a violation of G.L. c. 149, c. 151, or the Fair Labor Standards Act within the last three years.

This License applicant is subject to a federal or state criminal or civil judgment, administrative citation, order or final administrative determination resulting from a violation of G.L. c. 149, c. 151, or the Fair Labor Standards Act within the last three years. This applicant will provide a wage bond or wage insurance for the period of the license.

Jeffrey Miller
(Typed or printed name of license applicant)

[Signature]
Signature

Cosmic Cab Company
(Name of Business)