

DEPARTMENT OF COMMUNITY SAFETY  
Police Services Division

**Juliann Flaherty**  
Chief of Police



Police Headquarters  
112 Mystic Street  
Telephone 781-316-3900  
Facsimile 781-316-3919

*Town of Arlington*  
MASSACHUSETTS 02474

The Department of Community Safety, Police Services Division, Arlington, MA; has been certified by the Criminal History Systems Board for access to conviction data. I understand that a record check will be conducted for conviction information only and that it will not necessarily disqualify me.

Agency Address: 112 Mystic Street, Arlington, MA 02474  
Attention: Sergeant Sean Kiernan

Fax: (781) 316-3933

Office: (781) 316-3906

**Applicant Information**

\_\_\_\_\_  
(Last Name)

\_\_\_\_\_  
(First Name)

\_\_\_\_\_  
(MI)

\_\_\_\_\_  
(Maiden Name, If Applicable)

DOB: \_\_\_\_\_

SSN: \_\_\_\_\_

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

\_\_\_\_\_  
(Applicant Signature)

\_\_\_\_\_  
(Date)

**CHSB USE ONLY**

Record Attached: \_\_\_\_\_

No Record: \_\_\_\_\_

Date: \_\_\_\_\_

ARLINGTON POLICE DEPARTMENT

Date: .....

To the Chief of Police,

The undersigned respectfully requests that he may be licensed to drive a Hackney Carriage within the limits of said Town and hereby certifies that he is connected with no person, firm or corporation engaged in the Hackney Vehicle business other than the employer stated herein.

PRINT OR TYPE PLEASE

Full Name ..... Date of Birth.....

Address..... Place of Birth.....

Home Phone #.....Citizen?.....

Social Security # .....Mass Operator's License #.....

Height.....Weight.....Eyes.....Hair.....Complexion.....

Father's Name..... Mother's Maiden Name.....

Marital Status..... Maiden Name (spouse's if married).....

Date of Issue, Latest Hackney License.....

Current Employer..... Address.....

Previous Employer..... Address.....

Are you afflicted with any disease or infirmity that might make you an unsafe or unsatisfactory driver?

If so, please explain.....

Has your license to operate a motor vehicle ever been suspended or revoked?..... If so, please explain

.....

Have you been a defendant in a criminal action other than parking violations in which you were not

acquitted?.....If so, please explain.....

.....

Are you a registered sex offender ..... If so, where?.....

I certify that the statements made herein are to the best of my knowledge and belief true.

Signature of Applicant