

***CITY OF BROCKTON
LICENSE COMMISSION***

*City Hall, 45 School Street
Brockton, Massachusetts 02301
Tel: (508) 580-7805 Fax: (508) 941-0204*

CITY OF BROCKTON

TAX CERTIFICATION

I certify under the penalties of perjury that I, to my best knowledge and belief, have paid all City of Brockton tax obligations and municipal charges on the property where this license is being applied for.

Name of Business: _____

Location: _____

Signature of Individual

Signature of Corporate Officer

Date

Title