TOWN OF NEEDHAM

MOTOR VEHICLE
DEALER CERTIFICATION FORM

Class II License

This is to certify that I received a copy of MA General Law, Chapter 90, Section 7N 1/4 and have access to repair facilities (named below) which are in accordance with Regulation 16.02 of the Regulations of the Registry of Motor Vehicles pertaining to specifications for repair facilities.

Name of Used Car Business: _____

Location of Business: _____

Signature of individual owner
or corporate officer: _____ Date: _____

Name of Repair Facility: _____

Location of Repair Facility: _____

License Number of Repair Facility: _____

Owner of Repair Facility: _____

Telephone Number of Facility: _____