



# CAMBRIDGE LICENSE COMMISSION

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**FEE:** [SEE FEE SCHEDULE](#)

## JITNEY LICENSE APPLICATION

Corporate Name: \_\_\_\_\_ Tax ID No.: \_\_\_\_\_  
Doing Business As (d.b.a): \_\_\_\_\_  
Owner's Name: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Proposed Days/Hours of Operation:

Sunday: \_\_\_\_\_ Thursday: \_\_\_\_\_  
Monday: \_\_\_\_\_ Friday: \_\_\_\_\_  
Tuesday: \_\_\_\_\_ Saturday: \_\_\_\_\_  
Wednesday: \_\_\_\_\_

Proposed Number of Vehicles: \_\_\_\_\_ Proposed Number of Drivers: \_\_\_\_\_

Address where vehicles will be garaged: \_\_\_\_\_

Name of Drivers: (use an additional sheet if necessary):

\_\_\_\_\_  
\_\_\_\_\_

Please describe the service being provided, to whom and provide the route and stops:

*The undersigned, being the owner/holder/manager of the license, hereby certifies under the pains and penalties of perjury, that: the information above is true accurate to the best of my understanding and belief.*

Print Name: \_\_\_\_\_ Relation to Business: \_\_\_\_\_

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

Telephone/Cellphone: \_\_\_\_\_ Email: \_\_\_\_\_

**For Official Use Only**

Fee Total: \_\_\_\_\_

Granted: \_\_\_\_\_

Denied: \_\_\_\_\_

Conditions/Notes: \_\_\_\_\_