



**City of Chelsea**  
**LICENSING COMMISSION**  
 City Hall, 500 Broadway  
 Chelsea, MA 02150

**Deborah A. Clayman**  
 City Clerk

Telephone: 617-466-4050  
 Fax: 617-466-4059  
 dclayman@chelseama.gov

**CONSTABLE LICENSE APPLICATION**  
 (pursuant to MGL, c. 41, s. 91D)

- 1) *All statements in this application shall be made under oath.*
- 2) *False statements knowingly made in this application may result in rejection of the application or the removal of the person from office after being appointed.*
- 3) *Incomplete applications will not be processed.*

Name: \_\_\_\_\_

Residential address: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home telephone, including area code: \_\_\_\_\_

Business address: \_\_\_\_\_

Business telephone: \_\_\_\_\_

Date/Birth: \_\_\_\_\_ Place/Birth: \_\_\_\_\_

Social security #: \_\_\_\_\_ Driver license #: \_\_\_\_\_

License to carry firearms number: \_\_\_\_\_ Yes \_\_\_\_\_ No Date issued: \_\_\_\_\_

Issuing authority city/town: \_\_\_\_\_

Has your license to carry firearms ever been suspended: \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

Have you ever been the subject of any criminal complaints: \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

Have you ever been a constable in any other city/town: \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you ever been denied the right to become a constable: \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, explain why, in what city/town, and date: \_\_\_\_\_  
\_\_\_\_\_

Past employment (list three (3), including address and telephone numbers):

1) \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_

2) \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_

3) \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_

Signatures of five (5) reputable citizens of the city or town of your residence, **one of whom shall be an attorney-at-law**, with a letter of recommendation from each:

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

4) \_\_\_\_\_

5) \_\_\_\_\_

Reason for seeking constable appointment: \_\_\_\_\_

\_\_\_\_\_  
(Applicant's signature)

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

Commonwealth of Massachusetts \_\_\_\_\_, ss

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, the above named person personally appeared before me and made oath that the foregoing statement is true.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Commission Expiration Date

Return application to Deborah A. Clayman, City Clerk, City Hall, 500 Broadway, Room 209, Chelsea, MA, with the following:

- 1) Five (5) letters of recommendation, as referenced above;
- 2) CORI Request Form.
- 3) Application fee in the amount of \$50 (non-refundable), payable to the City of Chelsea (**check or money order only.**)

**Upon application approval, you will be required to provide the following:**

- 1) Constable's Bond in the amount of \$5,000;
- 2) Two (2) passport-size color photographs;
- 3) Licensing fee in the amount of \$450 (three year licensing period), payable to the City of Chelsea (**check or money order only**). If licensing period is less than three year period, license fee will be pro-rated.

\_\_\_\_\_ Approved \_\_\_\_\_ Denied

\_\_\_\_\_  
(Chief of Police)

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