



# CITY OF OLD TOWN

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

## LICENSE APPLICATION

**Victualer's**  **Liquor**  **Lunch Wagon**  **Peddler's**  **Other**  \_\_\_\_\_

### APPLICATION TYPE

New  Renewal  Applicant(s) Initials \_\_\_\_ \_

Business Name
Applicant/Contact
Business Address
Mailing Address
Telephone #
Email

**Please read, sign, and date.** *I hereby agree to operate the above in accordance with the laws of the State of Maine and the Ordinances of the City of Old Town.*

_____ Signature of Individual	_____ <i>If Partnership, Signature of Member</i>	_____ Date
_____ <i>If Partnership, Signature of Member</i>	_____ <i>If Partnership, Signature of Member</i>	_____ Date
_____ <i>If Corporation, Signature of Authorized Officer</i>		_____ Date

This application will be presented to the Municipal Officers, for approval or disapproval, at their meeting on \_\_\_\_\_.

License Fee Paid \$      Date Advertised      Date on Agenda

Municipality of Old Town, Penobscot County, SS

Application Received By      Date