



Town of Middleton
Memorial Hall
48 South Main Street
Middleton, Massachusetts
01949-2253
978-777-3617
www.middletonma.gov

Application for Entertainment License

Section 1: Applicant information: New _____ Transfer _____ Other _____

Name of Owner (Licensee): _____

Owner is a: Corporation _____ Association _____ Partnership _____ LLC _____

Sole Proprietor (i.e. individual) _____ Non-Profit Corporation _____

Owner's Address: _____
Street Address (no P.O. Boxes), City, State and Zip Code

Telephone _____ Mobile or Other _____

FID/SS No. of Owner (Licensee): _____

Business Name (DBA name, if different from owner): _____

Address of Premises: _____

Telephone of premises: _____

Manager of Record: _____

Manager's Telephone _____

Section 2: Person (attorney if applicable) who may be contacted concerning this application

Name: _____

Address: _____
Street Address (no P.O. Boxes), City, State and Zip Code

Telephone No.: _____ Cell phone No.: _____

Section 3: Type and number of entertainment devices to be offered (check all that apply):

<input type="checkbox"/>	Juke Box	<input type="checkbox"/>	Radio	<input type="checkbox"/>	Television
<input type="checkbox"/>	Dancing by patrons	<input type="checkbox"/>	Dancing by entertainers	<input type="checkbox"/>	Recorded Music
<input type="checkbox"/>	Live Music	<input type="checkbox"/>	Amplification System	<input type="checkbox"/>	Play
<input type="checkbox"/>	Moving Picture Show	<input type="checkbox"/>	Floor Show	<input type="checkbox"/>	Light Show
<input type="checkbox"/>	Theatrical Exhibition	<input type="checkbox"/>		<input type="checkbox"/>	
<input type="checkbox"/>	any other dynamic audio or visual show, whether live or recorded (please specify)				

Section 4: Please list the hours that Entertainment will be offered.

	OPEN	CLOSE
MONDAY		
TUESDAY		
WEDNESDAY		
THURSDAY		
FRIDAY		
SATURDAY		
SUNDAY		

Section 5: Fees (check or online at UniPay <https://unipaygold.unibank.com/customerinfo.aspx>)

Checks made payable to: **Town of Middleton**

Entertainment License	\$10.00 per license
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Licenses are \$10 for an annual renewal every November.

Section 6: Has the Corporate applicant paid all due and owing Massachusetts Taxes?

Yes _____ No _____ Explain: _____

Section 7: Please include floor plan showing exact location for requested entertainment devices.

License Name _____

I hereby swear that under the pains and penalties of perjury that the information I have given in this application is true to the best of my knowledge and belief.

By _____ Date _____
(Manager/Owner Signature)