

TOWN OF SCITUATE



600 Chief Justice Cushing Hwy.
Scituate, Massachusetts 02066
Telephone (781) 545-8740

APPLICATION FOR LICENSE

Date: _____

To the Licensing Authority:

In accordance with the provisions of the Statutes relating thereto, application for a license is hereby made:

Name: _____
(Full name of person, firm or corporation)

Business Address: _____

Tax ID #: _____

License Type(s): _____

(Common Victualler, Class I, II or III, Bowling, Electronic Games, Innkeepers, Entertainment, Taxi Service, Septage Disposal, Hawker Peddler, Bed and Breakfast, Movie Theater, etc.)*

Name of Applicant: (please print) _____

Title: _____

Signature of Applicant: _____

Home Address (if applicable) _____

Telephone: _____

Email: _____

**LICENSE RENEWALS MUST BE MADE PRIOR TO DECEMBER 31ST EACH YEAR.
FAILURE TO DO SO WILL REQUIRE APPLICATION FOR A NEW LICENSE.**

**Hawker Peddler Licenses are the exception and will be renewed by March 30th each year.*

Office Use: License (renewed/new) _____ (date)