



TOWN OF TOPSHAM

Town Clerk's Office
100 Main Street, 04086
ldumont@topshammaine.com
(207)725-1719 Fax: 725-1733

APPLICATION FOR LICENSE OR PERMIT

Please complete:

Type of Business:

- Partnership- Partner's Names: _____
- Corporation- Corporation Name _____
Incorporation Date: _____ Incorporation State _____

Type of License _____

New License: Opening Date _____ **Renewal**

Business Name: _____ E-Mail: _____

Business Address: _____ Business Phone Number _____

Name of Contact Person: _____ Contact's Phone Number _____

Mailing Address for Correspondence: _____

Signature of Applicant: _____ Date: _____

**Any information provided in this application, which is found to be false will result in denial or revocation of this license-
Per 1 M.R.S.A.17-A§ 453**

SELECT TYPE OF LICENSE YOU ARE APPLYING FOR ON BACK OF THIS PAGE

Corporations Please Complete:

Address of Incorporation: _____ Phone#: _____

| Name of Corp. Officer, Owner, or Partners: | Title | Address | % of Stock ownership |
|--|-------|---------|----------------------|
| _____ | _____ | _____ | _____ |

Office Use Only (Make copy of signed State application for office file)

Type of License: _____ Permit Fee \$ _____ Paid Advertising Fee \$ _____ Paid

For Peddler-Police Chief sign off required: _____

Required Approvals for Special Amusement and new Liquor license: BOS _____ CEO _____ Fire _____ Police _____

Public Hearing _____ Posted _____ Public Notice Dates _____ Copy of current State liquor license _____

Town Clerk Signature _____

Comments:

Complete back

License Fees & Schedule: Please check the type of license you are applying for

Entertainment- live music \$50 + 3 day Public Hearing advertising fee

Special Amusements (Title 28-A§1054) Expires annually with liquor license, provide copy of current state certificate with renewal application, requires annual Public Hearing

*** Include supplemental pages 3 &4**

*Describe in detail the type and nature of entertainment, the room or rooms to be used, hours of operation of entertainment

*Provide a diagram of room to be used

Pinball/Video machines –Ch. 6 Art. 7 §71-16, 17 & 18

Number of machines/ Pinball _____ Number of machines/ Video _____

*Copy of application to Police Department

Victualer (Food Service Establishment to include Bed and Breakfast) Expires May 31st

Describe food to be sold _____

FSE with- out Liquor **\$50** Copy of State Certificate required

FSE with Liquor (Title 28-A§652) **\$100** Copy of State Certificate required (requires Public Hearing on new applications)

FSE Outside Liquor Service Extension of Premise

(deck, lawn) Municipal approval required - submitted in writing to Bureau of Liquor Enforcement

Describe food to be sold _____

Peddler (The selling of tangible commodities having no established or fixed place of business in Topsham)

\$25 Resident \$50 Non-Resident \$25 - #___ of months (up to 3 months \$25)

Description of nature of business and goods to be sold _____

Name and address of employer and evidence of employment

Vehicle Description: Make _____ Model _____ Year _____ Color _____ License plate # _____

Photo of applicant taken with- in 60 days of application

Description of location if stationary and letter of agreement from owner of record

Names of two reliable property owners, references, or other evidence of good character

A statement of whether the applicant has been convicted of any crime, misdemeanor or violation of any municipal ordinance, nature of the offense, punishment or penalty assessed

Taxicabs/Vehicles for Hire 30A- §3009(1) (F) **\$50 per vehicle** Expires April 1st each year.

Number of Taxicabs for which license is desired _____

Taxicab Driver \$25 annually

SUPPLEMENTAL APPLICATION IS REQUIRED

***Supplemental page for Special Amusement Permit**

Describe in detail the type and nature of entertainment:

Describe in detail the room or rooms to be used under this license:

List the hours of entertainment

DIAGRAM

Topsham Board of Selectmen

Signatures:

Date: _____