Town of Sterling

Board of Selectmen

PERMIT # _____

PERMIT FEE _$25.00

FEE PAID: _____

COMMON VICTUALLER

LICENSE APPLICATION

Name:_____

(Name of Business or Organization or Individual)

Person: _____

(Person Responsible for License)

Address:_____

(Street and Number)

_____

(City or Town and Zip Code)

Phone:_____

Cell Phone:_____

Email: _____

Location and Phone Number where license is to be used:

Address:_____

(Street and Number)

_____

(City or Town and Zip Code)

Phone:_____

THIS LICENSE EXPIRES ON DECEMBER 31ST OF EACH YEAR

_____ _____

Signature of Licensee Print Name

_____ _____

F.I.D OR Social Security Number Date:

One Park Street, Butterick Building · Sterling MA 01564 · 978 422 8111 x2316 Fax 978-422-0289