

## SPECIAL ENTERTAINMENT APPLICATION

License Type:                   \_\_\_ \$100 Application Fee  
                                     \_\_\_ \$50 Public Records Checks per name  
                                     \_\_\_ \$80 Advertisement Fee For First Time Liquor License Applicants Only

**\*\*\*NOTE: Must Attach State Liquor License Application**

Owner: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Owner's Home Address: \_\_\_\_\_

Residence(s) for last five years: \_\_\_\_\_

Name of Business: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Location of Business: \_\_\_\_\_

List Applicant / Partners / Corporate Officers:

Name: \_\_\_\_\_ | Name: \_\_\_\_\_ | Name: \_\_\_\_\_

Address: \_\_\_\_\_ | Address: \_\_\_\_\_ | Address: \_\_\_\_\_

Town/State: \_\_\_\_\_ | Town/State: \_\_\_\_\_ | Town/State: \_\_\_\_\_

Birthdate: \_\_\_\_\_ | Birthdate: \_\_\_\_\_ | Birth date: \_\_\_\_\_

Has applicant's business license ever been revoked: \_\_\_\_\_

If so, why? \_\_\_\_\_

\_\_\_\_\_

Has any applicant / partner / corporate officer ever been convicted of a felony? \_\_\_\_\_

If so, describe specific circumstances \_\_\_\_\_

\_\_\_\_\_

Does the establishment have a valid liquor license? \_\_\_\_\_ If so, when does it expire? \_\_\_\_\_

I, \_\_\_\_\_(name), \_\_\_\_\_ (title) is authorized to sign on behalf of said business, and further declare that the forgoing information is accurate and true to the best of my knowledge and belief, and that the applicant does hereby acknowledge a public records check may be conducted.

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

Business Name: \_\_\_\_\_

### INSPECTION REQUIRED BELOW

Notice of Compliance (By Selectmen's Request): I, **Dennis Douglass, Code Enforcement Officer** for the Town of Lisbon hereby certify I have inspected the above establishment and found the premises to be in compliance with applicable life safety codes.

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

**NOTE: State Liquor License Application must be completed and attached to this Special Entertainment Application**

**APPLICANT MUST HAVE COMPLETED TO HERE BEFORE FILING**

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*For Office Use Only*

\_\_\_ **Public Records Check Completed.**

*Notice of Compliance (By Selectmen's Request): I, **Marc Hagan, Police Chief** hereby certify I have reviewed the application and public records check and recommend application for licensing.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
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### INFORMATION

The Councilors are the Municipal Licensing Board. All Special Entertainment application requires a public hearing each time. Public records checks can take up to three or more weeks to process. Complete applications contain the CEO and Police Chief signatures. Councilors meet on the first and third Tuesdays of the month. Complete application and fees paid are required prior to the Council meeting. Meetings are held at the Town Hall at 7:00 PM in the conference room.

**SUGGESTED CONTACTS:**

353-3000 Ext 112... Town Clerk	624-9693 .....State Sales Tax Division
353-3007..... Town Office Fax	624-7736.....Bureau of Corporations
353-3000 Ext 111... Deputy Code Enforcement Officer	624-7220.....Bureau of Alcohol Beverages
353-2500..... Police Department	287-3841.....Agriculture Dept– Bakery Licenses
333-6601 Ext 1154..Health Officer	624-6550.....Marine Resources
287-5671..... State Health Inspection Dept.	1-800-872-3838..Business Answers