

TOWN OF WINCHENDON

OFFICE OF THE TOWN MANAGER

109 FRONT STREET, WINCHENDON, MASSACHUSETTS 01475-1758

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manager@town.winchendon.ma.us

LICENSE/PERMIT/RENEWAL APPLICATION

Date: _____

Name: _____ Telephone: _____

Address: _____

Business Name: _____

Address: _____ Telephone: _____

Social Security or Business ID number _____

Type of License/Permit Requested: Entertainment Permit

Additional Information: _____

Signature of Applicant: _____

OFFICE USE ONLY

Fee: _____

Date: _____

To: Police Department, Fire Department, Building Commissioner/Zoning Enforcement Officer,
Conservation Commission, Board of Health, Tax Collector, Planning Director, Town Clerk

Please offer your comments regarding the above application. A hearing is scheduled before the Board of
Selectmen on _____ . Your response is requested by _____

Signed: _____

TOWN OF WINCHENDON

APPLICATION FOR LIVE ENTERTAINMENT LICENSE

I _____ hereby make application under the provisions of Massachusetts General Law, Chapter 140, Section 183a for a Live Entertainment License.

Applicant _____ Manager _____

Address (premises where entertainment is located) _____

Type of Entertainment (check all applicable)

- Concert
- Dance
- Exhibition
- Cabaret
- Public show
- Car show

Entertainment will include (check all applicable)

- Dancing by patrons
- Dancing by entertainers or performers
- Recorded or live music
- Use of an amplification system
- Theatrical exhibition, play, or motion picture
- Floor show of any description
- Light show of any description
- Other dynamic audio or visual show, live or recorded
- Bouncy House
- Tent Size _____ Contact the Building Dept. for tent permit 978-297-3537
- Other (please describe) _____

Signed _____ Date: _____

Licenses are valid from January 1st to December 31st.

Licenses will cover only types of entertainment included in application

License fee is \$50.00 payable at issuance.

Checklist/Section 181 License

What activity is proposed?

What Days/Dates:

Where will it be conducted / exact locations on and off site of any:

Stage:
Performers/Participants:
Participants:
Observers:
Parking:
Vehicular Traffic:
Pedestrian Traffic:
Sanitary Facilities:
Food Service:
Other Service:

Location of nearest public streets, homes and businesses:

What provision for security/crowd control:

Traffic direction / pedestrian safety:

Noise Levels: (High, Moderate, Low)

What type of Music: (Live band, solo performers, etc.?)

What type of equipment/amplifiers/microphones, etc.

Other health / safety concerns
