



TOWN OF DALTON

Town Hall
462 Main Street
Dalton, MA 01226-1601

Telephone (413) 684-6111

Fax (413) 684-6107

ENTERTAINMENT LICENSE APPLICATION

Yearly License \$100,00 One-Day License \$40,00

Business Organization

Business Name (d/b/a): _____
Address of Premises: _____
Phone Number of Premise: _____
Manager of Record: _____

Type of Entertainment Applying For (Check all that apply)

- | | | |
|--|---|---|
| <input type="checkbox"/> Concert | <input type="checkbox"/> DJ | <input type="checkbox"/> Exhibition |
| <input type="checkbox"/> Jukebox | <input type="checkbox"/> Television | <input type="checkbox"/> Audio Device (Radio, Mp3 player, etc.) |
| <input type="checkbox"/> Recorded Music | <input type="checkbox"/> Dancing by Patrons | <input type="checkbox"/> Dancing by Entertainers |
| <input type="checkbox"/> Live Music/Band | <input type="checkbox"/> Play | <input type="checkbox"/> Amplification System |
| <input type="checkbox"/> Moving Picture Show | <input type="checkbox"/> Floor Show | <input type="checkbox"/> Theatrical Exhibition |
| <input type="checkbox"/> Karaoke | <input type="checkbox"/> Light Show | <input type="checkbox"/> Any other audio or visual show,
whether live or recorded specifically |
| <input type="checkbox"/> Cabaret | <input type="checkbox"/> Other | |

Please state whether as part of the entertainment, any person will be permitted to appear on the premises in any manner or attire so as to expose to public view any portion of the pubic area, anus or genitals, or any simulation thereof, or whether any female person will be permitted to appear on the premises in any manner or attire as to expose to public view any portion of the breast below the top of the areola, or any simulation thereof. YES NO

Operation

Proposed Capacity of Premise: _____
Number of Restrooms: _____
Number of Egresses (exits): _____
Hours of Operation on AB/CV License: _____
Proposed Date & Hours of Entertainment: _____

A FLOOR PLAN OF THE ESTABLISHMENT MUST BE SUBMITTED WITH THIS APPLICATION

Please state whether applicant is applying for indoor or outdoor entertainment.
**If outdoor, applicant must provide proof of ownership or lease for outdoor use*

INDOOR OUTDOOR BOTH

Please describe what efforts the applicant/business has taken to reduce the impact of noise from entertainment on neighboring residents and businesses, and/or comply with the Dalton noise bylaw

Primary Contact Information

Name _____
Address _____
Phone Number _____
Email _____
Relationship to Establishment _____

I hereby swear under the pains and penalties of perjury that the information I have given is true to the best of my knowledge and belief.

Signature of Applicant _____
Date of Application _____

To the best of our knowledge and belief, We, the undersigned, concur that the event/s outlined above meets all local, federal and state law regulations, by-laws, rules and codes, pertaining to our area of responsibility.

Police Chief Date

Fire Chief Date

Building Commissioner Date

Board of Health Agent Date