



TOWN OF DALTON

Town Hall
462 Main St. Dalton, MA 01226
Phone: 413-684-6111

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: _____
Will Food be Served*: _____ Yes _____ No

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

Street Address, Town, State

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.

****SEE NEXT PAGE FOR CONTACT INFORMATION****

Police Chief

Date

Fire Chief

Date

Building Commissioner

Date

*Board of Health Agent

Date

(Only required if food will be served)

FOR OFFICE USE:

Filed:

Fee Paid:

Hearing Date

AUTHORIZED SIGNATURE CONTACT INFORMATION

Police Chief, Deanna Strout

P# 413-684-0300

dstROUT@dALTON-mA.gov

Located in Police Station-
Bottom floor of Town Hall

Fire Chief, Christopher Cacat

P# 413-684-6119

cccACHAT@YAHOO.com

Located at Fire House, 20 Flansburg Ave

Building Commissioner, Brian Duval

P# 413-684-6111 Ext. 301

bDUVAL@dALTON-mA.gov

Top floor in Town Hall, 462 Main St

Office Hrs: Monday- 8:00AM-4:00PM

Tuesday- 8:00AM-1:00PM

Wednesday- 8:00AM-4:00PM

Board of Health - Colin Sykes, Health Agent

P#: 413-684-6111 Ext. 305

BOHAssistant@dALTON-mA.gov