

APPLICATION FOR TOWN LICENSE

Please complete this application and submit for approval to the Springfield Town Clerk along with \$10.00 per application made payable to the Town of Springfield.

Type of License: (Please check one)

Arcade Bowling Alley Eating Place Pool Room Vendor Theater

Please describe nature of business:

Licensee Name(s):

D/B/A:

Address of Business:

Address for Mail:

***Email address:**

Phone Number:

Vendors:

Name of event in which you are participating or vending location

Driver's License State and Number:(Please attach a copy of each licensee's driver's license)

Other State Licenses Held:(Applicants for Eating Place license(s) must include their State of Vermont-Board of Health ID #.)

***If email is provided, License will be emailed so that you can print it and post it at your place of business upon receipt, otherwise License will be mailed.**