

SPECIAL AMUSEMENT PERMIT



Applicant:	
Address:	Pnone:
Business Name:	Business Phone:
Location of Entertainment:	
Nature of Entertainment:	
Hours of Entertainment:	
Date Liquor License will expire:	(Attach Copy)
Have you ever had a license to conduct the business?	
period of time and, if so, describe in detail:	
ignature of Individual	Member of Partnership
ignature of Individual ame of Corporation	Member of Partnership Duly Authorized Officer

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I have read and understand the rules and regulations of the special amusement Ordinance dated April 26, 1979 and amendments of April 26, 1979; July 7, 1992; August 4, 1992; June 17, 1997; August 5, 1997 and July 22 nd 2014.	
	Dated:
York County	Town of Old Orchard Beach, Maine
On This Date,	the undersigned Municipal Officers of the Town of
Old Orchard Beach hereby certify the hearing as required by law and here	hat we have given public notice on this application and held public
Signed by Old Orchard Beach Town	Council: