License Fee		Copies To: Fire
Applic. Fee		Police
Date Paid	T	Health Building/Zoning
	TOWN OF HOLDEN MASSACHUSETTS	Wiring
OFFIC	E OF THE BOARD OF SELE	ECTMEN
		Date
The undersigned hereby app	olies for a License in the Towr	of Holden in accordance with the
rules and regulations made under t	the authority of the General L	aws relating thereto.
NAME OF APPLICANT	 	
ON BEHALF OF		
	(nam	e of organization)
TYPE OF LICENSE		
PURPÖSE		
LOCATION		
DATE		
HOURS OF OPERATION		
PERSON IN CHARGE		
SIGNATURE OF PROPERTY OWNER		**************************************
	· (1	if applicable)
By(signature)		(address)
(print or type name)	Т	el. No. between 8:30 am - 4:30 pm
••••••	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •
	DEPARTMENTAL RESPONS	SE TOTAL TOT
(Circle one) APPROVED		NOT APPROVED
Subject to the following conditions (if any):		
· · · · · · · · · · · · · · · · · · ·	Title	
	Date	
· · · · · · · · · · · · · · · · · · ·		
	•	
Attach a separate memorandum if appropri	riate	