

TOWN OF CHELMSFORD
Special and One Day License – Application Form
(M.G.L. Ch. 138 § 14)
ABCC Regulations: Special License § 1.1

Please check one:

_____ Application by a manager for one day special license for the sale of **BEER & WINE** to be drunk on the premises. (for profit or non-profit)

X_____ Application by the manager of an organization for one day special license for the sale of **ALL ALCOHOLIC BEVERAGES** to be drunk on the premises. (nonprofit organizations only) Please attach appropriate documentation pertaining to nonprofit status.

DATE OF EVENT BEING APPLIED FOR: **June 10 2017**

1. Full name, address and phone number(s) of the organization making this application.
American Legion Vinal Post 313 978 251 4933
2. Full name, address and phone number(s) of manager who shall be responsible for the license:
Edward O'Neil 61 Newfield Street North Chelmsford 01863 978 337 0124
3. Is the applicant requesting the license TIPS Certified? If Yes, please attach appropriate documentation.
YES X NO _____
4. Nature of Event **Fundraiser for Cancer** Number of Attendees **99**
5. Location where event shall be held: **American Legion North Chelmsford**
6. Has the approval of the property owner been obtained? YES X NO _____
7. Time of event: FROM **12 o'clock PM** TO **8 o'clock PM**
8. Exact times of the license: (alcohol on premises) FROM **12 o'clock PM** TO **8 o'clock PM**
9. Has the applicant been issued similar licenses in Chelmsford in the past 12 calendar months?
YES X NO _____ If so, when? **AUGUST 2016**
10. Does the applicant have an application for license to sell alcoholic beverages pending before the licensing authority of the Town of Chelmsford? YES _____ NO X
11. Please attach a floor plan showing the layout of the room for your event as it pertains to seating.

The applicant hereby states that the applicant has received a copy of the Licensing Authority's regulations pertaining to Special and One Day Liquor Licenses and is aware of and shall comply with all applicable statutes, by-laws and regulations.

 Authorized Representative and Title

5-9-17 Date