

**Application for  
Stonington Special Activity / Amusement Permit  
(Pursuant to 28-A M.R.S.A Sec. 1054)**

**Name of applicant:** \_\_\_\_\_

**If applicant is a corporation, partnership, LLC or other similar entity, provide on an attached sheet the name, address and state of residence of all principals (meaning anyone owning or controlling 10% or more of the applicant).**

**Address of applicant:** \_\_\_\_\_

**Location of licensed premises:** \_\_\_\_\_

**Class of Permit applied for (A-E):** \_\_\_\_\_

**Describe the specific portion of the premises where the special activity/amusement will occur:**

\_\_\_\_\_  
\_\_\_\_\_

**Set forth the specific time periods between which the special activity/amusement will occur:**

\_\_\_\_\_

**Describe the specific activity or amusement for which the permit is requested:  
What type of entertainment is proposed? Will dancing be permitted?**

\_\_\_\_\_  
\_\_\_\_\_

**Has any individual(s), partner(s), majority shareholder(s) of the business entity, seeking to hold this permit, been convicted of a felony or had any similar type of amusement or activity permit denied or revoked within the past ten (10) years by any other municipal or state authority, agency or board? Is so, give the state of conviction for any felony and describe specifically the circumstances of any such denial or revocation giving the state of city and date of such denial or revocation:**

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**Give any additional information to support your request for the permit:**

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**As part of this application process, the individual or business entity seeking the permit herein acknowledges that the Municipal Officers, pursuant to 28-A M.R.S.A Subsection 1054(7) may suspend or revoke the permit applied for herein on the grounds that the activity or amusement constitutes a detriment to the public health, safety or welfare, or violates municipal ordinances or regulations.**

**Give the authority and legal relationship of the applicant signing below to the entity seeking permit:**

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**NOTE: In reviewing this application, the Town relies on the accuracy and truth of the facts represented herein. Any misleading or incorrect information set forth in this application shall be grounds for denial or immediate revocation of the permit issued. By signing this application, the applicant represents the truth of the facts herein stated.**

**DATE OF APPLICATION:** \_\_\_\_\_

**SIGNATURE OF APPLICANT:** \_\_\_\_\_

**FEE: \$50.00 per year**

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**The permit application for the class applied for is:**

**Approved**

**Disapproved**

**Stonington Board of Selectmen** (date) \_\_\_\_\_

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