



**TOWN OF PLAINVILLE
APPLICATION FOR RENEWAL OF LICENSE OR PERMIT
(Automatic Amusement/Entertainment)**

Date: _____

The undersigned hereby applies for a License **RENEWAL** in accordance with the provisions of the Statutes relating thereto

(Full name of person, firm or corporation making application)

(Phone Number)

(Mailing Address)

Location (Street & Number)

Email Address

STATE PURPOSE FOR WHICH LICENSE RENEWAL IS REQUESTED (Check all that apply):

- ☐ Week Day Music (\$20.00)
☐ Sunday Entertainment (\$50.00)
☐ Live Entertainment (\$100.00)
☐ Automatic Amusement (\$20/per machine-maximum \$200). List number and type of devices:

Days and hours of operation:

I certify under the penalties of perjury that I, to my best knowledge and belief, have filed all state tax returns and paid all state taxes required under law.

Signature of Individual or Corporate Officer/Title

Social Security Number or Federal Identification Number

This license or permit will not be issued unless this certification clause is signed by the applicant.

**** Your social security number may be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing or tax payment obligations. Licensees who fail to correct their non-filing or delinquency *will be subject to license suspension or revocation*. This request is made under the authority of Mass.G.L. c. 62C s. 49A.**

FOR OFFICE USE ONLY:

Paid (Y/N): _____ Check # _____ Amount: \$ _____