

TOWN OF KENNEBUNK

SPECIAL EVENT VICTUALER LICENSE APPLICATION

YOU MUST ENCLOSE A COPY OF YOUR CURRENT STATE OF MAINE FOOD SERVICE LICENSE, OR APPROVED DOCUMENTATION BY A STATE OF MAINE INSPECTOR.

APPLICANT(S) INFORMATION

Name(s) in Full – Corporation/Sole Proprie	etorship/Partnership			
Physical Street Address	City / Town	State	Zip	
Thysical Circot / tuarees	City / Touri	Oldio	<u> </u>	
Mailing Address (if different)	City / Town	State	Zip	
Telephone Number				
BUSINESS INFORMATION				
Business Name, d/b/a				
Business Physical Street Address	City / Town	State	Zip	
Mailing Address (if different)	City / Town	State	Zip	
Business Telephone Number		Current License(s) provided		
Special Event		Date of Special Event		
In making application for a Special Evwhich I am licensed, and to follow all				business fo
Applicant's Signature		Date	_	
FOR OFFICE USE ONLY				
Town Manager or Designee Signature		Town Clerk or Designee Signature		
Data Application Received	- Eoo Doid			