



# City of Lynn, Commonwealth of Massachusetts

## APPLICATION ~~ NEW FILING ~~

### ONE-DAY LIQUOR LICENSE

Please enter your organization's information: (Please print all information)

Name of Organization \_\_\_\_\_

Type of Organization \_\_\_\_\_  
(Fraternal, Military, etc.)

Address of Organization \_\_\_\_\_

Telephone Number of Organization \_\_\_\_\_

e-mail address \_\_\_\_\_

#### Details of Event – ALL QUESTIONS TO BE ANSWERED BY APPLICANT

Date of Event \_\_\_\_\_

Type of Event \_\_\_\_\_  
(banquet, concert, picnic, etc.)

How many cases or barrels, etc., of malt beverages or wine are to be sold or given away? \_\_\_\_\_

Hours of Event \_\_\_\_\_

Describe Location of Event \_\_\_\_\_  
\_\_\_\_\_

How many people do you expect? \_\_\_\_\_ Are you charging admission fee? \_\_\_\_\_

I hereby acknowledge that "Any and all alcohol served pursuant to a license granted by the Lynn Licensing Board must be purchased by a wholesaler approved by the Commonwealth of Massachusetts."

I hereby make application for a SPECIAL ALCOHOLIC BEVERAGE LICENSE for the purpose of selling and dispensing wines and malt beverages permitted by law.

I certify that I am a citizen and that I will be responsible for the proper observance of the laws governing the dispensing of such alcoholic beverages.

I hereby agree to indemnify and hold harmless the City of Lynn and all of its agents, servants and employees from all liability or damages that may arise as a result of my utilization of this Signed License.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Home Address of Applicant

#### OFFICE USE ONLY

\_\_\_\_\_  
Licensing Board Approval

\_\_\_\_\_  
\$100.00 Fee Paid

Paid by:  Cash  Check  Credit Card

Clerk's Initials: \_\_\_\_\_