

# Town of Long Island



P.O. Box 263  
Long Island, Maine 04050  
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[www.townoflongisland.us](http://www.townoflongisland.us)

## FEE \$100 PER DAY APPLICATION BYOB / LIQUOR SUPPLIED FUNCTION

\*Certificate of Liability must be attached\*

Name of Applicant \_\_\_\_\_ Phone / Cell # \_\_\_\_\_

Address \_\_\_\_\_

If Organization, name of person responsible \_\_\_\_\_

Birth date of Applicant(s) \_\_\_\_\_

Location of function \_\_\_\_\_

Address \_\_\_\_\_

Describe specific area to be licensed \_\_\_\_\_ main room/ porch / grounds \_\_\_\_\_

Date of function \_\_\_\_\_ Time: From \_\_\_\_\_ to \_\_\_\_\_

Description of Event \_\_\_\_\_ #of people attending \_\_\_\_\_

\_\_\_\_\_  
Signature of Person Responsible \_\_\_\_\_ Dated \_\_\_\_\_

NOTE: THIS APPLICATION MUST BE SIGNED BY THE INDIVIDUAL OR DULY AUTHORIZED OFFICER OF THE CORPORATION EXECUTING THE APPLICATION AND APPROVED BY THE MUNICIPAL OFFICERS AND FILED WITH THE "TOWN OF LONG ISLAND" 72 HOURS IN ADVANCE OF SAID EVENT OR GATHERING ACCOMPANIED BY A FEE OF \$100.00 PER DAY.

Cumberland County, ss Dated at: Long Island, Maine on \_\_\_\_\_ Date \_\_\_\_\_

The undersigned Municipal Officers, Town of Long Island, Maine 04050

TOWN SEAL

\_\_\_\_\_  
Town Clerk Signature

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