



OFFICE OF THE BOARD OF SELECTMEN

## TOWN OF NORWELL

345 MAIN STREET, P O BOX 295

NORWELL, MA 02061

781-659-8000 FAX 781-659-7795

### APPLICATION FOR SPECIAL LICENSE FOR THE SERVING ONLY OR THE SALE OF ALL ALCOHOLIC AND/OR WINES & MALT BEVERAGES

FEE: \$35.

Please complete all areas. Applications not completely filled out will be returned to Applicant.  
Applications should be received by the Board of Selectmen's office at least three weeks prior to event.

APPLICANT/CATERER: \_\_\_\_\_  
(Insurance Holder)

APPLICANT'S ADDRESS: \_\_\_\_\_

APPLICANT'S TELEPHONE NUMBER: \_\_\_\_\_

FAX #: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

LOCATION OF EVENT: \_\_\_\_\_

EVENT(S): \_\_\_\_\_

SELLING ( ) SERVING ONLY ( )

DATE(S) OF EVENT(S): \_\_\_\_\_

HOURS OF SALES: \_\_\_\_\_

TYPE OF BEVERAGE: ALL-ALCOHOLIC ( ) WINES & MALT ONLY ( )

\_\_\_\_\_  
(Applicant's Signature)

NOTE: A check for the appropriate fee, made payable to the TOWN OF NORWELL, should be submitted with the completed application.

**PROOF OF LIQUOR LIABILITY**-Along with the Application, the Applicant must submit a **Certificate of Insurance** showing liquor liability coverage in the amount of at least **\$1,000,000 each occurrence** naming the **Town of Norwell as Additional Insured for General Liability and Liquor Liability and naming Town of Norwell as Certificate Holder.** Also proof of **Workmen's Compensation.**

This requirement applies only to the use of Town owned or maintained property.

**NO LICENSE WILL BE ISSUED WITHOUT SUCH PROOF.**

APPROVED BY: Peter Morin, Town Administrator Yes ( ) No ( ) Date: \_\_\_\_\_

RESTRICTIONS: \_\_\_\_\_