



**Town of Wrentham
Board of Selectmen**

79 South Street Wrentham, MA 02093

Tel: (508) 384-5400

Email: BOS@wrentham.gov

The following is required to obtain a Common Victualler License in the Town of Wrentham:

Common Victualler Application

Including the following documentation:

- a sketch/layout of the interior of the building;
- any lease or right for occupancy; and
- proof of worker's compensation certificate/policy

Please be advised an Application for Food Service must be filed with the Board of Health.

If your establishment is planning on having entertainment in any capacity, please request an entertainment application as well.



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APPLICATION FOR COMMON VICTUALLER'S LICENSE

\$90.00 fee as well as 10% Administrative Fee payable to the Town of Wrentham with application.

Date: _____

Name of Business: _____

Address of Business: _____

Type of Business: _____

Telephone Number of Business: _____

Federal Identification Number: _____

Hours of Operation: _____

Name of Applicate/Manager: _____

Address of Applicate: _____

Telephone Number: _____

Email Address: _____

Please include the following documents:

- Proof of Worker's Compensation Certificate/Policy
- A sketch & layout of interior of building
- Any lease documents
- A copy of application filed with the Board of Health

Signature of Applicant

Please be sure to contact the Board of Health and Building Department for their license requirements prior to handing this application to the Selectmen's Office.

FOR OFFICE USE ONLY

Board of Selectmen Fee Paid: _____ Approved by the Board of Selectmen on: _____ day of _____ 20__

Following Provided Comment:

____ Building Commissioner ____ Fire ____ Treasurer/Collector ____ Police
____ Public Workers ____ Town Administrator ____ Board of Health



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Bylaw Article 22 – Certification of Tax & Fee Payment

Name of Business: _____
Request License to: _____
At: _____
Hours of Operation: _____

Name and Address of Property Owner, if not the same as Applicant:

Signature of Property Owner Allowing the Use of the Property for this Purpose: _____

Applicant hereby certifies under the pains and penalties of perjury that all taxes and/or charges owed to the Town of Wrentham have been paid.

Signature of Applicant: _____
Address: _____
Telephone Number: _____
Email: _____

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For Office Use Only:

Sent to the Following for Comment:

___ Building Commissioner
___ Fire Chief
___ Police Chief

___ Treasurer/Collector
___ Public Works Superintendent

Abutter(s) Notified, if Required: Y / N

Board of Selectmen:

___ Approved ___ Denied on ___ day of _____ 20___

Conditions/Stipulations:



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I certify under the pains and penalties of perjury that I, _____, to the best of my knowledge and belief, have filed all State Tax Returns and paid all State Taxes required under the law.

Signature of Individual or
Corporate Officer (Mandatory Corporate Name)