



Town of Sterling

Select Board

PERMIT # _____
PERMIT FEE _\$25.00
FEE PAID: _____

COMMON VICTUALLER LICENSE APPLICATION

Name: _____
(Name of Business or Organization or Individual)

Person: _____
(Person Responsible for License)

MAILING Address: _____ **Phone:** _____
(Street and Number)

(City or Town and Zip Code) **Cell Phone:** _____
Email: _____

Location and Phone Number where license is to be used:

Address: _____ **Phone:** _____
(Street and Number)

(City or Town and Zip Code) **Email Address** _____

This License expires on December 31 of each year or License Specified Date

Specified Date

Signature of Licensee

Print Name

F.I.D OR Social Security Number

Date: