



ONE DAY ALCOHOLIC BEVERAGES LICENSE APPLICATION

To the Licensing Authorities of Acton:

The undersigned hereby makes application for a one day liquor license, in accordance with the provisions of the General Laws, and amendments thereto.

It is strongly recommended that the application and fee be submitted to the Town Manager's Office no later than 3 weeks prior to the event date.

Wine/Malt Only: \$25.00, non-refundable Payable to: Town of Acton, check only

Name of Applicant/Organization: Sarah Kostanski

Location of Event: Nara Park- New Pavillion Wing #2

Name of Owner on Premises: Town of Acton

1. Name and Description of Event: Birthday party for 3 year old

2. Event Date: 5/22/16

3. Hours of Event (from/to): 12-3pm

4. Expected number of people: 30-40

(if over 50 guests, a TIPS or equivalent trained bartender is required with proof of certification accompanying the application for file)

5. Age range of attendees: 0-85

Name of person making application: Sarah Kostanski

Residential Address: 20 Erlin Rd.

Business Address: Chelmsford, MA 01824

Home Telephone: 413-221-4873 Business/Cell: _____

Email: skaufman1016@gmail.com

Have you ever been convicted for any law violation? (circle one) YES NO

If so, when: n/a

Where: n/a

State briefly: n/a

Signature of Applicant: 

Date: 4/19/16

For Town Use Only	
Police Department:	Approve / Deny
Board of Selectmen	Approve / Deny
TIPS Certification Copy	YES/NO
Comments:	
Check #:	