



TOWN OF JAMESTOWN

Town Clerk's Office
93 Narragansett Avenue
Jamestown, RI 02835
(401) 423-7200 ~ fax (401) 423-7230
jamestownri.net

Holiday License Application

Sunday Sales Fee: \$20.00

License Holder:

Permit for the Period of: March 1, 200 to February 2, 200

Corporate Name: _____

Doing Business As: (dba) _____

Location of Business: _____

Business Phone: _____ RI Retail Tax ID #: _____

Hours of Operation: _____

Business Address/Mailing Address & Phone Number (if different from above):

Partnerships & Corporations: Please list names, addresses & dates of birth for all partners and principal officers/stockholders:

Name Address Date of Birth

Type of Operation: (restaurant, bakery, gift shop, etc.)

Signature of Applicant: _____

All Tax & Water Assessments must be paid to date prior to any known Town Council Action.

Your application will not be acted upon should payment of these be in arrears.

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For Office Use Only

Filing Fee: \$20.00

Paid/Date: _____

Approval: Please Sign & Date

Chief of Police: _____

Fire Chief: _____

Zoning/Building Official: _____

Water & Sewer Clerk: _____

Tax Collector: _____



This application has been **GRANTED/DENIED** by the Jamestown Town Council at a meeting held on the _____ day of _____, 200__ for the period of **March 1, 200__** to **February 2__ , 200__** .

Issued: _____

Kimberly A. Turcone, Deputy Town Clerk

Please display this license in a prominent place at your establishment