

INCORPORATED VILLAGE OF ROSLYN
1200 Old Northern Boulevard
Roslyn, New York 11576
Telephone (516) 621-1961 Fax (516) 621-2171

APPLICATION FOR ENTERTAINMENT PERMIT

Establishment Name _____

Applicant/Principal Name _____

Establishment Address _____

Applicant Residential Address _____

Applicant Telephone Number _____

Applicant Email Address _____

Nature of Business and Hours of Operation _____

Number of Seats _____

Annual Fee \$ _____ (\$500.00)

Board of Health Number _____ Expires _____

NYS Liquor Authority License Number _____ Expires _____

Have there been any material changes in the ownership, lease, or nature and character of the business since your last license renewal? Y/N _____ if yes, Explain: _____

I have read the Zoning Regulations of the Incorporated Village of Roslyn and Chapter 9 of the Village Municipal Code "Licenses and Regulation of Businesses" and I agree to abide by them.

Date: _____ Signature _____

Sworn to before me this _____ day of _____, _____

NOTARY

FOR VILLAGE USE

PERMIT NUMBER _____ **APPROVED ON** _____

FOR YEAR OF _____

AUTHORIZING SIGNATURE _____