



Town of Tisbury

General License Application

Please return this
form with:

All applicable
Attachments & Fees

to the
Licensing Office
Town of Tisbury
(508) 696-4202

New / Renewal (circle one)

Date application submitted: _____

(please fill out all fields below:)

Type of License/Business: _____

Applicant/ Business Name: _____

(please include Corporate, Llc., or d/b/a info _____
as well as business name) _____

Address of Business Operation: _____

Mailing Address: _____

Email: _____ **Cell phone:** _____

Name of Individual Applying: _____

Print Name: _____ **Signature:** _____

Please state clearly below purpose for which license is requested:

FOR ALL NEW APPLICATIONS ONLY:

_____ Did you receive a copy of the applicable licensing regulations?

_____ APPLICATION FEE

_____ ANNUAL LICENSE FEE (if license is granted)

_____ HEARING DATE

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Internal:

Advertisement placed on what date: _____ Publication(s): _____

REAP rec'd ? _____

Inspections ? _____

Insurance forms/ waivers? _____

Bond (if req.) _____