



TOWN OF HANOVER  
550 HANOVER STREET, SUITE 103  
HANOVER, MASSACHUSETTS 02339  
781-826-5000 ext. 1032

*Janet D. Tierney*  
*Director of Public Affairs*  
*Licensing and Insurances*

**COMMONWEALTH OF MASSACHUSETTS**  
**TOWN OF HANOVER**

**APPLICATION FOR A GENERAL LICENSE**

Applicant's Name: \_\_\_\_\_

DBA: \_\_\_\_\_

Street Address: \_\_\_\_\_

Map & Lot Number (Available in the Assessor's Office): \_\_\_\_\_

Days & Hours of Operation: \_\_\_\_\_

Please state clearly the purpose for which this license is requested (Please list items by name, attaching a list if more space is needed):

\_\_\_\_\_  
\_\_\_\_\_

Please provide a list of Automatic Amusements, by name of Amusement, to be licensed at the above location, a site plan including location and dimensions of all proposed uses, a copy of the signed lease or deed for the business address provided above, and completed CORI authorization forms for all those with a financial interest in the business to be licensed.

I certify under the penalties of perjury that I, to my best knowledge and belief, have filed all State tax returns and paid all State taxes required by law.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Mailing Address