

**TOWN OF WILLIAMSBURG
APPLICATION FOR LATE CLOSING AND LIVE ENTERTAINMENT**

Applicant's Name _____

Doing Business As, if different _____

Mailing Address _____

Street Address, if different _____

Telephone _____

Email _____

Complete and return to: **Board of Selectmen**
 Licensing Authorities
 P O Box 447
 Haydenville, MA 01039

Date(s) of Late Closing (1 a.m.):

Date(s) and Type(s) of Live Entertainment

Fees: \$10 each date for Late Closing; no fee for Live Entertainment.

Signature of Applicant