



TOWN OF LEE
Select Board
32 Main Street
Lee, Massachusetts 01238

Tel. 413-409-5975
Fax. 413-243-5523
Website: lee.ma.us

BYOB Permit Application
30-DAY PERMIT

License Fee: **NO FEE** _____ New _____ Extension

SUBJECT TO ANY AND ALL LAWS, REGULATIONS, STANDARDS, GUIDELINES AND POLICIES OF THE TOWN OF LEE and any state or federal agency, department or body otherwise having jurisdiction and further subject to the specific terms, conditions and restrictions printed or written herein below or attached, the application is hereby accepted from:

BUSINESS NAME: _____ d/b/a _____

PREMISE: _____

CONTACT PERSON: _____

TELEPHONE: _____ EMAIL: _____

DESCRIPTION OF PREMISE: _____

IS THIS AN EXTENSION OF A 30-DAY BYOB PERMIT ALREADY ISSUED? ☐ YES ☐ NO
IF YES, ON WHAT DATE DOES YOUR 30-DAY BYOB PERMIT EXPIRE? _____

I CERTIFY THAT I WILL BE RESPONSIBLE FOR THE PROPER OBSERVANCE OF THE LAWS GOVERNING ALCOHOLIC BEVERAGES, THAT I DO NOT CURRENTLY HOLD AN ALCOHOL LICENSE AT THIS LOCATION, NOR DO I HAVE A PENDING APPLICATION SUBMITTED TO THE ABCC.

Signature of Applicant _____ Date _____

Date Approved: _____

SELECT BOARD
