



**TOWN OF KITTERY**  
Office of the Town Clerk  
200 Rogers Road  
Kittery, Maine 03904  
Phone 207-474-1328 Fax 207-439-6806

**APPLICATION FOR SPECIAL ACTIVITY/AMUSEMENT PERMIT**  
**(Pursuant to 28-A M.R.S.A. Sec. 1054)**

Name, address and legal status of individual(s) or entity seeking to hold permit:

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Name and mailing address of the premises where the special activity/amusement will occur:

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Mailing address and telephone number of owner of the real estate: \_\_\_\_\_

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Describe the specific portion of the premises where the special activity/amusement will occur:

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Set forth the specific time periods between which the special activity/amusement will occur:

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Describe the specific activity or type of amusement for which the permit is requested:

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Has any individual(s), partner(s), majority shareholder(s) of the business entity, seeking to hold this permit, been convicted of a felony or had any similar type of amusement or activity permit been denied or revoked within the past ten (10) years by any other municipal or state authority, agency or board? Yes\_\_\_ No\_\_\_

If so, give the state of conviction for any felony and describe specifically the circumstances of any such denial or revocation giving the state or city and date of such denial or revocation:

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(Over)

Give any additional information to support your request for the permit sought herein:

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As part of this application process, the individual or business entity seeking the permit herein acknowledges that the Municipal Officers, pursuant to 28-A M.R.S.A. Subsection 1054(7) may suspend or revoke the permit applied for herein on the grounds that the activity or amusement constitutes a detriment to the public health, safety or welfare, or violates municipal ordinances or regulations.

Give the authority and legal relationship of the applicant signing below to the entity seeking permit:

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***NOTE: In granting this permit, the Town relies on the accuracy and truth of the facts represented herein. Any misleading or incorrect information set forth in this application shall be grounds for denial or immediate revocation of the permit issued. By signing this application, the applicant represents the truth of the facts herein stated.***

DATE OF APPLICATION: \_\_\_\_\_

SIGNATURE OF APPLICANT: \_\_\_\_\_

APPLICANT'S NAME: \_\_\_\_\_  
(please print)

ADDRESS: \_\_\_\_\_  
(please print)

TELEPHONE NUMBER: \_\_\_\_\_

**FEE: \$20.00 per year Must be renewed annually with liquor license.**

**PLEASE SUBMIT THIS FORM AND APPROPRIATE FEE TO THE TOWN CLERK'S OFFICE**