

**BOARD OF SELECTMEN
TOWN OF FOXBOROUGH
MASSACHUSETTS**

Foxborough Town Hall ♦ 40 South Street ♦ Foxborough, MA 02035
Telephone 508-543-1219 Fax 508-543-6278

**EXHIBITION, SHOW OR AMUSEMENT APPLICATION
MOVIE THEATER**

(MGL Chapter 140, Section 181)

LICENSE EXPIRES ON DECEMBER 31 ♦ LICENSE FEE - \$200 PER SCREEN

Please make license fee check payable to the Town of Foxborough and return the completed application and fee to the Foxborough Selectmen's Office at 40 South Street, Foxborough.

This is **not** an application for an Entertainment License

Date of Application _____

1. FULL NAME, ADDRESS and PHONE NUMBER(S) of business/organization

2. NUMBER of MOVIE SCREENS _____

3. NAME, ADDRESS and PHONE NUMBER(S) of Manager who shall be responsible for this license

_____ E-MAIL ADDRESS _____

4. Exact times of the license:

From _____ a.m./p.m. To _____ a.m./p.m.

5. Has a Sunday Entertainment License been applied for? Yes _____ No _____

The applicant hereby indicates that he/she is aware of and shall comply with all applicable statutes, by-laws and regulations.

Signature of Authorized Representative _____

Title _____ Date _____

FID or Tax Exempt Number _____

I certify under the penalty of perjury that I, to my best knowledge and belief, have filed all state tax returns and paid all state tax fees required under law.

Your FID number will be furnished to the MA Dept. of Revenue to determine whether you have met tax filing or tax payment obligations. Licensees who fail to correct their non-filing or delinquency will be subject to license suspension or revocation. This request is made under the authority of MGL chapter 62C section 49A.