

**TOWN OF BARRINGTON, RHODE ISLAND
APPLICATION FOR HOLIDAY LICENSE
FOR THE YEAR _____**

***** RETURN APPLICATION AND FEE OF \$50**

TO: TOWN CLERK, 283 COUNTY ROAD, BARRINGTON, RI 02806

NAME OF BUSINESS _____

BUSINESS ADDRESS _____

NAME OF OWNER _____

HOME ADDRESS _____

PHONE: Home _____ Office _____

Type of Business _____

Holiday Hours _____ Daily Hours: _____

I hereby certify that the above facts are true to the best of my knowledge.

Signature of Owner/Proprietor

Print Name

Date

Date filed with Town Clerk _____

Date granted by Town Council _____

PLEASE NOTE: No license shall be issued on December 25 of any year or on Thanksgiving Day unless the business qualifies under Section 5-23-2 of the Rhode Island General Laws.