



City of Chicopee, Massachusetts

License Commission

City Hall – 274 Front Street – Chicopee, MA 01013
Tel: (413) 594-1530 Fax: (413) 594-1531 www.chicopeema.gov

WEEKDAY ENTERTAINMENT LICENSE APPLICATION

Amended by the Chicopee License Commission effective September 17, 2020

ANNUAL FEE: \$130.00

The undersigned petitions for a Weekday Entertainment License to be exercised on the premises described as follows and subject to the provisions of Chapter 140, Section 181 and 183 A of the Massachusetts General Laws. *Please print clearly.*

Name of Establishment: _____

Address: _____

Mailing Address (If different): _____

Applicant's/Manager's Name: _____

Social Security or Federal Identification Number: _____

Telephone: _____ Email: _____

I understand that this License covers **only** Entertainment on Weekdays and Saturday.

- License Commission Meeting Schedule -

The License Commission Meetings are scheduled the third Thursday of every month. Meetings schedules are subject to change. Please plan your Special Event with this schedule in mind as applications that are not on the agenda will not be accepted. Please call the License Commission administrator's office to verify meeting dates.

Weekday Entertainment License Application Procedure

A new applicant must submit a completed Weekday Entertainment License Application with the following:

- a worker’s compensation insurance affidavit
- the application fee

to the License Commission administrator located in City Hall. Payment should be made via check or money order payable to the City of Chicopee.

License Posting

All licenses, permits, and certificates issued by the City of Chicopee Licensing Authorities affecting the licensed premises shall be posted conspicuously; provided, however, that no such document shall be posted in such a way as to cover over any part of the license issued by the Chicopee License Authority.

ENTERTAINMENT: Please check (✓) regularly scheduled days of the week and insert the hours below:

<u>Days of the Week</u>	<u>Entertainment Hours (a.m. /p.m.)</u>	
Monday ()	Start Time: _____	End Time: _____
Tuesday ()	Start Time: _____	End Time: _____
Wednesday ()	Start Time: _____	End Time: _____
Thursday ()	Start Time: _____	End Time: _____
Friday ()	Start Time: _____	End Time: _____
Saturday ()	Start Time: _____	End Time: _____

TYPES OF ENTERTAINMENT: Please check (✓) below, as applicable.

- | | |
|---|---|
| <input type="checkbox"/> Dancing by patrons | <input type="checkbox"/> Theatrical exhibition, play/moving picture show |
| <input type="checkbox"/> Karaoke | <input type="checkbox"/> Floorshow of any description |
| <input type="checkbox"/> Recorded or live music | <input type="checkbox"/> Light show of any description |
| <input type="checkbox"/> Jukebox, use of amplification system | <input type="checkbox"/> Any visual dynamic audio or visual shows such as television (live or recorded) |

NUDITY:

Will there be any nudity as described in M.G.L.CHAPTER 140, SECTION 183A? Yes No

Applicant: _____ Date: _____
(Please print clearly)

Applicant: _____ Date: _____
(Signature)