

TANNING SALON PERMIT

Application fee: \$100.00

Make check payable to: **Town of Pembroke**

The Commonwealth of Massachusetts
Town of Pembroke

APPLICATION FOR PERMIT

<p>Do not write in this space.</p> <p>Permit No.: _____</p> <p>Date Permit Issued: _____</p>
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Application Date: _____

To the Licensing Authorities:

In accordance with the provisions of the Statutes relating thereto, application for a Permit is hereby made by (***please print clearly***)

Name: _____
(Full name of person making application)

Home Address: _____
(# Street) (State) (Zip)

Telephone: (_____)_____

to **operate a tanning salon** in the Town of Pembroke.

(Print clearly the name of the salon)

(Street) (Town) (State) (Zip)

Bus. Telephone: (_____)_____

(Signature of applicant)

(Address)

(Telephone)