



## **TOWN OF MILTON COMMON VICTUALLER LICENSE APPLICATION**

Establishments engaging in the business of preparing and providing food for on premise consumption must obtain a Common Victualler (CV) License issued by the Town of Milton Select Board, acting as the Local Licensing Authority (LLA), under [M.G.L., Chapter 140, Section 2](#). This license is issued and renewed annually at the end of each calendar year, with a fee of \$75 (check payable to The Town of Milton). The Select Board Office processes requests for new and transfer CV licenses, amends existing licenses, and renews annual licenses. Please contact the Building Inspectors Office, Health Department/Agent, and Fire Inspector to determine requirements and regulations pertaining to your operation before filing an application for a NEW Common Victualler License. Until all requirements and inspections have been completed and the proper certifications issued, the restaurant is not permitted to open under any circumstances.

### **NEW LICENSE - Required Documents:**

- Application Form with check made payable to the Town of Milton - \$75.00
- Copy of Bill of Sale or Lease
- If a Corporation, a copy of Articles of Organization; if LLC, a copy of Membership Agreement- List of members
- Copy of Certificate of Good Standing from the Commonwealth of MA – Department of Revenue website:  
<https://www.mass.gov/how-to/request-a-certificate-of-good-standing-tax-compliance-or-a-corporate-tax-lien-waiver>
- Worker's Compensation Insurance Affidavit
- Worker's Compensation Policy Declaration Page (showing the policy # and expiration date)
- Business Certificate obtained from Town Clerk's Office:  
[https://www.townofmilton.org/sites/g/files/vyhlif911/f/uploads/2020\\_business\\_certificate\\_fillable\\_003.pdf](https://www.townofmilton.org/sites/g/files/vyhlif911/f/uploads/2020_business_certificate_fillable_003.pdf)
- Floor plan indicating the proposed location of the devices, the location of exists and all permanent furnishings and any obstructions
- List of equipment and estimated cost

- Copy of the Fire/Safety Inspection of the licensed premises
- Copy of the food permit from Health Department
- Application must be accompanied by three letters of reference

Once all of the documents have been submitted please contact the Contract and Licensing Agent in the Select Board Office at (617)898-4846. You will then be invited to an interview at upcoming public meeting of the Select Board where your proposed application will be heard and reviewed for approval.

**RENEWAL LICENSE - Required Documents:**

- Application Form
- Check made payable to the Town of Milton – \$75.00
- Copy of Certificate of Good Standing from the Commonwealth of MA – Department of Revenue website:  
<https://wfb.dor.state.ma.us/webfile/certificate/public/webforms/welcome.aspx>
- Worker's Compensation Insurance Affidavit
- Business Certificate - Obtained and filed with the Town Clerk and renewed every 4 years. Please call the Town Clerk's Office at **(617)898-4859** for assistance or to check on your renewal date.  
[https://www.townofmilton.org/sites/g/files/vyh1if911/f/uploads/2020\\_business\\_certificate\\_fillable\\_003.pdf](https://www.townofmilton.org/sites/g/files/vyh1if911/f/uploads/2020_business_certificate_fillable_003.pdf)



## TOWN OF MILTON COMMON VICTUALLER LICENSE APPLICATION

**NEW**

**RENEWAL**

**NAME OF BUSINESS:**

**ADDRESS OF BUSINESS:**

**BUSINESS OWNER/PARTNER/CORPORATE PRESIDENT:**

**NAME & RESIDENTIAL ADDRESS of Applicant:**

**CONTACT INFORMATION:**

**Telephone Number:**

**E-Mail Address:**

**PREVIOUSLY HELD LICENSES (Name of Establishment[s]):**

**ADDRESS(S) OF PREVIOUS ESTABLISHMENTS:**

**DATE(S) THAT LICENSE(S) WERE HELD:**

*\*If a corporation, then a copy of the Articles of Corporation should be attached.*

**PROPOSED MENU (NEW ONLY):**

**PROPOSED HOURS OF OPERATON (NEW ONLY):**

**DAY:** \_\_\_\_\_ **FROM:** \_\_\_\_\_ **TO:** \_\_\_\_\_

**DAY:** \_\_\_\_\_ **FROM:** \_\_\_\_\_ **TO:** \_\_\_\_\_

**DAY:** \_\_\_\_\_ **FROM:** \_\_\_\_\_ **TO:** \_\_\_\_\_

**DAY:** \_\_\_\_\_ **FROM:** \_\_\_\_\_ **TO:** \_\_\_\_\_

DAY: \_\_\_\_\_ FROM: \_\_\_\_\_ TO: \_\_\_\_\_

DAY: \_\_\_\_\_ FROM: \_\_\_\_\_ TO: \_\_\_\_\_

DAY: \_\_\_\_\_ FROM: \_\_\_\_\_ TO: \_\_\_\_\_

**FLOOR SPACE (NEW ONLY):**

CURRENT: \_\_\_\_\_ SQ. FT.

PROPOSED: \_\_\_\_\_ SQ. FT.

**SEATING CAPACITY (NEW ONLY):**

CURRENT: \_\_\_\_\_

PROPOSED: \_\_\_\_\_

**NUMBER OF EMPLOYEES:**

CURRENT: \_\_\_\_\_

PROPOSED: \_\_\_\_\_

**PARKING AREA CAPACITY (NEW ONLY):**

CURRENT SPACES: \_\_\_\_\_

PROPOSED SPACES: \_\_\_\_\_

***Licensees who fail to correct non-filing or delinquency will be subject to license suspension or revocation.***

***This request is made under the authority of Massachusetts General Law, Chapter 62C, Section 49A***

<https://malegislature.gov/Laws/GeneralLaws/PartI/TitleIX/Chapter62c/Section49a>

***I certify under the penalties of perjury that I, to my best knowledge and belief, have filed all state tax returns, paid all state taxes as required under law, as well as taxes, fees, assessments, betterments or other municipal fees owed to the Town of Milton.***

\_\_\_\_\_  
**SIGNATURE OF APPLICANT: OWNER/PARTNER CORPORATE OFFICER –Please include Tax Identification #**

\_\_\_\_\_  
**SIGNATURE OF APPLICANT: OWNER/PARTNER CORPORATE**

***Subject to the Conditions as imposed by the Select Board, the Town of Milton’s Local Licensing Authority (LLA), this Common Victualler application has been approved this date \_\_\_\_\_.***

\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Select Board**



**TOWN OF MILTON COMMON VICTUALLER LICENSE APPLICATION-  
RENOVATION FORM (Only if applicable)**

Please describe in detail all renovations that will be made and then sign and date below as indicated. Please keep in mind that all renovations must comply with building and health code requirements.

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\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

*Subject to the Conditions as imposed by the Select Board, the Town of Milton's Local Licensing Authority (LLA), the Common Victualler License has been approved this date \_\_\_\_\_.*

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**Select Board**