

## Restaurant License Application

City Clerk's Office

Please submit this application with any related applications (liquor licenses, etc.) and a check for \$25.00 (registration fee) to:

City of Winooski  
27 West Allen Street  
Winooski, VT 05404

### Restaurant Information

Name \_\_\_\_\_

Address \_\_\_\_\_

Hours of Operation \_\_\_\_\_

### Owner Information

Name(s) \_\_\_\_\_

Residential Address \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

**Print Name** \_\_\_\_\_ **Title** \_\_\_\_\_

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

