

CITY OF HAMLET
PO BOX 1229
HAMLET, NC 28345

910-582-7983
(FAX 910-582-5815)

APPLICATION FOR PRIVILEGE LICENSE

1. Name of business: _____

Mailing Address: _____

2. The nature of business- License applying for:

If selling gas, # of nozzels _____

If selling prepared food, # of seats _____

BEER/WINE: YES _____ NO _____ ON/OFF PREMISES _____

3. Address of where business is being conducted: _____

4. State license number: _____

5. Name of person applying for license and relationship to business:

6. Address of person applying for license:

7. Phone number: _____

8. DATE: _____