TOWN OF SWANZEY

620 OLD HOMESTEAD HIGHWAY P.O.
BOX 10009
SWANZEY, NH 03446-0009

TOWN HALL (603) 352-7411 FAX (603) 355-8099
WWW.SWANZEYNH.GOV

OPEN CONTAINER PERMIT APPLICATION

Permit #_____ *(will be provided)*

Applicant_____

Address _____

Contact Person_____ Phone Number _____

Event Date_____ Event Time_____

Signature of Responsible Party_____

****

Office Use Only – Do Not Write Below This Line

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OPEN CONTAINER PERMIT

Town of Swanzey, New Hampshire

_____ is hereby granted a permit to consume alcoholic beverages or possess any open container having alcoholic beverages therein, at _____ located in Swanzey, NH. This permit is valid for the following time period (date/time):

_____

This permit is valid only for the date and time specified above and is not transferable.

_____

_____

_____ Date _____

Selectmen of Swanzey