



# CITY OF NEW BEDFORD MASSACHUSETTS LICENSING BOARD

## LIQUOR LICENSE

ANY APPLICANT FOR AN ORIGINAL NEW LICENSE, A CHANGE IN THE LOCATION OF A LICENSE, OR A CHANGE IN DESCRIPTION OF A LICENSED PREMISE MUST SEND 'REGISTERED' NOTICE OF HIS/HER INTENDED ACTION TO ABUTTERS OF THE PROPOSED OR CURRENT LICENSED PROPERTY.

## NOTIFY

1. **ABUTTERS:** Abutters are defined as persons listed on the assessors' most recent map and valuation list, which own property directly abutting the premises where the license would be exercised.
2. Notice of the action applied for must also be sent to any of those properties listed below within a 500 foot radius of the licensed premises.
  - SCHOOLS (including pre-schools, public and private)
  - CHURCHES/SYNAGOGUES (including those in store fronts)
  - HOSPITALS

## INSTRUCTIONS:

- The applicant must provide a separate list indicating:
  - a) Abutters Request – map, lot, location, owner, mailing address
  - b) Abutters List map, lot, location, owner, and mailing address for each parcel (if several parcel are owned by the same taxpayer, each parcel must be listed separately)
  - c) Certification Affidavit of Abutters List



City of New Bedford  
OFFICE OF THE LICENSING BOARD  
CITY HALL, ROOM 206

**REQUEST FOR CERTIFIED ABUTTERS LIST**

**THIS FORM MUST BE COMPLETED & SUBMITTED TO THE PLANNING OFFICE IN  
ROOM 303**

**-----14 DAYS PRIOR TO FILING DATE-----**

**ALONG WITH A CHECK FOR \$5.00 PAYABLE TO THE 'CITY OF NEW BEDFORD'**

**SUBJECT PROPERTY (PLEASE PRINT CLEARLY)**

Map: \_\_\_\_\_ Lot: \_\_\_\_\_

LOCATION: \_\_\_\_\_

OWNERS NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_

REASON FOR REQUEST:

\_\_\_\_\_

**APPLICANTS - PLEASE DO NOT WRITE BELOW THIS LINE**

I, \_\_\_\_\_ Administrative Assistant to the Board of Assessor's of the  
City of New Bedford, do hereby certify that the names and addresses as identified on the attached "Abutters  
List" are duly recorded and appear on the most recent tax lists as of the date acknowledged below.

Date: \_\_\_\_\_

# OF PAGES \_\_\_\_\_



**CITY OF NEW BEDFORD  
MASSACHUSETTS  
LICENSING BOARD**

**AFFIDAVIT OF NOTICE OF MAILING TO ABUTTER AND OTHERS**

LICENSING BOARD FOR THE **CITY OF NEW BEDFORD**

Date \_\_\_\_\_

To the Licensing Board

For the \_\_\_\_\_  
Corp./Business Name **(Please Print)**

I, \_\_\_\_\_ hereby certify that the following is a true list of the persons  
APPLICANT'S NAME **(Please Print)**  
shown upon the Assessor's most recent valuation list as the owners of the property abutting the proposed location  
for an alcoholic beverages license at \_\_\_\_\_

**SEE ATTACHED LIST**

And that the following schools, churches or hospitals are located within the radius of five hundred (500) feet from  
said proposed location:

**SEE ATTACHED LIST**

If there are none, please so state \_\_\_\_\_

**TOTAL # OF PAGES** \_\_\_\_\_

I also certify that the notice of this application/petition concerning an alcoholic beverages license was given to the  
above by mailing to each of them within three days after publication of same, a copy of the advertisement is  
attached below. Also attached are the **registered receipts** bearing signatures of the persons receiving said notices  
and stamped with the date of delivery of notice.

Signed and subscribed to under penalties of perjuries \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

this **Per M.G.L Ch. 138; sec. 15A**

ATTACH ADVERTISEMENT  
AND RECEIPTS HERE

Printed: \_\_\_\_\_

Written: \_\_\_\_\_

Notary Public: \_\_\_\_\_

My Commission expires \_\_\_\_\_