Town of Sandwich
The Oldest Town on Cape Cod

Health Department
16 Jan Sebastian Drive
Sandwich, MA 02563
(508) 888-4200
Fax: (508) 833-0018

2022
APPLICATION FOR TOBACCO LICENSE

Application Status: Renewal / New
(Circle one)

Business Name:_____Tel. No._____

Business Address: _____ Mailing Address: _____

Owner/Corporation Name: _____EMAIL: _____

Owner/Corporation Mailing Address: _____

Contact Name: _____Contact Phone: _____

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Important: Under Chapter 152, Section 25c, Subsection 6, **you must complete the attached Workers Compensation Insurance Affidavit Form and return it with this completed application, no later than January 1, 2022.**

Checks are to be made payable to the **Town of Sandwich** for $100.00

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Per Board of Health Regulations 'Affecting Smoking in Certain Places' no person shall sell or otherwise distribute tobacco at retail establishments within Sandwich without first obtaining a tobacco sales permit issued annually by the Sandwich Board of Health.

SIGNATURE: _____DATE: _____