



**TOWN OF FALMOUTH**  
Town Manager & Select Board Office  
59 Town Hall Square, Falmouth, Massachusetts 02540  
508-495-7320

## **FORTUNE TELLER LICENSE APPLICATION**

M.G.L. 140 §185I

***Please provide a complete application at least 30 days prior to Select Board hearing date***

**Step 1:** *Have all the following ready to submit with the application.*

- Complete a CORI check at the Falmouth Police Department and provide a copy of the findings.
- Complete the application for a Fortune Teller License.
- Town Clerk's Office –obtain proof of Falmouth residency.
- Town of Falmouth Filing Fee \$10.00 payable by check or cash; License Fee \$50.00 payable by cashier's check or bank check only.
- Copy of the lease or deed to the business property.
- Copy of any special zoning permit allowing property to be used for commercial purposes.
- Floor plan of the business premises.
- Business Structure Documents:
  - a. Copy of LLC Agreement *(if limited liability company)*
  - b. Copy of Partnership Agreement *(if partnership)*
  - c. Copy of Certificate of Doing Business *(if sole proprietorship)*
  - d. Copies of Articles of Incorporation *(if corporation)*

**Step 2:** *Now you are ready to submit the application to the Select Board.*

- Select Board office - Submit the complete application and all items in Step 1.

**Please proofread the application carefully.**  
**For questions contact [licensing@falmouthma.gov](mailto:licensing@falmouthma.gov) or call 508-495-7320**



Please be advised that all license application fees must be paid upon submission of an application as follows:

- Filing fees, public notice advertising fees, and other administrative fees must be paid by personal or business check when the application is submitted. Cash is also accepted.
- License fees must be paid in full at the time of submission by cashier's check or bank check only. These checks will be held on file and not processed until the application is fully approved and all license requirements completed. If the application is not approved the cashier's/bank checks will be returned to the applicant.

*Please contact the Select Board Office for further information.*



**Town of Falmouth**

Office of the Town Manager and Select Board  
59 Town Hall Square, Falmouth, MA 02540  
508-495-7320 - [licensing@falmouthma.gov](mailto:licensing@falmouthma.gov)

**APPLICATION for FORTUNE TELLER’S LICENSE**

Massachusetts General Laws, Chapter 140, Section 1851

**NEW**

**RENEWAL**

**NAME OF BUSINESS**

**ADDRESS**

**TOWN** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIPCODE** \_\_\_\_\_

**NAME OF OWNER** \_\_\_\_\_

**BUSINESS PHONE #** \_\_\_\_\_ **EMAIL** \_\_\_\_\_

**HOME ADDRESS**

**TOWN** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP CODE** \_\_\_\_\_

**HOME PHONE#**

**New Licenses ONLY:**

Have you ever held a Fortune Teller’s License in the past?    **YES**                      **NO; if so:**

**NAME OF BUSINESS**

**ADDRESS**

**TOWN** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIPCODE** \_\_\_\_\_

**SIGNED UNDER THE PAINS AND PENALTIER OF PERJURY:**

**DATE** \_\_\_\_\_ **X** \_\_\_\_\_ **OWNER**

**License Renewals ONLY:**

**TAX ATTESTATION:** I certify under the penalties of perjury that the information provided in this application is true and that, to my best knowledge, I have filed all state tax returns and paid all state and local taxes as required under law. I understand that Licensees who fail to correct their non-filing or delinquency will be subject to license suspension or revocation:

**DATE** \_\_\_\_\_ **X** \_\_\_\_\_ **OWNER**

**Total Town Fees: \$60:**  
**Filing Fee: \$10 plus License Fee: \$50**

Town of Falmouth

License Application – Department Contact Information

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Select Board      Town Hall      (508) 495-7320      [licensing@falmouthma.gov](mailto:licensing@falmouthma.gov)

- License applications.

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Building      Town Hall      (508) 495-7470      <https://www.falmouthma.gov/307/Building>

- Approval of floor plan and/or site plan.

Apply online using **PermitEyes**.

- Certificate of Inspection.
- Sign Permit

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Zoning Appeals      Town Hall, Second Floor      (508) 495-7460

- Special permit.

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Planning      Town Hall, Second Floor      (508) 495-7440

- Site plan review.

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Assessor      Town Hall      (508) 495-7380      <https://www.falmouthma.gov/175/Assessing>

- Certified abutters list.

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Police      750 Main St.      (774) 255-4527

- Call Central Records to schedule an appointment for the fingerprint-based background check.

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Health      Town Hall      (508) 495-7485      <https://www.falmouthma.gov/273/Health>

Apply online using **PermitEyes**

- Food service establishment permit.

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Town Clerk      Town Hall      (508) 495-7360

- Certificate of Doing Business.
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THE COMMONWEALTH OF MASSACHUSETTS  
 EXECUTIVE OFFICE OF PUBLIC SAFETY AND SECURITY  
 Department of Criminal Justice Information Services 200  
 Arlington Street, Suite 2200, Chelsea, MA 02150  
 TEL: 617-660-4640 | TTY: 617-660-4808 | FAX: 617-660-5973  
 MASS.GOV/CJIS



This form is not to be faxed. Please return form to organization .

**Criminal Offender Record Information (CORI)  
 Acknowledgement Form**

To be used by organizations conducting CORI checks for employment or licensing purposes.

The Town of Falmouth is registered under the  
 (Organization)

provisions of M.G.L. c.6, § 172 to receive CORI for the purpose of screening current and otherwise qualified prospective employees, subcontractors, volunteers, license applicants, or current licensees. As a prospective or current employee, subcontractor, volunteer, license applicant or current licensee, I understand that a CORI check will be submitted for my personal information to the DCJIS. I hereby acknowledge and provide permission to the Town of Falmouth

(Organization)

to submit a CORI check for my information to the DCJIS. This authorization is valid for one year from the date of my signature. I may withdraw this authorization at any time by providing the Town of Falmouth

(Organization)

with written notice of my intent to withdraw consent to a CORI check.

I also understand, that the Town of Falmouth may conduct  
 (Organization)

subsequent CORI checks within one year of the date this Form was signed by me. By signing below, I provide my consent to a CORI check and affirm that the information provided on Page 2 of this Acknowledgment Form is true and accurate.

\_\_\_\_\_  
*Signature of CORI Subject*

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



**THE COMMONWEALTH OF MASSACHUSETTS  
EXECUTIVE OFFICE OF PUBLIC SAFETY AND SECURITY  
Department of Criminal Justice Information Services**  
200 Arlington Street, Suite 2200, Chelsea, MA 02150  
TEL: 617-660-4640 | TTY: 617-660-4606 | FAX: 617-660-5973  
MASS.GOV/CJIS



**SUBJECT INFORMATION**

Please complete this section using the information of the person whose CORI you are requesting.  
The fields marked with an asterisk (\*) are required fields.

\* First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

\* Last Name: \_\_\_\_\_ Suffix (Jr., Sr., etc.): \_\_\_\_\_

Former Last Name 1: \_\_\_\_\_

Former Last Name 2: \_\_\_\_\_

Former Last Name 3: \_\_\_\_\_

Former Last Name 4: \_\_\_\_\_

\* Date of Birth (MM/DD/YYYY): \_\_\_\_\_ Place of Birth: \_\_\_\_\_

\* Last SIX digits of Social Security Number: \_\_\_\_\_ -- \_\_\_\_\_  No Social Security Number

Sex: \_\_\_\_\_ Height: \_\_\_\_\_ ft. \_\_\_\_\_ in. Eye Color: \_\_\_\_\_ Race: \_\_\_\_\_

Driver's License or ID Number: \_\_\_\_\_ State of Issue: \_\_\_\_\_

Father's Full Name: \_\_\_\_\_

Mother's Full Name: \_\_\_\_\_

**Current Address**

\* Street Address: \_\_\_\_\_

Apt. # or Suite: \_\_\_\_\_ \*City: \_\_\_\_\_ \*State: \_\_\_\_\_ \*Zip: \_\_\_\_\_

**SUBJECT VERIFICATION**

The above information was verified by reviewing the following form(s) of government-issued identification:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Verified by:

\_\_\_\_\_

*Print Name of Verifying Employee*

\_\_\_\_\_

*Signature of Verifying Employee*

\_\_\_\_\_

*Date*

# The General Laws of Massachusetts

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## PART I. ADMINISTRATION OF THE GOVERNMENT

### TITLE XX. PUBLIC SAFETY AND GOOD ORDER

#### CHAPTER 140. LICENSES

##### EMPLOYMENT AGENCIES

##### DANCING SCHOOLS

#### Chapter 140: Section 185I. Fortune tellers; license

Section 185I. No person shall tell fortunes for money unless a license therefor has been issued by the local licensing authority. Said license shall be granted only to applicants who have resided continuously in the city or town in which the license is sought for at least twelve months immediately preceding the date of the application. No such license shall be transferred or assigned. Unless otherwise established in a town by town meeting action and in a city by city council action, and in a town with no town meeting by town council action, by adoption of appropriate by-laws and ordinances to set such fees, the fee for each license granted under this section shall be two dollars, but in no event shall any such fee be greater than fifty dollars. Whoever tells fortunes for money unless licensed under this section shall be punished by a fine of not more than one hundred dollars.

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