



City of Milford, Connecticut

- Founded 1639 -

POLICE DEPARTMENT

430 Boston Post Road - Milford, CT 06460-2570

Telephone (203) 878-6551



Keith L. Mello
Chief of Police

Lodging House Permit

Attached is an application for a Lodging House Permit in the City of Milford. It must be completed in its entirety prior to being submitted. The Lodging Permit is valid for one (1) year from date of issuance. The application will take approximately two weeks to process.

The following is a list of items needed to complete the application:

1. A complete and **Notarized** copy of this application.
2. A copy of the applicant's driver's license or valid, government issued identification
3. Inspection by the Milford Health Department as well as the Milford Fire Department **prior** to submission of this application. You must contact the Health and Fire Departments to secure such inspections and approvals as they may deem necessary and secure authorized signatures on this application.

Application Fee:

\$50.00

Connecticut General Statutes

Lodging House Permits

Sec. 21-48. License; records; definition. The selectmen of any town, the chief of police of any city and the warden of any borough may grant licenses to suitable persons to be lodging house keepers and to carry on the business of renting rooms and beds for lodgings in such town, city or borough, respectively, and may revoke such licenses for cause. The persons so licensed, except charitable organizations and youth hostels, shall pay to the authority granting such license the sum of fifty dollars, for the use of such municipality. Each such license shall designate the place where such business is to be carried on and shall continue for one year unless sooner revoked. Each such lodging house keeper and each charitable organization and youth hostel shall keep a register, card-file or other suitable record-keeping system in which shall be written in the English language the names of all persons lodging from time to time in such house, which register, card-file or record-keeping system and lodging house shall at all times be subject to the inspection of the selectmen of the town or chief of police of the city or any person or persons designated by them or him, or of the warden of the borough or any person or persons designated by him; and failure to keep such register, card-file or record-keeping system or refusal to allow such register, card-file or record-keeping system or such lodging house to be inspected shall be sufficient cause for the revocation of any such license. The words "lodging house", as herein used, mean only such houses as are patronized by roving or transient persons, to whom beds or rooms are furnished, and as contain accommodations for not fewer than five persons, or tourist camps wherein houses or cottages are rented by the day. Any person keeping or operating a lodging house without such a license shall be fined not more than one hundred dollars.



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APPLICATION FOR LODGING HOUSE PERMIT WITHIN THE CITY OF MILFORD

Name _____ Address _____

City _____ State _____ ZIP _____

Home Phone _____ Place of Birth _____

All other names by which you have been known _____

D.O.B _____ Age _____ Height _____ Weight _____ Sex _____ Hair _____ Eyes _____

Business Name _____ Business Phone _____

Business Address _____ City _____ State _____ ZIP _____

Owner of Business (if different from above) _____ Address _____

City _____ State _____ Zip _____ Phone Number _____

Has the applicant ever applied for or held a Lodging Permit in the City of Milford?

Yes ☐ No ☐ If yes, details _____

Has the applicant ever been convicted of any crime, misdemeanor, City Ordinance, or had a Lodging Permit revoked for cause either in this city or elsewhere Yes ☐ No ☐

If yes, explain in detail _____

Health Department

This lodging house is currently under Permit by the Milford Health Department.

Inspector Name

Signature

Date

Fire Department

This lodging house has been inspected and approved.

Inspector Name

Signature

Date

Declaration

I understand that any false statement made herein, which I do not believe to be true and which is intended to mislead a public servant in the performance of their official function, is punishable in Connecticut pursuant to state statute (C.G.S. Sec. 53a-157b). I further understand that any statements in this application that is determined to be false or inaccurate shall constitute grounds for the license or permit not to be issued, or if issued before the facts are known, shall be cause for revocation. My signature below attests to the accuracy, completeness, and to the truth of all information supplied on this application.

I declare, under penalty of False Statement, that the answers to the above are true and correct

Date: _____ Signed: _____

State of _____ Print Name _____

County of _____

Subscribed and sworn to before me this _____ day of _____ 20____

Name:

Notary Public

My Commission Expires:

Commissioner of Superior Court