



**GARDINER CITY COUNCIL**  
**AGENDA ITEM INFORMATION SHEET**



<b>Meeting Date</b>	03/17/2021	<b>Department</b>	City Clerk
<b>Agenda Item</b>	4.e Consider Approval of a Liquor License Renewal, Liquor/Bottle Club (101+ seats) and an Outside Consumption Permit for Gardiner Sportsmen's Club		
<b>Est. Cost</b>	n/a		

**Background Information**

Attached under item 3.b is the Public Hearing notice for a renewal liquor license application for Gardiner Sportsmen's Club. The full application is attached hereto.

The City Council is also being asked to approve a liquor/bottle club (101+ seats) and an outside consumption permit for the organization.

<b>Requested Action</b>	'I move to approve the liquor license renewal application and an outdoor consumption permit for Gardiner Sportsmen's Club.'
<b>City Manager and/or Finance Review</b>	
<b>Council Vote/ Action Taken</b>	
<b>Departmental Follow-Up</b>	

<b>City Clerk Use Only</b>	1 <sup>st</sup> Reading _____	Advertised <u>03/03/2021</u> _____	<b>EFFECTIVE DATE</b> _____
	2 <sup>nd</sup> Reading _____	Advertised _____ w/in 15 Days	
	Final to Dept _____	Updated Book _____	Online _____



**APPLICATION FOR A  
LICENSE/BUSINESS/EVENT**

Ck  
Date Received in Office 3/5/2021  
Received by: NETS  
Office Amount Received \$150  
Approved \_\_\_\_\_ Denied \_\_\_\_\_

<b>Business Name</b>	Gardiner Sportsmen's Club
<b>Business Location</b>	154 Cobbossee Avenue, Gardiner, ME 04345
<b>Business Mailing Address</b>	PO Box 1173, Gardiner, ME 04345
<b>Owner Name</b>	Gardiner Sportsmen's Club
<b>Mailing Address (if different)</b>	N/A
<b>Phone Number</b>	207-582-3223
<b>Business Number</b>	N/A
<b>Email Address</b>	edgeofthestream@roadrunner.com
<b>Type of Business</b>	Nonprofit Corporation (T13-B) Charter Number 19470065ND
<b>Description of Business (attach paper if necessary)</b>	Sportsmen's Club promoting and supporting proper usage of our natural resources and youth events.

**Type of License Being Applied for:**

**(check all that apply)**

<input type="checkbox"/>	Doing Business As (One-time Registration)	\$10	
<input type="checkbox"/>	Special Event - Exhibitions & Shows (Minor)	\$50	
<input checked="" type="checkbox"/>	Special Event - Exhibitions & Shows (Major)	\$100	
<input type="checkbox"/>	Street Sellers (Annual)	\$50	
<input type="checkbox"/>	Street Sellers (Per Event)	\$20	
<input type="checkbox"/>	Street Sellers (Farmer's Market) (Annual)	\$10	
<input checked="" type="checkbox"/>	Junkyards (<100 ft highway) (Annual)	\$200	
<input checked="" type="checkbox"/>	Junkyards (>100 ft highway) (Annual)	\$50	
<input checked="" type="checkbox"/>	Automobile Recycling Business (5-year)	\$250	
<input type="checkbox"/>	Other	\$	
<input checked="" type="checkbox"/>	Victualers License to Sell Food (Annual)	\$50	
<input checked="" type="checkbox"/>	Victualers License – One Day (Festival)	\$25	
<input checked="" type="checkbox"/>	Victualers Non-profit License to sell food (Annual)	\$10	
<input checked="" type="checkbox"/>	Roving/On Wheels/Lunch Wagon (Annual)	\$100	
<input checked="" type="checkbox"/>	Roving/On Wheels/Lunch Wagon (Non-profit)	\$10	
<input checked="" type="checkbox"/>	Roving/On Wheels/Lunch Wagon (3-Day)	\$25	
<input checked="" type="checkbox"/>	Taxicabs/Vehicles for Hire	\$50	
<input type="checkbox"/>	Sales (Special, OOB, etc) (Per Event/Sale)	\$25	
<input type="checkbox"/>	Beano/Bingo/Games of Chance/Pinball Machines (Annual)	\$10	
<input type="checkbox"/>	Shooting Galleries/Pool Hall/Bowling Alley (Annual)	\$50	
<input checked="" type="checkbox"/>	Pawn (Annual)	\$50	
<input checked="" type="checkbox"/>	Tavern Keeper (Annual)	\$25	
<input checked="" type="checkbox"/>	Liquor/Bottle Club (1-50 seats) (Annual)	\$75	
<input checked="" type="checkbox"/>	Liquor/Bottle Club (51-100 seats) (Annual)	\$100	
<input checked="" type="checkbox"/>	Liquor/Bottle Club (101+ seats) (Annual)	\$150	x
<input checked="" type="checkbox"/>	Catering Off-Premises (liquor is served) (per event)	\$10	
<input checked="" type="checkbox"/>	Entertainment/Special Amusement License (Annual)	\$75	
<input checked="" type="checkbox"/>	Outside Consumption Permit (Annual)	\$25	

Please send application and payment (payable to City of Gardiner) to: City Clerk's Office, 6 Church Street, Gardiner, ME 04345



**Division of Liquor Licensing & Enforcement  
8 State House Station  
Augusta, ME 04330-0008  
Tel: (207) 624-7220 Fax: (207) 287-3434  
Email Inquiries: [MaineLiquor@Maine.gov](mailto:MaineLiquor@Maine.gov)**

**BOTTLE CLUB REGISTRATION APPLICATION**

\$50.00 – Bottle Club Registration Fee  
\$10.00 – Filing Fee per application  
\$60.00 - Check Payable: Treasurer, State of Maine

New Bottle Club  Yes  No

PRESENT REGISTRATION EXPIRES February 2021

DIVISION USE ONLY	
License No:	
Class:	By:
Deposit Date:	
Amt. Deposited:	
Cash Ck Mo:	

**ALL QUESTIONS MUST BE ANSWERED IN FULL**  
*Please Print Clearly*

<b>Corporation Name:</b> Gardiner Sportsmen's Club		<b>Business Name (D/B/A)</b> Gardiner Sportsmen's Club	
<b>APPLICANT(S)</b> –(Sole Proprietor) <b>DOB:</b>		<b>Physical Location:</b> 154 Cobbossee Avenue	
<b>DOB:</b>		<b>City/Town</b>	<b>State</b>
		Gardiner, ME	04345
<b>Address</b> 154 Cobbossee Ave		<b>Mailing Address</b> PO Box 1173	
<b>City/Town</b>	<b>State</b>	<b>City/Town</b>	<b>State</b>
Gardiner, ME	04345	Gardiner, ME	04345
<b>Telephone Number</b>	<b>Fax Number</b>	<b>Business Telephone Number</b>	<b>Fax Number</b>
207-582-3223		207-582-3223	
<b>Federal I.D. #</b> 01-0369780		<b>Seller Certificate #:</b> or <b>Sales Tax #:</b>	
<b>Email Address:</b> Please Print    edgeofthestream@roadrunner.com		<b>Website:</b> www.edgeofthestream.org	

1. Is applicant (s) a corporation? Yes  No

If YES complete Corporate Information Required for Business Entities.

2. Is applicant (s) a non-profit club? Yes  No

If YES complete Supplementary Club Questionnaire.

3. What are the regular days and hours your establishment is operated as a Bottle Club?

Sunday Open \_\_\_\_\_ AM/PM Close \_\_\_\_\_ AM/PM    Wednesday Open \_\_\_\_\_ AM/PM Close \_\_\_\_\_ AM/PM

Monday Open \_\_\_\_\_ AM/PM Close \_\_\_\_\_ AM/PM    Thursday Open \_\_\_\_\_ AM/PM Close \_\_\_\_\_ AM/PM

Tuesday Open \_\_\_\_\_ AM/PM Close \_\_\_\_\_ AM/PM    Friday Open \_\_\_\_\_ AM/PM Close \_\_\_\_\_ AM/PM

The club is open to members Saturday Open \_\_\_\_\_ AM/PM Close \_\_\_\_\_ AM/PM

everyday. For outside rentals, the time frame would be 6am-12pm and could be for any day of the week.

4. Does applicant (s) own the premises? Yes  No

If **NO** give name and address of owner.

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Town/City: \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_

5. Do you own or have any interest in any another Maine Liquor License?  Yes  No

If yes, please list License Number, Name, and physical location of any other Maine Liquor Licenses.

License # \_\_\_\_\_ Name of Business \_\_\_\_\_

Physical Location \_\_\_\_\_ City / Town \_\_\_\_\_

Use an additional sheet(s) if necessary.

6. List name, date of birth, place of birth for all applicants and managers. Give maiden name if married:

Name in full (Print Clearly)                      DOB                      Place of Birth

Robert T Layne - President	7/16/59	Gardiner, ME
Lauri J. Layne (Pottle) - Treasurer	1/9/63	Gardiner, ME
Felicia Beardsley (Aldrich) - Financial Sec	6/14/63	Bath, ME

Use a separate sheet of paper if necessary.

Residence address on all of the above for previous 5 years (Limit answer to city & State)

Name in Full                      City                      State

Robert T Layne - President	Randolph	ME
Lauri J Layne (Pottle) - Treasurer	Randolph	ME
Felicia Beardsley (Aldrich) - Financial Sec	Bowdoin	ME

### TO STATE OF MAINE MUNICIPAL OFFICERS & COUNTY COMMISSIONERS:

Hereby certify that we have complied with Section 653 of Title 28-A Maine Revised Statutes and hereby approve said application.

Dated at: \_\_\_\_\_, Maine: \_\_\_\_\_ On: \_\_\_\_\_  
City/Town                      County                      Date

The undersigned being:  Municipal Officers     County Commissioners    of the

City     Town     Plantation     Unincorporated Place    of: \_\_\_\_\_, Maine

Signature of Officials	Printed Name and Title

7. Has applicant(s) or managers(s) ever been convicted of any violation of the law, other than minor traffic violations of any State of the United States? YES  NO

Name: \_\_\_\_\_ Date of conviction: \_\_\_\_\_

Offense: \_\_\_\_\_ Location: \_\_\_\_\_

Disposition:  
\_\_\_\_\_

8. Has any other person any interest, directly or indirectly, in your business? YES  NO

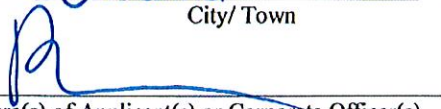
If YES, please provide name:  
\_\_\_\_\_

9. Has applicant(s) formerly held a Maine liquor license? YES \* NO

\*Only this BYOB license for this facility. This is a renewal.

NOTE: "I understand that false statements made on this form are punishable by law. Knowingly supplying false information on this form is a Class D offense under the criminal code, punishable by confinement of up to one year or by monetary fine of up to \$2,000.00 or both.

Dated at: Gardiner on March 4<sup>th</sup>, 20 21  
City/Town Day Year

  
Signature(s) of Applicant(s) or Corporate Officer(s)

Robert T Hayne  
Print Names of Applicant(s) or Corporate Officer(s)



*Bureau of Alcoholic Beverages and Lottery Operations  
Division of Liquor Licensing & Enforcement  
8 State House Station, Augusta, ME 04333-0008  
10 Water Street, Hallowell, ME 04347  
Tel: (207) 624-7220 Fax: (207) 287-3434  
Email Inquiries: [MaineLiquor@maine.gov](mailto:MaineLiquor@maine.gov)*

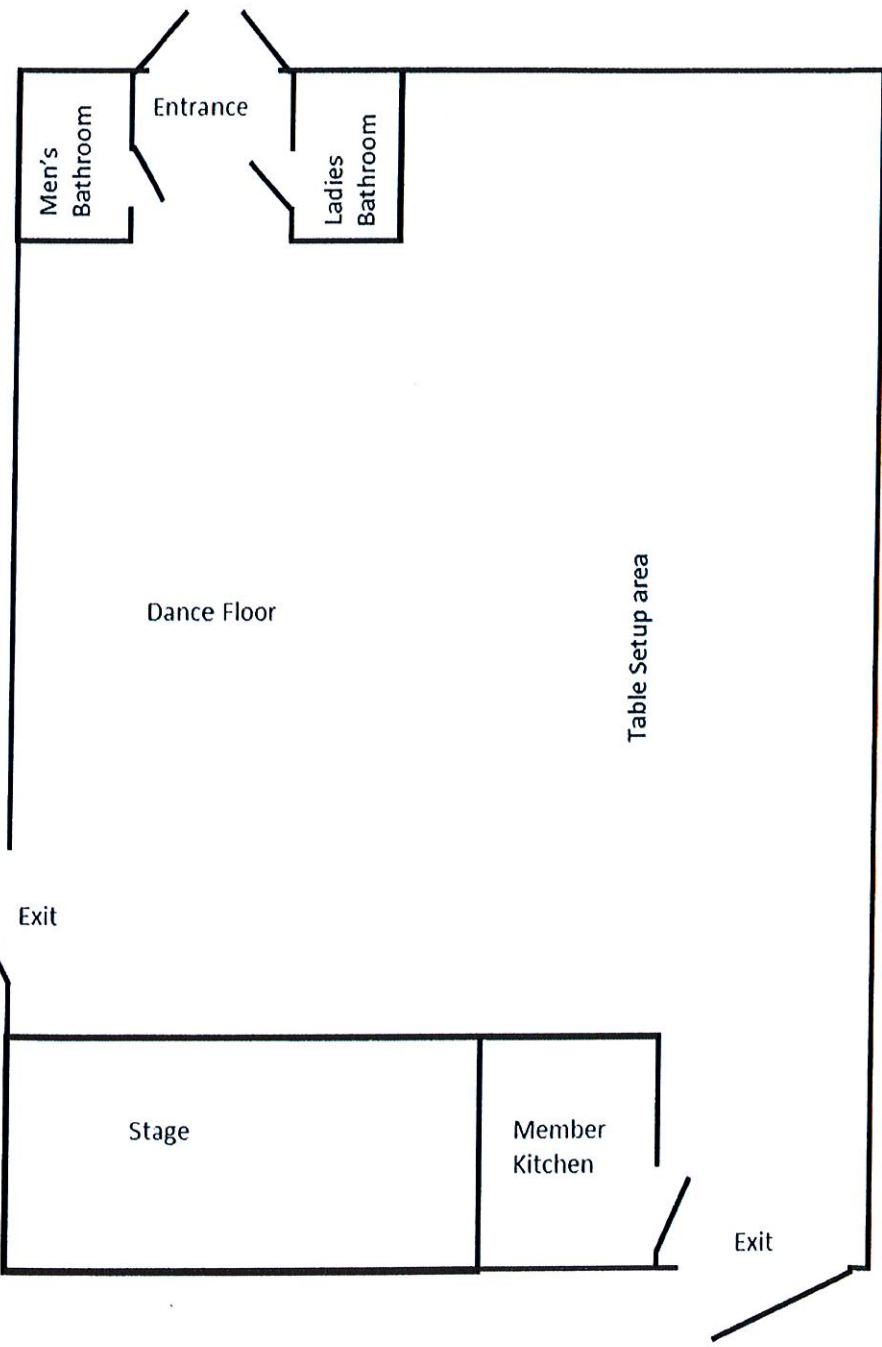
DIVISION USE ONLY
<input type="checkbox"/> Approved
<input type="checkbox"/> Not Approved
BY:

### ON PREMISE DIAGRAM

In an effort to clearly define your license premise and the area that consumption and storage of liquor is allowed. The Division requires all applicants to submit a diagram of the premise to be licensed in addition to a completed license application.

Diagrams should be submitted on this form and should be as accurate as possible. Be sure to label the areas of your diagram including entrances, office area, kitchen, storage areas, dining rooms, lounges, function rooms, restrooms, decks and all areas that you are requesting approval from the Division for liquor consumption.

See attached.
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Function hall upper level with member area below



Parking Area

Waterfront



**State of Maine**  
 Division of Alcoholic Beverages and  
 Lottery Operations  
 Division of Liquor Licensing and Enforcement

<b>For Office Use Only:</b>	
License #:	_____
SOS Checked:	_____
100% Yes	<input type="checkbox"/> No <input type="checkbox"/>

**Corporate Information Required for  
 Business Entities Who Are Licensees**

Questions 1 to 4 must match information on file with the Maine Secretary of State's office. If you have questions regarding this information, please call the Secretary of State's office at (207) 624-7752.

Please clearly complete this form in its entirety.

- Exact legal name: The Gardiner Sportsmen's Club
- Doing Business As, if any: \_\_\_\_\_
- Date of filing with Secretary of State: 9/9/17 State in which you are formed: Maine
- If not a Maine business entity, date on which you were authorized to transact business in the State of Maine: \_\_\_\_\_
- List the name and addresses for previous 5 years, birth dates, titles of officers, directors and list the percentage ownership: (attached additional sheets as needed)

NAME	ADDRESS (5 YEARS)	Date of Birth	TITLE	Ownership %
Robert T Layne	133 Windsor Street Randolph, ME 04346	7/16/59	President	0%
Lauri J Layne (Pottle)	133 Windsor Street Randolph, ME 04346	1/9/63	Treasurer	0%
Felicia Beardsley (Aldrich)	84 Spring Drive, Bowdoin, ME 04287	6/14/63	Financial Secretary	0%

(Stock ownership in non-publicly traded companies must add up to 100%.)



6. If Co-Op # of members: \_\_\_\_\_ (list primary officers in the above boxes)

7. Is any principal person involved with the entity a law enforcement official?

Yes  No  If Yes, Name: \_\_\_\_\_ Agency:

\_\_\_\_\_

8. Has any principal person involved in the entity ever been convicted of any violation of the law, other than minor traffic violations, in the United States?

Yes  No

9. If Yes to Question 8, please complete the following:  
(attached additional sheets as needed)

Name: \_\_\_\_\_

Date of Conviction: \_\_\_\_\_

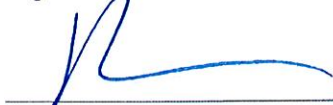
Offense: \_\_\_\_\_

Location of Conviction: \_\_\_\_\_

Disposition: \_\_\_\_\_

\_\_\_\_\_

Signature:



Signature of Duly Authorized Person

3/4/21

Date

Robert T Hayne  
Print Name of Duly Authorized Person

Submit Completed Forms To:

Bureau of Alcoholic Beverages  
Division of Liquor Licensing and Enforcement  
8 State House Station, Augusta, Me 04333-0008 (Regular address)  
10 Water Street, Hallowell, ME 04347 (Overnight address)  
Telephone Inquiries: (207) 624-7220 Fax: (207) 287-3434  
Email Inquiries: [MaineLiquor@Maine.gov](mailto:MaineLiquor@Maine.gov)

Bureau of Alcoholic Beverages  
 Division of Liquor Licensing & Enforcement  
 8 State House Station  
 Augusta, ME 04333-0008  
 Tel: (207) 624-7220 Fax: (207) 287-3434

**SUPPLEMENTARY QUESTIONNAIRE FOR CLUB APPLICANTS**

1. Legal Club Name: The Gardiner Sportsmen's Club

2. D/B/A Name: \_\_\_\_\_

3. Complete Title, name, date of birth and telephone number for each principal officer of the club:

Title	Name	Birth Date	Telephone
President	Robert T Layne	7/16/59	207-615-5229
Treasurer	Lauri J Layne (Pottle)	1/9/63	207-458-5428
Financial Sec	Felicia Beardsley (Aldrich)	6/14/63	207-666-3136

4. Date Club was incorporated: 9/9/47

5. Purpose of Club:  Social  Recreational  Patriotic  Fraternal

6. Date regular meetings are held: 1st and 3rd Thursday of the month

7. Date of election of Club Officers: Last meeting of the year

8. Date elected officers are installed: First meeting of the year

9. Total Membership: 125 Annual Dues: \$70/yr Payable When: Jan - Apr

10. Does the Club cater to the public or to groups of non-members on the premises?  
 Yes  No  One has to be a member to rent the facility or be sponsored by a member.

11. Excluding salaries, will any person, other than the Club, receive any of the financial profits from the sales of liquors? Yes  No  Alcohol is not sold at the club - BYOB license only

12. If a manager or steward is employed, complete the following:

Name: N/A Date of Birth: \_\_\_\_\_

Please sign in blue ink

 President 3/4/21  
 Signature & Title of Club Officer Date

Robert T Layne, President  
 Print Name & Title of Club Officer