

GARDINER CITY COUNCIL AGENDA ITEM INFORMATION SHEET



| | 1154 | |
|--|--|---|
| Meeting Date | 09/22/2021 | Department City Clerk |
| Agenda Item | 4.k.) Application for a liquor license | e renewal from the Bench located at 418 Water Stre |
| Est. Cost | | |
| | cant is Thomas Moody. | oplying to renew their liquor license for 101+ seats. |
| Requeste Actio | | se renewal for the Bench located at 418 Water Stree |
| City Manage and/o Finance Review | r | s the above action. |
| Council Vote Action Take | | |
| Departmenta Follow-U | | |
| Clark | d Reading Ad | dvertised <u>EFFECTIVE DATE</u> dvertised 1/in 15 Days |

STATE OF MAINE



DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES BUREAU OF ALCOHOLIC BEVERAGES AND LOTTERY OPERATIONS DIVISION OF LIQUOR LICENSING AND ENFORCEMENT

Application for an On-Premises License

All Questions Must Be Answered Completely. Please print legibly.

| Div | ision Use | Only | |
|----------------|-----------|------|--|
| License No: | | | |
| Class: | Ву: | | |
| Deposit Date: | | | |
| Amt. Deposited | ; | | |
| Payment Type: | | | |
| OK with SOS: | Yes 🗆 | No □ | |

| Section I: | Licensee/Applicant(s) Information |
|------------|-----------------------------------|
| | Type of License and Status |

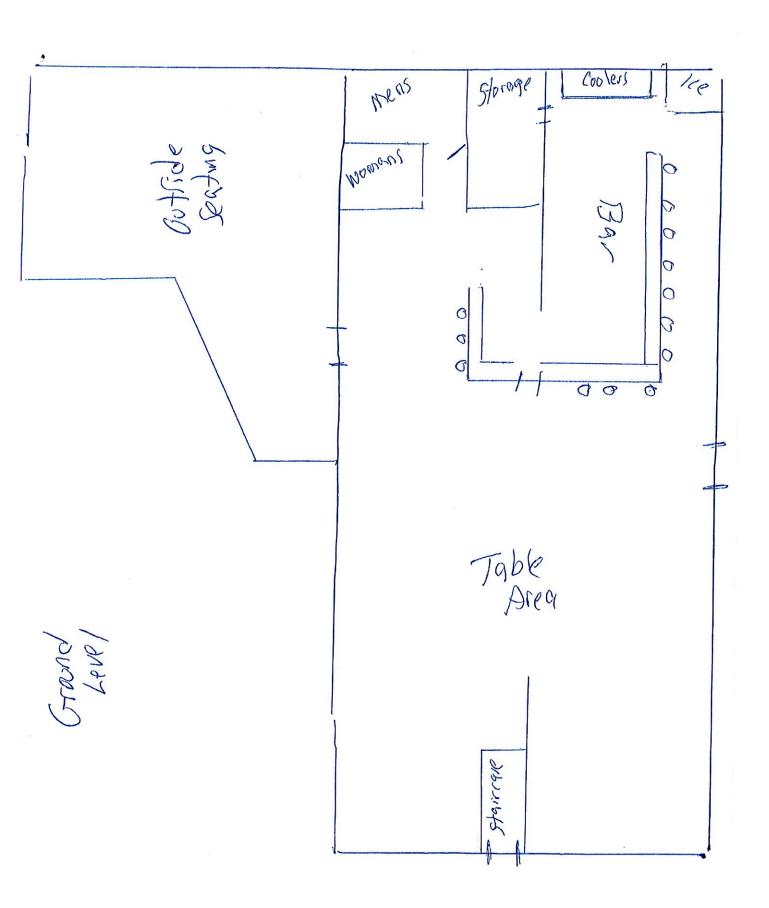
| Legal Business Entity Applicant Name (corporation, LLC): | Business Name (D/B/A): |
|---|--|
| | The Bench |
| Individual or Sole Proprietor Applicant Name(s): | Physical Location: |
| Thomas P. Moody | 418 Water Street Gardiner, p |
| Individual or Sole Proprietor Applicant Name(s): | Mailing address, if different: |
| | |
| Mailing address, if different from DBA address: | Email Address: |
| P.O. Box 203 So. Gov June 1 Mo 04359 Telephone # Fax #: | Tom d) Talegmail. (OM) Business Telephone # Fax #: |
| Telephone # Fax #: | |
| 582-4277 215-9935 | 582-9271 |
| Federal Tax Identification Number: | Maine Seller Certificate # or Sales Tax #: |
| 01-0469904 | 1197939 |
| Retail Beverage Alcohol Dealers Permit: | Website address: |
| CARL-2019-11788 | |
| | |
| 1. New license or renewal of existing license? | ew Expected Start date: |
| | enewal Expiration Date: 9-21-21 |
| ZC K | enemai Expiración Date. 7 |
| | |
| 2. The dollar amount of gross income for the licensure period | I that will end on the expiration date above: |
| Food: 100,940 Beer, Wine or Spirits: | 298083 Guest Rooms: |
| Food: <u>/60,940</u> Beer, Wine or Spirits: | The results |
| | |
| 3. Please indicate the type of alcoholic beverage to be sold: (| check all that apply) |
| ☑ Malt Liquor (beer) ☑ Wine ☑ | Spirits |

| 4. | 4. Indicate the type of license applying for: (choose only one) | | | | | | | | | | |
|----|--|---------------------|-----------------------------|--------|-----------|-----------------|----------------------------|-----------|----------|-----------------|-------------------|
| | | Restaur (Class I | ant , II, III, I | V) | Ø | Class (Class | A Restaurant/Lounge XI) | | | Class (Class | A Lounge X) |
| | | Hotel (Class I | , II, III, I | V) | | Hotel (Class | – Food Optional I-A) | | | Bed & (Class | : Breakfast V) |
| | | | ourse (incl , II, III, I | | mal licen | ses, pleas | se check if apply) 🔲 | Auxili | ary | | Mobile Cart |
| | | Tavern (Class I | V) | Other: | | | | | | | |
| | | Qualific | ed Catere | r | | | Self-Sponsored Event | ts (Qual | ified C | aterers (| Only) |
| | | | | Refer | to Sectio | n V for t | he License Fee Schedule on | i page 9 | | | |
| | 5. Business records are located at the following address: 4/8 Wg-fe Street Gev Me 6. Is the licensee/applicant(s) citizens of the United States? 7. Is the licensee/applicant(s) a resident of the State of Maine? NOTE: Applicants that are not citizens of the United States are required to file for the license as a | | | | | | | | No | | |
| 8. | business entity. 8. Is licensee/applicant(s) a business entity like a corporation or limited liability company? | | | | | | | | | | |
| | | Yes | | No | If Yes | , compl | ete Section VII at the e | end of th | is appli | cation | |
| 9. | 9. For a licensee/applicant who is a business entity as noted in Section I, does any officer, director, member, manager, shareholder or partner have in any way an interest, directly or indirectly, in their capacity in any other business entity which is a holder of a wholesaler license granted by the State of Maine? | | | | | | | | | | |
| | | Yes | | No | | | | | | | |
| | Not applicable – licensee/applicant(s) is a sole proprietor | | | | | | | | | | |

| 10. Is the licensee or applicant for a license receiving, directly or indirectly, any money, credit, thing of value, endorsement of commercial paper, guarantee of credit or financial assistance of any sort from any person or entity within or without the State, if the person or entity is engaged, directly or indirectly, in the manufacture, distribution, wholesale sale, storage or transportation of liquor. | | | | | | | | |
|---|--|-------------------------------------|--|--|--|--|--|--|
| □ Yes 🖸 No | | | | | | | | |
| If yes, please provide details: | | | | | | | | |
| 11. Do you own or have any interest in any art If yes, please list license number, busines pages as needed using the same format) | | | | | | | | |
| Name of Business | License Number | Complete Phys | sical Address | | | | | |
| Tiger Town Discount | Agn-2017-888 | 20 Majne | Ave badiner, Me | | | | | |
| | | | , | | | | | |
| 12. List name, date of birth, place of birth licensee/applicant. Provide maiden name format) | for all applicants in , if married, (attach a | ncluding any ma additional pages | anager(s) employed by the as needed using the same | | | | | |
| Full Name | | DOB | Place of Birth | | | | | |
| Thomas P. Moody | / | 5-12-1963 | Augosta, ME | | | | | |
| Residence address on all the above for previous Name Name Name | Address: 82 Sherk Address: Address: | ourne Due, | So. 60, Iner, Me | | | | | |
| Name | Address: | | | | | | | |

| 13. W | ill any | law enf | orceme | ent officer dir | rectly benefit | financially | y from th | nis licen | se, if iss | sued? | | |
|---------------|-------------|-----------------------|----------|-----------------|---|------------------|-----------|-----------|------------|--------|-------------|----------|
| | | Yes | | No | | | | | | | | |
| | If Yes | s, provid | de nam | e of law enfo | orcement offic | er and de | partment | where | employ | ed: | | |
| | | censee/ d States | | nt(s) ever be | en convicted | of any vio Io | lation of | fthe liqu | uor laws | in Ma | ine or any | State of |
| | If Ye forma | | e provi | de the follov | ving informat | ion and a | ttach add | litional | pages a | s need | ed using th | ie same |
| Name: | | | | | | Dat | e of Con | viction: | 1 | | | |
| Offens | e; | | | | | Loc | ation: _ | | | | | |
| Dispos | ition: | | | | | | | | | | | |
| 15. Ha vio | lations | s, in Ma s, please | ine or a | my State of t | been convicted he United State ving informate | tes? | Yes | X | No | | | |
| Name: | | | | | | Date | of Con | viction: | | | | |
| Offens | e: | | | | | Loc | ation: | | | | | |
| Dispos | ition: | | | | | | ~ | | | | | |
| 16. Ha | s the li | censee/ | applica | nt(s) formerl | y held a Mair | e liquor li | cense? | Ø | Yes | | No | |
| 17. Do | es the | licensee | /applic | ant(s) own th | ne premises? | and the second | Yes | Ø | No | | | |
| | If No. | please | provide | the name ar | nd address of | the owner | | | | | | |
| | Ave | a Lea | ling | « Develop | ment, 40 | 7 Lower | Dee/ | 1411/ | 090 | BING | , Main | 04358 |

| 18. If you are applying for a liquor license for a Hotel or rooms available: | r Bed & Breakfast, please provide the number of guest |
|--|---|
| 19. Please describe in detail the area(s) within the premi diagram in Section VI. (Use additional pages as needed | 1) |
| A 30×60 2 Story Buildin Ground floor for Consum cooler. | g with a 30x24 outside deck ption-upstairs Storage and keg |
| 20. What is the distance from the premises to the near house, measured from the main entrance of the prem church, chapel or parish house by the ordinary cours Name: Winter Street By Ast Distance: 1200 At. | rest school, school dormitory, church, chapel or parish ises to the main entrance of the school, school dormitory, e of travel? |
| Section II: Signature of Applicant(s) | |
| By signing this application, the licensee/applicant under punishable by law. Knowingly supplying false informati Criminal Code, punishable by confinement of up to one | on on this application is a Class D Offense under Maine's |
| Please sign and date in blue ink. | |
| Dated: _9-7-21 | |
| Them Mudy | |
| Signature of Duly Authorized Person | Signature of Duly Authorized Person |
| Thomas Moody | |
| Printed Name Duly Authorized Person | Printed Name of Duly Authorized Person |



Section III: For use by Municipal Officers and County Commissioners only

| The undersigned hereby certifies that approve this on-premises liquor licen | at we have complication. | d with the process outlined in 28- | A M.R.S. §653 and |
|---|--|--|-------------------------------|
| Dated: | | | |
| Who is approving this application? | ☐ Municipal Offi | cers of | |
| | ☐ County Commi | ssioners of | County |
| records of Local Opti be licensed by the Bu week. Please check t | on Votes have been reau for the type of his box to indicate th | County Commissioners must confiverified that allows this type of establicohol to be sold for the appropriate its verification was completed. | blishment to e days of the |
| Signature of Office | cials | Printed Name and T | itle |
| | | | |
| 700,000,000,000,000,000 | | | |
| | | | |
| | | | |
| | | | |
| | | | |

This Application will Expire 60 Days from the date of Municipal or County Approval unless submitted to the Bureau

Included below is the section of Maine's liquor laws regarding the approval process by the municipalities or the county commissioners. This is provided as a courtesy only and may not reflect the law in effect at the time of application. Please see http://www.mainelegislature.org/legis/statutes/28-A/title28-Asec653.html

§653. Hearings; bureau review; appeal

1. Hearings. The municipal officers or, in the case of unincorporated places, the county commissioners of the county in which the unincorporated place is located, may hold a public hearing for the consideration of applications for new on-premises licenses and applications for transfer of location of existing on-premises licenses. The municipal officers or county commissioners may hold a public hearing for the consideration of requests for renewal of licenses, except that when an applicant has held a license for the prior 5 years and a complaint has not been filed against the applicant within that time, the applicant may request a waiver of the hearing.

A. The bureau shall prepare and supply application forms.