

**CITY OF MARLBOROUGH**  
**LICENSE BOARD POSTING**

RECEIVED  
CITY CLERK'S OFFICE  
CITY OF MARLBOROUGH

Meeting Name: License Board Regular Monthly Meeting

Date: Wednesday, May 27, 2015

2015 MAY 22 P 12: 12

Time: 7:30 PM

Location: City Council Committee Room, Main Floor of City Hall

Agenda Items to be addressed:

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Administrative Business:

1. Review minutes –  
Regular meeting, April 29, 2015

New Business:

1. Wayside Racquet & Swim Club Change of Manager – Joyce Koenig
2. One Day Permits
  - Immaculate Conception School Parents Assoc. 1 one-day permit
  - Moose Lodge 5 one-day permits
  - Tasty Home Cookin'
3. Interest in Beer and Wine License for a new establishment (not yet opened, but has building docs/permits and Food Plan Review in process) Kindle's Pizzeria – Brick Oven Pizza, Owner is Dave Champeau – in for informal discussion on license availability
4. MHQ Class I Auto License
5. Misc. correspondence and open issues
  - Invitation to Municipal Licensing Corp Dinner
  - Mass Lottery Commission re: Keno at Funky Murphy's
6. Reports from Chairman
  - Silk Road Bistro update

Old Business

Adjournment

THE LISTING OF TOPICS THAT THE CHAIR REASONABLY ANTICIPATES WILL BE DISCUSSED AT THE MEETING IS NOT INTENDED AS A GUARANTEE OF THE TOPICS THAT WILL HAVE BEEN DISCUSSED. NOT ALL TOPICS LISTED MAY IN FACT BE DISCUSSED, AND OTHER TOPICS NOT LISTED MAY ALSO BE BROUGHT UP FOR DISCUSSION TO THE EXTENT PERMITTED BY LAW.



## City of Marlborough License Board

140 Main Street, Lower Level  
Marlborough, MA 01752  
(508) 460-3751 FAX (508) 460-3625

### Minutes of the License Board Regular Meeting Held April 29, 2015 at 7:30 am, City Hall, 1<sup>st</sup> floor, Council Committee Room

Attending: Walter Bonin, Chairman; Gregory Mitrakas, Member; David Bouvier, Member and Tina Nolin, Clerk

Meeting called to order by Walter Bonin, Chairman at 7:30 PM

#### New Business

##### **1. One Day Permits**

- ITAM – **4** Permits - GM motioned for approval, DB seconded, Approved 3-0
- Residence Inn – **1** Permit - GM motioned to approve, DB seconded, Approved 3-0
- Strange Brew – **1** Permit - GM motioned to approve, DB seconded, Approved 3-0
- Tasty Home Cookin’ **10** Permits - GM motioned to approve, DB seconded, Approved 3-0
- Vin Bin – Outdoor May/October - GM motioned to approve, DB seconded, Approved 3-0

##### **2. Halfway Café - Change of Manager Request/Application - Approved**

- GM motioned to approve, DB seconded; approved 3-0

##### **3. Bertucci's Brick Oven Ristorante - Change of Manager Request/Application – Approved**

- GM motioned to approve, DB seconded; approved 3-0

##### **4. Silk Road Bistro – Beer & Wine Cordials/Liquors Permit Application – Approved**

- Public meeting opened (7:38 pm) held – Opposed: 0, Positive: 0; No questions or comments
- Public Hearing closed (7:40 pm)
- Discussion: this is a license that had been forfeited so it the number of licenses in the city remain the same.
- GM motioned to approve, DB seconded; approved 3-0

##### **5. Capital Liquors and Capital Farms - Change of Hours Application (to 10:00 am Sundays)**

- DB motioned to approve, GM seconded; approved 3-0

**6. Fanz – For discussion of change of ownership (?) / change of Manager**

- Needs to submit name change – changed 2 years ago,
- There has been a change in ownership – 1 partner gone, another coming on – need to file that change as well

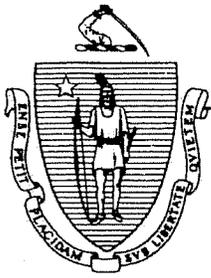
**7. Reports from Chairman**

- a. Sully's First Edition Pub – establishment had only temp occupancy permit until work completed. It had been completed, but not all parties notified. That has now been done and full permit given.
  
- b. Funky Murphy's not yet open – some thought that they may be looking to serve outside the building, but there is no evidence based on the building construction or available land around building that that is the case. Will continue to monitor and will address if such activity appears when they open.

Motion made to adjourn: 8:23 PM

Respectfully submitted,

Walter Bonin, Chairman



The Commonwealth of Massachusetts  
 Alcoholic Beverages Control Commission  
 239 Causeway Street  
 Boston, MA 02114  
 www.mass.gov/abcc

For Reconsideration

FORM 43  
 MUST BE SIGNED BY LOCAL LICENSING AUTHORITY

066200017

Marlborough

5/22/2015

ABCC License Number

City/Town

Local Approval Date

TRANSACTION TYPE (Please check all relevant transactions):

- |   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> New License                  | <input type="checkbox"/> New Officer/Director            | <input type="checkbox"/> Pledge of License          | <input type="checkbox"/> Change Corporate Name      |
| <input type="checkbox"/> Transfer of License          | <input type="checkbox"/> Change of Location              | <input type="checkbox"/> Pledge of Stock            | <input type="checkbox"/> Seasonal to Annual         |
| <input checked="" type="checkbox"/> Change of Manager | <input type="checkbox"/> Alteration of Licensed Premises | <input type="checkbox"/> Transfer of Stock          | <input type="checkbox"/> Change of License Type     |
| <input type="checkbox"/> Cordials/Liqueurs Permit     | <input type="checkbox"/> Issuance of Stock               | <input type="checkbox"/> New Stockholder            | <input type="checkbox"/> Other <input type="text"/> |
| <input type="checkbox"/> 6-Day to 7-Day License       | <input type="checkbox"/> Management/Operating Agreement  | <input type="checkbox"/> Wine & Malt to All Alcohol |   |

Name of Licensee  EIN of Licensee

D/B/A  Manager

ADDRESS:  CITY/TOWN:  STATE  ZIP CODE

Annual or Seasonal      Category: (All Alcohol- Wine & Malt Wine, Malt & Cordials)      Type: (Restaurant, Club, Package Store, General On Premises, Etc.)

Complete Description of Licensed Premises:

Application Filed:  Advertiser:  Abutters Notified: Yes  No

Date & Time      Date & Attach Publication

Licensee Contact Person for Transaction  Phone:

ADDRESS:  CITY/TOWN:  STATE  ZIP CODE

Remarks:

The Local Licensing Authorities By: \_\_\_\_\_

Alcoholic Beverages Control Commission  
 Ralph Sacramone  
 Executive Director

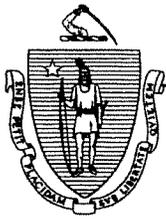
\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ABCC Remarks: \_\_\_\_\_



The Commonwealth of Massachusetts  
 Alcoholic Beverages Control Commission  
 239 Causeway Street  
 Boston, MA 02114  
[www.mass.gov/abcc](http://www.mass.gov/abcc)

Print Form

RETAIL ALCOHOLIC BEVERAGES LICENSE APPLICATION  
 MONETARY TRANSMITTAL FORM

APPLICATION SHOULD BE COMPLETED ON-LINE, PRINTED, SIGNED, AND SUBMITTED TO THE LOCAL LICENSING AUTHORITY.

ECRT CODE: RETA

CHECK PAYABLE TO ABCC OR COMMONWEALTH OF MA: \$200.00

(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP, OR INDIVIDUAL)

CHECK NUMBER

IF USED EPAY, CONFIRMATION NUMBER

A.B.C.C. LICENSE NUMBER (IF AN EXISTING LICENSEE, CAN BE OBTAINED FROM THE CITY)

LICENSEE NAME

ADDRESS

CITY/TOWN  STATE  ZIP CODE

**TRANSACTION TYPE (Please check all relevant transactions):**

- Alteration of Licensed Premises
- Change Corporate Name
- Change of License Type
- Change of Location
- Change of Manager
- Other
- Cordials/Liqueurs Permit
- Issuance of Stock
- Management/Operating Agreement
- More than (3) §15
- New License
- New Officer/Director
- New Stockholder
- Pledge of Stock
- Pledge of License
- Seasonal to Annual
- Transfer of License
- Transfer of Stock
- Wine & Malt to All Alcohol
- 6-Day to 7-Day License

THE LOCAL LICENSING AUTHORITY MUST MAIL THIS TRANSMITTAL FORM ALONG WITH THE CHECK, COMPLETED APPLICATION, AND SUPPORTING DOCUMENTS TO:

**ALCOHOLIC BEVERAGES CONTROL COMMISSION**  
**P. O. BOX 3396**  
**BOSTON, MA 02241-3396**





Commonwealth of Massachusetts  
Alcoholic Beverages Control Commission  
239 Causeway Street, First Floor  
Boston, MA 02114

STEVEN GROSSMAN  
TREASURER AND RECEIVER GENERAL

KIM S. GAINSBORO, ESQ.  
CHAIRMAN

CORI REQUEST FORM

The Alcoholic Beverages Control Commission has been certified by the Criminal History Systems Board to access conviction and pending Criminal Offender Record Information. For the purpose of approving each shareholder, owner, licensee or applicant for an alcoholic beverages license, I understand that a criminal record check will be conducted on me, pursuant to the above. The information below is correct to the best of my knowledge.

**ABCC LICENSE INFORMATION**

ABCC NUMBER: <small>(IF EXISTING LICENSEE)</small>	66200017	LICENSEE NAME:	Marlborough Enterprises, Inc	CITY/TOWN:	Marlborough, MA
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**APPLICANT INFORMATION**

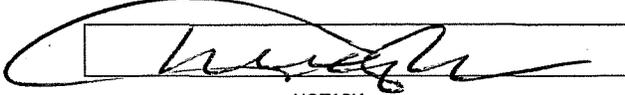
LAST NAME:	Koenig	FIRST NAME:	Joyce	MIDDLE NAME:	Catherine			
MAIDEN NAME OR ALIAS (IF APPLICABLE):	Williams	PLACE OF BIRTH:	Morristown, NJ					
DATE OF BIRTH:	04/04/1957	SSN:	[REDACTED]	ID THEFT INDEX PIN (IF APPLICABLE):				
MOTHER'S MAIDEN NAME:	Barbier	DRIVER'S LICENSE #:	[REDACTED]	STATE LIC. ISSUED:	Massachusetts			
GENDER:	FEMALE	HEIGHT:	5	4	WEIGHT:	160	EYE COLOR:	Green
CURRENT ADDRESS:	Zero Walker Street (2A)							
CITY/TOWN:	Maynard	STATE:	MA	ZIP:	01754			
FORMER ADDRESS:	3 Russell Street							
CITY/TOWN:	Watertown	STATE:	MA	ZIP:	02472			

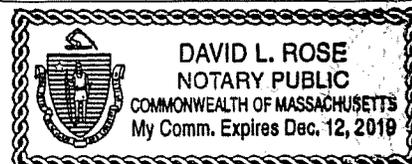
**PRINT AND SIGN**

PRINTED NAME:	Joyce C Koenig	APPLICANT/EMPLOYEE SIGNATURE:	<i>Joyce C Koenig</i>
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**NOTARY INFORMATION**

On this 20th day of May, 2015 before me, the undersigned notary public, personally appeared Joyce C Koenig  
(name of document signer), proved to me through satisfactory evidence of identification, which were MA DL  
to be the person whose name is signed on the preceding or attached document, and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose.

  
NOTARY



**DIVISION USE ONLY**

REQUESTED BY:	[REDACTED]
<small>SIGNATURE OF CORI-AUTHORIZED EMPLOYEE</small>	

The DCI Identify Theft Index PIN Number is to be completed by those applicants that have been issued an identity Theft PIN Number by the DCI. Certified agencies are required to provide all applicants the opportunity to include this information to ensure the accuracy of the CORI request process. ALL CORI request forms that include this field are required to be submitted to the DCI via mail or by fax to (617) 660-4614.



The Commonwealth of Massachusetts  
 Alcoholic Beverages Control Commission  
 239 Causeway Street  
 Boston, MA 02114  
[www.mass.gov/abcc](http://www.mass.gov/abcc)

**PERSONAL INFORMATION FORM**

Each individual listed in Section 10 of this application must complete this form.

**1. LICENSEE INFORMATION:**

A. Legal Name of Licensee	Marlborough Enterprises, Inc	B. Business Name (dba)	Wayside Racquet & Swim Club		
C. Address	80 Broadmeadow Street	D. ABCC License Number (If existing licensee)	066200017		
E. City/Town	Marlborough	State	MA	Zip Code	01752
F. Phone Number of Premise	508-481-1797	G. EIN of License	[REDACTED]		

**2. PERSONAL INFORMATION:**

A. Individual Name	Joyce Koenig	B. Home Phone Number	978-461-0535		
C. Address	Zero Walker Street				
D. City/Town	Maynard	State	MA	Zip Code	01754
E. Social Security Number	[REDACTED]	F. Date of Birth	04/04/1957		
G. Place of Employment	All Seasons Tennis Club, DBA Wayside Racquet & Swim Club, DBA All Seasons Tennis Academy				

**3. BACKGROUND INFORMATION:**

Have you ever been convicted of a state, federal or military crime? Yes  No

If yes, as part of the application process, the individual must attach an affidavit as to any and all convictions. The affidavit must include the city and state where the charges occurred as well as the disposition of the convictions.

**4. FINANCIAL INTEREST:**

Provide a detailed description of your direct or indirect, beneficial or financial interest in this license.

NONE

**IMPORTANT ATTACHMENTS (8):** For all cash contributions, attach last (3) months of bank statements for the source(s) of this cash.

\*If additional space is needed, please use the last page

I hereby swear under the pains and penalties of perjury that the information I have provided in this application is true and accurate:

Signature	Joyce C Koenig	Date	5/20/15
Title	[REDACTED]	(If Corporation/LLC Representative)	



The Commonwealth of Massachusetts  
 Alcoholic Beverages Control Commission  
 239 Causeway Street  
 Boston, MA 02114  
 www.mass.gov/abcc

**MANAGER APPLICATION**

All proposed managers are required to complete a Personal Information Form, and attach a copy of the corporate vote authorizing this action and appointing a manager.

**1. LICENSEE INFORMATION:**

Legal Name of Licensee:  Business Name (dba):

Address:

City/Town:  State:  Zip Code:

ABCC License Number:  Phone Number of Premise:   
 (If existing licensee)

**2. MANAGER INFORMATION:**

A. Name:  B. Cell Phone Number:

C. List the number of hours per week you will spend on the licensed premises:

**3. CITIZENSHIP INFORMATION:**

A. Are you a U.S. Citizen: Yes  No  B. Date of Naturalization:  C. Court of Naturalization:

(Submit proof of citizenship and/or naturalization such as U.S. Passport, Voter's Certificate, Birth Certificate or Naturalization Papers)

**4. BACKGROUND INFORMATION:**

A. Do you now, or have you ever, held any direct or indirect, beneficial or financial interest in a license to sell alcoholic beverages? Yes  No

If yes, please describe:

B. Have you ever been the Manager of Record of a license to sell alcoholic beverages that has been suspended, revoked or cancelled? Yes  No

If yes, please describe:

C. Have you ever been the Manager of Record of a license that was issued by this Commission? Yes  No

If yes, please describe:

D. Please list your employment for the past ten years (Dates, Position, Employer, Address and Telephone):

I hereby swear under the pains and penalties of perjury that the information I have provided in this application is true and accurate:

Signature  Date

**MARLBOROUGH ENTERPRISES, INC.**  
Action by Unanimous Consent of Stockholders

The undersigned, being the sole Stockholder of Marlborough Enterprises, Inc., a Massachusetts business corporation having its principal business offices at 1 Main Street, Whitinsville, Massachusetts 01588, at a meeting duly called for the purpose of the vote taken below and pursuant to the provisions of Massachusetts General Laws Chapter 156D.

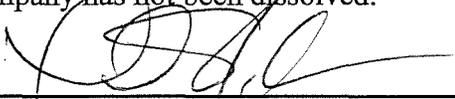
RESOLVED: That the Company apply to the Licensing Board for the City of Marlborough to effectuate a change in Manager from Leonard Jolles to Joyce Koenig.

RESOLVED: To authorize Joyce Koenig to serve as Manager under the liquor license and to execute any necessary papers and to do all things required relative to the application for the granting of the license.

RESOLVED: To appoint Joyce Koenig as the Wayside Racquet and Swim Club's bar manager or principal representative, with full authority and control of the premises described in the license of the Company and of the conduct of all business therein relative to alcoholic beverages as the licensee itself could in any way have and exercise if it were a natural person resident in the Commonwealth of Massachusetts and that a copy of this vote duly certified by the Stockholders of the Company and delivered to said manager shall constitute the written authority required by M.G.L Chapter 138, Sec. 26.

CERTIFICATION

I, the undersigned Secretary of Marlborough Enterprises, Inc. do certify that the foregoing is a true, exact and correct copy of a the vote taken at the lawfully held meeting of the Company's stockholders on the date referenced below and that all of the stockholders of Marlborough Enterprises, Inc. are residents of the Commonwealth and citizens of the United States and that the Company has not been dissolved.

By:   
\_\_\_\_\_  
Leonard Jolles, President, Treasurer and Secretary

By:   
\_\_\_\_\_  
Leonard Jolles, Sole Stockholder

Date: May 19, 2015

Additional Space

Please note which question you are using this space for.

A large, empty rectangular box with a thin black border, occupying most of the page below the text. It is intended for students to provide additional space for their answers, with the instruction to note which question they are using it for.

## Change of Manager Checklist

This application will be returned if the following documentation is not submitted:

- Retail Transmittal Form
- \$200.00 Fee made payable to the Commonwealth of Massachusetts or the ABCC
- Petition for Change of License
- Manager's Form
- Personal Information Form
- CORI Application
- Vote of Corporate Board or LLC
- Form 43 (From Local Licensing Board)
- Proof of Citizenship (Submit proof of citizenship and/or naturalization such as U.S. Passport, Voter's Certificate, Birth Certificate or Naturalization Papers)



# CITY OF MARLBOROUGH

## LICENSE BOARD

140 Main Street, Lower Level  
Marlborough, Massachusetts 01752  
Facsimile (508) 460-3625 TDD (508) 460-3610

Walter Bonin, Chairman  
Gregory Mitrakas, Member  
David Bouvier, Member  
Tel (508) 460-3751

License: \_\_\_\_\_  
Fee: **\$25** \_\_\_\_\_  
Date: \_\_\_\_\_

### APPLICATION FOR A ONE DAY PERMIT

I hereby make application for a SPECIAL ALCOHOLIC BEVERAGE LICENSE for the purpose of selling and dispensing ALL and/or WINE/MALT beverages as permitted by law at a:

Family BBQ

\_\_\_\_\_ (state whether a banquet, concert, picnic, dance etc.)

Which is to be held by Immaculate Conception School Parents Association  
(Name of Organization)

25 Washington Court, Marlborough, MA  
(Address of Organization)

a educational/religious Organization, to be held on Friday, June 12, 2015  
(Date)

between the hours 5:00 pm to 8:00 pm at the following

described place Meehan Hall Building and Parking Lot

I certify that I am the co-president of the Organization

And that I will be responsible for the proper observance of the laws governing

the dispensing of such alcoholic beverage.

Signed Francis D. Mansen (Francis D. Mansen)

Home Address 74 Hosmer Street, Hudson, MA 01749

Telephone # 978-212-5758



**License Board**

Marlborough City Hall  
140 Main St. - Lower Level  
Marlborough, MA 01752

License: \_\_\_\_\_

Fee: \_\_\_\_\_

Date: 5/20/15

**APPLICATION FOR A ONE DAY PERMIT**

I hereby make application for a SPECIAL ALCOHOLIC BEVERAGE  
LICENSE for the purpose of selling and dispensing ALL and/or  
WINE/MALT beverages as permitted by law at a:

Horseshoe Tournament (weekly)  
(state whether a banquet, concert, picnic, dance, etc.)

Which is to be held by Moose Lodge 1129  
(Name of Organization)

67 Fitchburg Street, Marlboro, MA 01752  
(Address of Organization)

a NON-PROFIT Organization, to be held on 6/4/15  
(Date)

between the hours of 4:00 to 9:00 PM at the  
following described place outside Pavilion

I certify that I am Bar Manager of the Organization  
and that I will be responsible for the proper observance of the laws  
governing the dispensing of such alcoholic beverage.

Signed Nancy Ronayne  
NANCY RONAYNE  
Home Address 43 Candice St  
Clinton, MA 01  
Telephone# 508 330-6751



License Board  
Marlborough City Hall  
140 Main St. - Lower Level  
Marlborough, MA 01752

License: \_\_\_\_\_  
Fee: \_\_\_\_\_

Date: 5/20/15

APPLICATION FOR A ONE DAY PERMIT

I hereby make application for a SPECIAL ALCOHOLIC BEVERAGE  
LICENSE for the purpose of selling and dispensing ALL and/or  
WINE/MALT beverages as permitted by law at a:

Horseshoe Tournament (weekly)  
(state whether a banquet, concert, picnic, dance, etc.)

Which is to be held by Moose Lodge 1129  
(Name of Organization)

67 Fitchburg Street, Marlboro, MA 01752  
(Address of Organization)

a NON-PROFIT Organization, to be held on 6/11/15  
(Date)

between the hours of 4:00 to 9:00 PM at the

following described place outside Pavilion

I certify that I am Bar Manager of the Organization

and that I will be responsible for the proper observance of the laws

governing the dispensing of such alcoholic beverage.

Signed Mary Ronayne  
MARCY RONAYNE

Home Address 43 Candice St  
Clinton, MA 01

Telephone# 508 320-6751



License Board  
Marlborough City Hall  
140 Main St. - Lower Level  
Marlborough, MA 01752

License: \_\_\_\_\_

Fee: \_\_\_\_\_

Date: 5/20/15

APPLICATION FOR A ONE DAY PERMIT

I hereby make application for a SPECIAL ALCOHOLIC BEVERAGE

LICENSE for the purpose of selling and dispensing ALL and/or

WINE/MALT beverages as permitted by law at a:

Cook - out - Banquet

(state whether a banquet, concert, picnic, dance, etc.)

Which is to be held by Moose Lodge 1129  
(Name of Organization)

67 Fitchburg St, Marlboro, MA 01752  
(Address of Organization)

a NON Profit Organization, to be held on 6/16/15  
(Date)

between the hours of 2:00 PM to 10:00 PM at the

following described place Outside Pavilion

I certify that I am Bar Manager of the Organization

and that I will be responsible for the proper observance of the laws

governing the dispensing of such alcoholic beverage.

Signed Nancy R

Nancy Ronayne

Home Address 43 Candice St  
Clinton, MA 01510

Telephone# 508 330-6751



License Board  
Marlborough City Hall  
140 Main St. - Lower Level  
Marlborough, MA 01752

License: \_\_\_\_\_  
Fee: \_\_\_\_\_

Date: 5/20/15

**APPLICATION FOR A ONE DAY PERMIT**

I hereby make application for a SPECIAL ALCOHOLIC BEVERAGE  
LICENSE for the purpose of selling and dispensing ALL and/or  
WINE/MALT beverages as permitted by law at a:

Horseshoe Tournament (weekly)  
(state whether a banquet, concert, picnic, dance, etc.)

Which is to be held by Moose Lodge 1129  
(Name of Organization)

67 Fitchburg Street, Marlboro, MA 01752  
(Address of Organization)

a NON-PROFIT Organization, to be held on 6/18/15  
(Date)

between the hours of 4:00 to 9:00 PM at the  
following described place Outside Pavilion

I certify that I am Bar Manager of the Organization  
and that I will be responsible for the proper observance of the laws  
governing the dispensing of such alcoholic beverage.

Signed Nancy Ronayne  
NANCY RONAYNE

Home Address 43 Candice St  
Clinton, MA 01

Telephone# 508 320-6751



License Board  
Marlborough City Hall  
140 Main St. - Lower Level  
Marlborough, MA 01752

License: \_\_\_\_\_

Fee: \_\_\_\_\_

Date: 5-20-15

APPLICATION FOR A ONE DAY PERMIT

I hereby make application for a SPECIAL ALCOHOLIC BEVERAGE  
LICENSE for the purpose of selling and dispensing ALL and/or  
WINE/MALT beverages as permitted by law at a:

Family Cookout  
(state whether a banquet, concert, picnic, dance, etc.)

Which is to be held by Moose Lodge 1129  
(Name of Organization)

67 Fitchburg St, Marlboro, MA 01752  
(Address of Organization)

a NON Profit Organization, to be held on 6/20/15  
(Date)

between the hours of 5:00 to 11:00 PM at the  
following described place Outside Pavilion

I certify that I am Bar Manager of the Organization

and that I will be responsible for the proper observance of the laws  
governing the dispensing of such alcoholic beverage.

Signed Nancy R  
Nancy Ronayne  
Home Address 43 Candice St  
Clinton, MA 01510  
Telephone# 508 380-6751



License Board  
Marlborough City Hall  
140 Main St. - Lower Level  
Marlborough, MA 01752

License: \_\_\_\_\_

Fee: \_\_\_\_\_

Date: 5/20/15

APPLICATION FOR A ONE DAY PERMIT

I hereby make application for a SPECIAL ALCOHOLIC BEVERAGE  
LICENSE for the purpose of selling and dispensing ALL and/or  
WINE/MALT beverages as permitted by law at a:

Horseshoe Tournament (weekly)  
(state whether a banquet, concert, picnic, dance, etc.)

Which is to be held by Moose Lodge 1129  
(Name of Organization)

67 Fitchburg Street, Marlboro, MA 01752  
(Address of Organization)

a NON-PROFIT Organization, to be held on 6/25/15  
(Date)

between the hours of 4:00 to 9:00 PM at the  
following described place Outside Pavilion

I certify that I am Bar Manager of the Organization  
and that I will be responsible for the proper observance of the laws  
governing the dispensing of such alcoholic beverage.

Signed Mary Ronayne  
RYANCI RONAYNE  
Home Address 43 Candice St  
Clinton, MA 01  
Telephone# 508 320-6751

# MUNICIPAL LICENSING CORPORATION

45 School Street – Room B5  
Brockton, MA 02301  
[www.municipallicensing.com](http://www.municipallicensing.com)

Richard V. Scali, President  
Wayne Brasco, Vice-President  
Bonnie Tucker, Treasurer  
Nancy Lucier, Secretary

Lisa Johnson, BOD  
Tracie Craig, BOD  
Maggie Flynn, BOD

Date: April 28, 2015

To: All Municipal Licensing Agents; City Clerks; Licensing Boards, Administrative Assistants

Fr: Richard V. Scali, President (Consumer Affairs, Town of Barnstable); Wayne Brasco, Sr., Vice-President (Chairman, Waltham License Commission); Bonnie Tucker, Treasurer (Brockton Licensing); Nancy E. Lucier, Secretary (Municipal Assistant, W. Boylston)

Re: Meeting of Municipal Licensing Group  
Tuesday, June 9, 2015  
Lombardo's, 6 Billings Street, Randolph, MA

It is a pleasure to send you this letter in hopes that you will attend our annual meeting in June! We are excited to be meeting this year in Randolph at Lombardo's, a new site for us! It has been a tough year for us all with the amounts of snow!

As you know, we are representatives of city and town licensing departments, boards and commissions, who want to share information and learn from each others experiences in the application, processing and investigation of primarily alcohol licenses, as well as other licenses for our cities and towns. Membership is at an all time high with over 80 cities and towns as our members.

After 17 years in existence, our own website: [www.municipallicensing.com](http://www.municipallicensing.com) has grown in leaps and bounds. We now can post our agenda and minutes; provide links to relevant sites; post updates and information you may need to know. Please check it out and you can also post your own comments and questions. While Lisa Johnson is our contact person on the web, we will take comments at any time by email as well.

NEXT MEETING:

SUBJECTS:

- 1) Welcome by the Town of Randolph
- 2) Membership and Dues- See membership information enclosed. Presenter-Wayne Brasco, Chairman, Waltham Licensing. Meet our new Board members, Tracie Craig- Town of Lakeville; Maggie Flynn- Town of Barnstable
- 3) Update on Our new Website- [www.municipallicensing.com](http://www.municipallicensing.com)- Presenter, Lisa Johnson, Town of Plymouth, and other Board members
- 4) LUNCH is SERVED
- 5) Department of Revenue-Marianne D. Lafitte, ALIF Reporting
- 6) Alcohol Beverages Control Commission-Ralph Sacramone, Executive Secretary; Kim Gainsboro, Chairman
  - a) Update on E-permitting System
  - b) Powdered Alcohol and Alcohol Infused Ice Cream
  - c) Home Delivery of Alcohol- i.e. Grizly

**MUNICIPAL LICENSING CORPORATION**

**Annual Meeting**

Tuesday, June 9, 2015 - 11:45 a.m. to 3:00 p.m.

**RSVP AND MEAL CHOICE FORM**

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**Location:** *Lombardo's*  
*6 Billings Street*  
*Randolph, MA*

**This form must be returned no later than Thursday, MAY 28, 2015.**

Everyone welcome; however, Cities/Towns which have not paid dues for this year (July 1, 2014 thru June 30, 2015) must include a check (no cash) in the amount of \$30 for each meal - Make check payable to "Municipal Licensing Corporation"\*\*\*\*Please Note: No meal will be ordered unless payment accompanies this form and payments will not be accepted at the door.

**Choices:** Grilled Atlantic Salmon - *Roasted petite red potatoes, buttered green beans, lemon caper sauce; or*  
Herb Roasted Chicken Breast - *Garden vegetable risotto, spring herb and sherry reductions*  
*Entrees include Salad, Rolls & butter, Dessert, Coffee & Tea*

**City or Town:** \_\_\_\_\_

Please include Names of Persons who will be attending and meal choice.  
Cities and Towns which have paid Membership dues up to date (July 2014 thru June 30, 2015) - Two meals included at no charge. \$30.00 for each additional meal must accompany this form.

<u>Name and Title</u>	<u>Meal Choice</u>
_____	_____
_____	_____
_____	_____
_____	_____

**Mail to:** **Bonnie Tucker**  
**Brockton License Commission**  
**City Hall - 45 School Street**  
**Brockton, MA 02301**      **Any questions please call Bonnie - (508) 580-7805**



# Massachusetts State Lottery Commission

DEBORAH B. GOLDBERG  
*Treasurer and Receiver General*

BETH BRESNAHAN  
*Executive Director*

**received**  
5/8/15 TLW

May 6, 2015

City of Marlborough  
Licensing Board  
140 Main Street  
Marlborough, MA 01752

Dear Sir/Madam:

In accordance with Massachusetts General Laws, chapter 10, section 27A, (as amended on 5/20/96), you are hereby notified that an application for a Keno license has been received by the Massachusetts State Lottery Commission, (MSLC) from:

Funky Murphy's  
31-35 Main Street  
Marlborough, MA 01752

If the city/town objects to the issuance of the Keno license, it must claim its right to a Hearing before the MSLC within twenty-one (21) days of receipt of this letter.

In accordance with section 27A(b), the objection of the city/town must be "as a result of an official action" taken by said city or town regarding the Keno applicant. In order to be fair and apply the same criteria to all cities, towns, and applicants, the MSLC defines an "official action" to be one in which the applicant appeared, or was given the opportunity to appear, before the licensing authority to discuss the issue at the local level in an open hearing or meeting prior to the Hearing at the MSLC..

Please address your written objection to William Egan, General Counsel, Massachusetts State Lottery Commission, 60 Columbian Street, Braintree, MA 02184.

Very truly yours,

Arthur Buckley  
Manager, New Agent Licensing

Certified Mail – Return  
Receipt Requested: 7011 2000 0001 7142 1382



*Supporting the 351 Cities and Towns of Massachusetts*