

JJ Round Eagle Project

David Nerden

Project Goals

- Construct and install two signs to mark the trail heads at Rossmore Rd and Holland Rd.
- The improvement of trails (Garbage removal, tree and foliage clearing)
- The creation of a GPS map

1. The Signs

Materials:

Posts - 2 (4"x4"x8')

Cross Board - 1 (1"x4"x33")

Backing - 4 (1"x6"x40")

Top - 1 (1"x6"x42")

Screws - (4x 2.5") (20x 1 5/8")

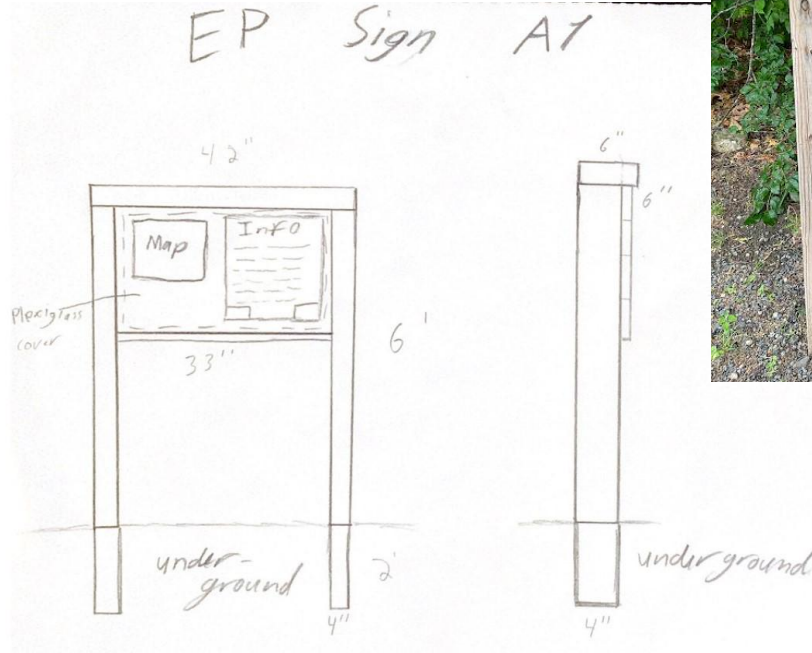
Sand 2x 50lb and/or Concrete 2x 50lb

Plexiglass - 1 (.220"x18"x24")

O-rings - 1 (#31 O-Rings in a X10 pack)

*Construction will take place at my house. Installation will be a separate day at the trail heads (Rossmore and Holland Rd).

*The signs design is based on a previous Eagle Project by Jimmy Crump, of which is already present at JJ Round. (Main St.)



*Carpooling will be required to get the volunteers to the installation sites due to limited parking.

*Wood Scraps will be used to create a "Private Property" sign

2. Trail Improvements

1. Volunteers will go through the trails and identify trail blockages (Downed Trees/Large Rocks)
2. Volunteers will use handtools and power tools to clear the trail
3. Debris will be dealt with accordingly (Natural waste will be pushed aside to line the trails and artificial waste will be collected in trash bags and taken to a dumpster/trash bin)
4. Trail Blazes will be installed on the trees to clearly mark the trail

Note: Volunteers will work in small groups with designated leaders, communication between groups will take place with cell phones.

Second Note: The DPW will be called to arrange for the collection of the non-natural waste

3. GPS Map

Rossmore Rd.



Holland Rd.



JJ Round
CrazyD2

23 views
Published 3 minutes ago

SHARE EDIT

Original Trails

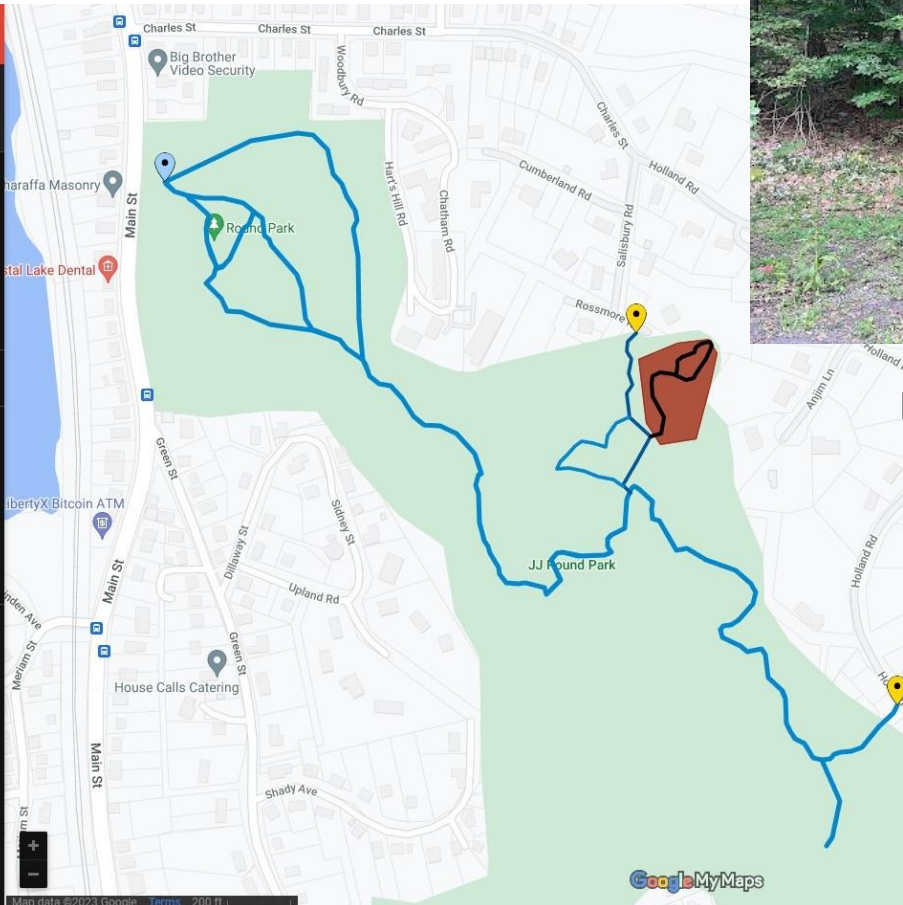
- Track 1
- Trail Head - Rossmore Rd
- Trail Head - Holland Rd
- Trail Head - Main St. / JJ Round Park

Sunday Track.gpx

Untitled layer

- Private Property
- Public Trail -1
- Public Loop Trail - 1
- Private Trail -1

Made with Google My Maps



Tools/Supplies

All tools will be provided/borrowed from friends and family.

- Shovels
- Hand Saws
- Hatchets
- Axes
- Pickaxes
- Power Drills
- Table Saws
- Hedge Clippers
- Tape measures
- pencils for marking measurements
- Circular Saw
- Post Hole Digger
- Prybar
- Chainsaw

-Food (Sandwiches/Pizza/Sausages?)-\$300

-Water/soft drinks-\$50

-Garbage Bags (Food Waste+General Trash from Trail clearing)-\$5

-Work Gloves--ask Scouts/adults to bring work gloves

-First Aid Kit-free

-Trauma Kit-free

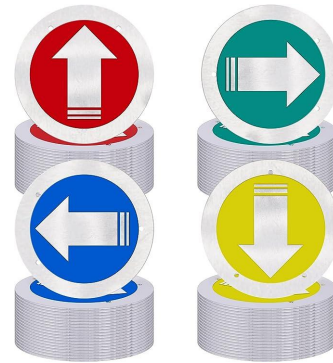
-Screws-\$10.47 per lb

-Paper Towels/Napkins for clean up \$22.49

-Eye Protection

-Trail Blazes \$21.99

Trail Blazes



Other

I will have people printing and laminating information sheets to put on the signs that will include the map and information about local species of wildlife (White-tail Deer, Black Cap Chickadee) .

The Conservation Committee will finalise the designs for the posters later during the project.

Cost

Materials: \$156.77

Supplies: \$409.95

Tools: \$0

Other: \$50

Total Cost: \$616.72

The Conservation Commission has offered to pay for the project in its entirety.

Logistics

I plan on using my Dad's truck and my Mom's SUV for the moving of supplies and people. I will also ask for other adults who can drive to make supply runs for me.

I will designate volunteers that are 14+ years old as trail leaders when small groups are needed to work efficiently.

My Project will involve power tools which is a primary concern for me. Adults and older scouts will be the only ones allowed to use power tools, however hand tools will be provided for the younger scouts. Adults will be the only ones that are allowed to use an electric saw. I will have a trauma kit (STOP THE BLEED) for any possible emergencies and a first aid kit for small injuries. In attempt to prevent hand injuries all who participate will be required to wear gloves, if they do not have any gloves will be lent out. Boots will also be required to prevent foot and ankle injuries. I will instruct all of those on the proper and safe use of any tool they might be using at the time. Adequate adult supervision would be necessary, especially around the younger scouts to ensure the safe usage of tools. I will also only let those who are physically able to use tools in a safe manner use tools. Proper weather will be required, and a rain date will be created.

- 1. Qualified Supervision:** Adult supervision will be required for the project to go smoothly. Adult guidance can help prevent accidents from happening.
- 2. Physical Fitness:** All of those who wish to participate must be physically able to do the work required for the project without causing themselves injury.
- 3. Buddy System:** All scouts must be accompanied by at least one other scout at all times, especially when an adult is present.
- 4. Safe Area or Course:** The work area will be clearly marked and supervised by an adult.
- 5. EQUIPMENT SELECTION AND MAINTENANCE:** All power tools will only be checked before use and stored properly. These tools will only be operated by those who are physically able and old enough.
- 6. PERSONAL SAFETY EQUIPMENT:** Gloves and Safety glasses will be required and provided to those who need them.
- 7. SAFETY PROCEDURES AND POLICIES:** Participants will not be allowed to fool around near the project area and common sense will be applied in the most practical sense.
- 8. SKILL LEVEL LIMITS:** All of those who participate in my project will only do what they have the skill to do.
- 9. WEATHER CHECK:** Clear weather will be needed to complete the project, rain-dates will be provided as needed.
- 10. PLANNING:** Proper plans/instructions for how to construct and carry out the project will be made and proper back up plans will be created as well.
- 11. COMMUNICATIONS:** With the aid of cell phones long distance communication will be easy. I will have to properly explain what I want to be done for the project and ensure that each participant has a full comprehension of what I want them to do.
- 12. PERMIT AND NOTICES:** I need to acquire approval from the Town Council.
- 13. FIRST AID RESOURCES:** I have a first aid kit that can handle injuries large and small, and many adults have some amount of life saving training.
- 14. APPLICABLE LAWS:** All Federal, State, and Local laws will be followed.
- 15. CPR Resource:** My Mother works in a hospital and is CPR certified.
- 16. DISCIPLINE:** All participants will be required to behave or they will be removed from the project.

Safety

How will this Project Benefit the Community?

- The ability to experience nature close to home
- Safe walk to the center of town
- Exercise
- The ability to learn about local wildlife.

Thank you for your time!

Michael Vaca's

Eagle Scout Service Project Proposal



BOY SCOUTS OF AMERICA®

Wakefield BMX Registration Gazebo

Table of Contents

Project:

- Description
- Benefits
- Location
- Specifications
- Timeline

Project Description

- **Multi-Use Gazebo** - My Eagle Project focuses on building a multi-use Gazebo the benefactors at Wakefield BMX can rely on for various activities such as rider's registration, concessions, trophy displays and more.
- **Weather Resistant** - My idea is to build a weather resistant structure that can support a countertop and also provide cover from the elements such as sunlight and rain
- **Safe Structure** - My goal is to create the Gazebo putting safety first by using sturdy materials, and following key construction code standards for outdoor use.



Illustration - Multi-Use Gazebo

Project Benefits

- My Eagle Scout Project will address very specific needs for the Wakefield BMX community
- It will offer a permanent and durable structure that can be used during racing meets, and which makes it easier for BMX volunteers to:
 - Perform Clerical Activities
 - Hold trophies handed to racers during award ceremonies
 - Serve as a concession stand



Actual Table Used by Wakefield BMX during racing meets

Project Location

Registration Area - Bird Eye View



Proposed Gazebo Location

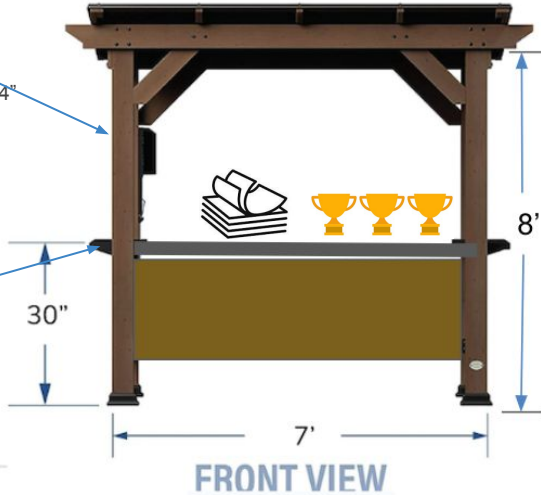
Project Specifications

Support Posts

The support posts will be sturdy 4"x 4" in diameter .

Table Top

The table top will be made from $\frac{3}{4}$ plywood and held in place using 2 x 4 beams.

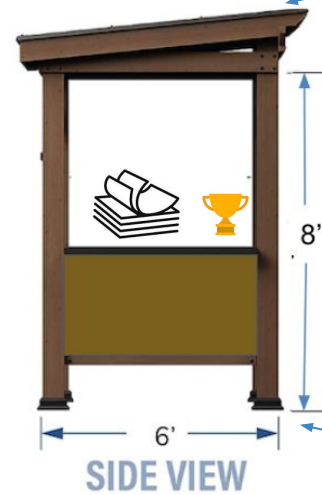


FRONT VIEW

Roof

The roof will be made of durable material such as metal roofing to be able to withstand wind and snow loads.

It will also have a pitch of at least 3' / 12" to ensure proper drainage



SIDE VIEW

Foundation

The Gazebos foundation will be at least 6' below the frost line to ensure it doesn't go anywhere.

The Gazebo will rest on top of deck pavers, which in turn will be tied to the ground using metal rebars

Key Pointers:

- All wood will be **pressure treated**
- All **nails and screws** will be made of **steel** to avoid corrosion
- Refer to Materials Attachment for more details

Project Timeline

October

- Obtain all necessary permits
- Call DigSafe
- Raise funds via GoFundMe.
- Prepare the work site.
- Begin construction.

December

- Complete construction.
- Pass final inspection.
- Enjoy new outdoor registration gazebo!

September

- Gather and fill out all necessary project paperwork .
- Meet with Benefactor, Troop 701 Committees, Wakefield Town Committees to review plans and answer any questions they may have.
- Pay all applicable permit fees.

November

- Continue construction.
- Install roof and siding.

Appendix

Materials List

MV - Project Estimate ☆ 📎 ☁

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	A	B	C	D
1	Materials	Quantity	\$	Total
2	Pressure Treated Lumber			
3	Main Post Structure			
4	Support Posts, 4 x 4 x 8	4	\$12.28	\$49.12
5	Support Beams 2 x 4' x 8'	4	\$5.38	\$21.52
6	Plywood Siding Panels 4x8	2	\$40.74	\$81.48
7	For Roof			
8	2 x 4 x 8 beam	6	\$5.38	\$32.28
9	2 x 2 x 8 beam	6	\$5.38	\$32.28
10	For Table			
11	Beams 2 x 4 x 8	6	\$5.38	\$32.28
12	3 x 4 x 8 plywood	3	\$49.28	\$147.84
13	Other supplies:			
14	Roof Screws	1 box	\$14.98	14.98
15	Steel Screws	1 box	\$13.27	13.27
16	Panels Aluminumn Roof and side panels	3	\$19.98	\$59.94
17	Aluminum side panel	2	\$4.40	\$8.80
18	Posts Brackets	4	\$12.29	\$49.16
19	Concrete Deck Blocks	4	\$6.38	\$25.52
20	Rebar for Concrete Deck Blocks 1/2 in x 2 ft.	4	\$3.98	\$15.92
21	Gasoline for Generator	3	\$3.75	\$11.25
22	Total			\$595.64
23				
~ ~				

Here's a detailed list of the materials that will be used to finish the project

All money/funds will be raised exclusively within the Wakefield BMX community through a GoFundMe page and will setup, and promote with the help of Benefactor.

Safety Guidelines

Adults will be needed for handling a handsaw to cut lumber to measurements at the location. Also, adults will be the ones climbing the ladder if the specific drilling is higher than 4 feet. Volunteers will need work gloves and safety glasses

Older scouts will be handling drills, and may go up ladders for not more than 3 steps. Volunteers will use work gloves, and safety glasses.

Younger Scouts might help digging holes on the ground where support posts will be place. Scouts will be required to use safety glasses and work gloves.



WAKEFIELD POLICE DEPARTMENT

One Union Street, Wakefield, Massachusetts, 01880

Emergency: 911

Office: (339) 219-4525

Fax (781) 245-1299

Lt. Joseph Anderson

September 5, 2023

Town Council
Town of Wakefield
1 Lafayette Street
Wakefield, MA 01880

Dear Town Council,

The Traffic Advisory Committee (TAC) has a recommendation for you to consider from our most recent meeting held on August 18, 2023.

The TAC recommends the approval of a stop sign for the intersection of Eaton St. at Crescent St. Crescent St. has the right of way but it may be unclear to those unfamiliar with the area when turning from Eaton St. onto Crescent St.

The area as you know abuts the downtown business district and is adjacent to Brightview Assisted Living and Wakefield elderly housing. The addition of a stop restriction would make it safer for both pedestrians and other motorists.

I look forward to discussing this recommendation at your next available meeting.

Respectfully Submitted,

Lt. Joseph A. Anderson
Chairman
Traffic Advisory Committee

From: [Joe Conway](#)
To: [Stephen Maio](#); [Sherri Dalton](#)
Subject: Surplus Equip.
Date: Wednesday, September 6, 2023 10:59:16 AM
Attachments: [Auction Letter 7202023.docx](#)

Steve/Sherri

Attached is a letter requesting the TC's vote to declare the mentioned equipment surplus so we can put it out to auction and get rid of it. Can this be added to an upcoming agenda please?

Steve a few talking points for you below:

1. **1990 Bombardier SW48 Sidewalk Plow**- Replaced in last years capital plan, cab was unsealed and exhaust leaked into operator cabin
2. **2007 Chevrolet 1500 Pickup**- Frame is getting unsafe from rot, former dog catchers truck
3. **4 post vehicle lift**- not big enough to raise mid-size trucks, replaced with new lift in fleet
4. **Drive on vehicle lift**- failed last lift inspection and retired, replaced with new lift in fleet
5. **Falcon Bituminous Hot Box trailer**- burner failure cost prohibitive to fix, replaced in 2023 capital plan, zero trade offered
6. **1996 Cushman UTV**- awaiting delivery for new unit, zero trade offered, This is the main mode of transportation at Forest Glade
7. **Misc. traffic lights and bases**- spare parts that were stored in various unsightly places around town, the retired traffic light from North Ave is included in this lot, believe it or not we did get interest in this from a collector when it was removed

-Joe



TOWN OF WAKEFIELD

DEPARTMENT OF PUBLIC WORKS

To: Councilor Chines, Chair, Wakefield Town Council

From: Joseph Conway, Director of Public Works

Subject: Surplus Equipment

Date: Sept 5, 2023

The Department of Public Works is requesting authorization from the Town Council to auction the retired surplus equipment listed below. All funds from any sale will be deposited into the general fund.

1. 1990 Bombardier SW48 Sidewalk Plow
2. 2007 Chevrolet 1500 Pickup
3. 4 post vehicle lift
4. Drive on vehicle lift
5. Falcon Bituminous Hot Box trailer
6. 1996 Cushman UTV
7. Misc. traffic lights and bases



BLATMAN, BOBROWSKI, HAVERTY & SILVERSTEIN, LLC
ATTORNEYS AT LAW

MARK BOBROWSKI
[REDACTED]

September 26, 2023

TO: Wakefield Town Council
Stephen P. Maio, Town Administrator

FR: Mark Bobrowski

RE: Request for Appointment as Special Municipal Employee;
Disclosure under Rule 1.7 of the Rules of Professional Conduct

As you know, I am under contract with Wakefield to recodify its Zoning Bylaw. Work has progressed nicely, but I have not yet billed for services rendered.

It came to my attention on September 13, 2023, that my partner, Attorney Paul Haverty, has a private client in Wakefield. He may ultimately need to appear in front of your land use boards as part of his representation. It appears that Paul was engaged by his client around the same time as I signed my contract, which was in or shortly after last year's Christmas holiday period. While we routinely check within the law firm for potential conflicts, this one slipped through the cracks.

At the suggestion of Town Counsel Thomas Mullen, I would like to request an appointment as special municipal counsel to avoid any possible issue under G.L. c. 268A, ss. 17-19, the Commonwealth's Conflict of Interest statute.

I would also ask the Town Council to permit me to continue work on the recodification by granting me its informed consent to do so, confirmed in writing. In that regard, I call the Council's attention to Rule 1.7(b) of the Rules of Professional Conduct, which states the following:

Notwithstanding the existence of a concurrent conflict of interest under paragraph (a), a lawyer may represent a client if:

- (1) the lawyer reasonably believes that the lawyer will be able to provide competent and diligent representation to each affected client;
- (2) the representation is not prohibited by law;
- (3) the representation does not involve the assertion of a claim by one client against another client represented by the lawyer in the same litigation or other proceeding before a tribunal; and

(4) each affected client gives informed consent, confirmed in writing.

In the instant matter, my work on the recodification has nothing to do with Attorney Haverty's representation of a private client. Therefore, I am confident that I will be able to provide competent and diligent representation to the Bylaw Review Committee. Such representation is not prohibited by law. There is no possible assertion of any "claim" against the Bylaw Review Committee, as the Committee's work is legislative, not adjudicatory.

I have asked Attorney Haverty to make the same disclosure to his private client and to seek confirmation in writing that he may continue his representation.

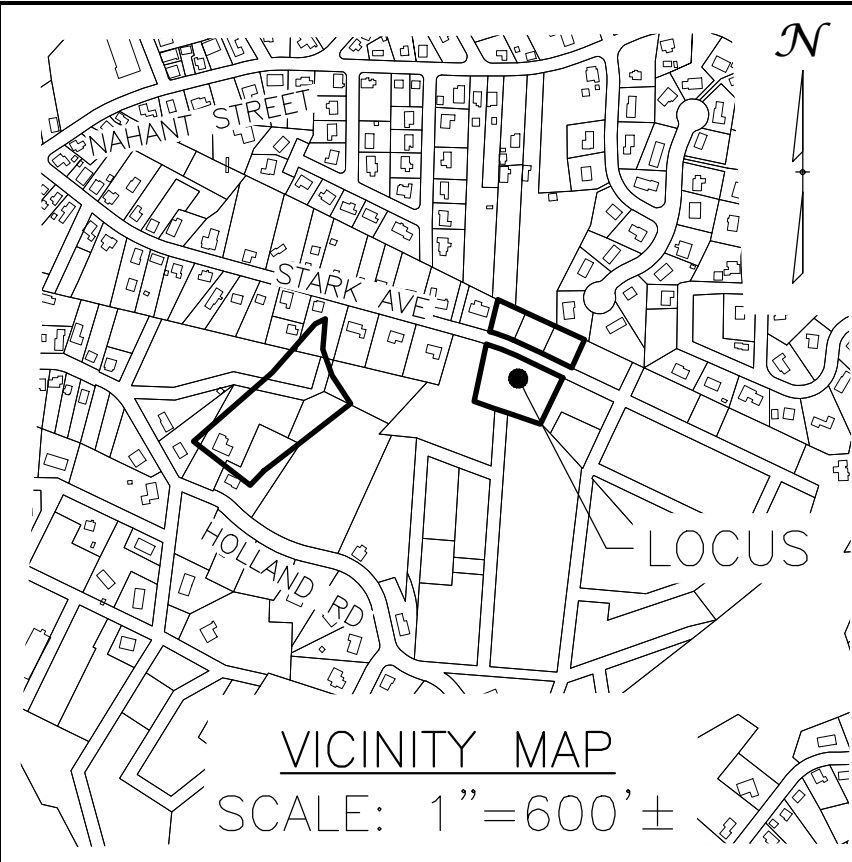
If the Council is inclined to grant its informed consent so that I may resume work on the recodification, I ask that Chairman Chines be authorized to countersign this Disclosure and return same to me for my files.

Please call me with any questions. Thank you for your consideration.

Countersigned by:

Jonathan B. Chines, Chairman Wakefield Town Council

cc: Atty. Mullen (by email)
D. Lieber (by email)



LEGEND

- BB BITUMINOUS BERM
- CB CATCH BASIN
- DH DRILL HOLE
- DMH DRAIN MANHOLE
- EP EDGE OF PAVEMENT
- IP IRON PIPE
- LC LAND COURT
- N/F NOW OR FORMERLY
- SB STONE BOUND
- SMH SEWER MANHOLE
- S.F. SQUARE FOOT
- VGC VERTICAL GRANITE CURB
- WG WATER GATE

FLOOD NOTE:

THE SUBJECT PROPERTY IS LOCATED IN A ZONE X: AREA OF MINIMAL FLOOD HAZARD ABOVE THE 500-YEAR FLOOD LEVEL AS ILLUSTRATED ON THE FLOOD INSURANCE RATE MAP COMMUNITY PANEL NO. 25017C0431E, WHICH HAS AN EFFECTIVE DATE OF JUNE 4, 2010.

TOPOGRAPHIC PLAN OF LAND IN WAKEFIELD, MA

STARK AVENUE

DATE: MARCH 11, 2021
SCALE: 1" = 20'

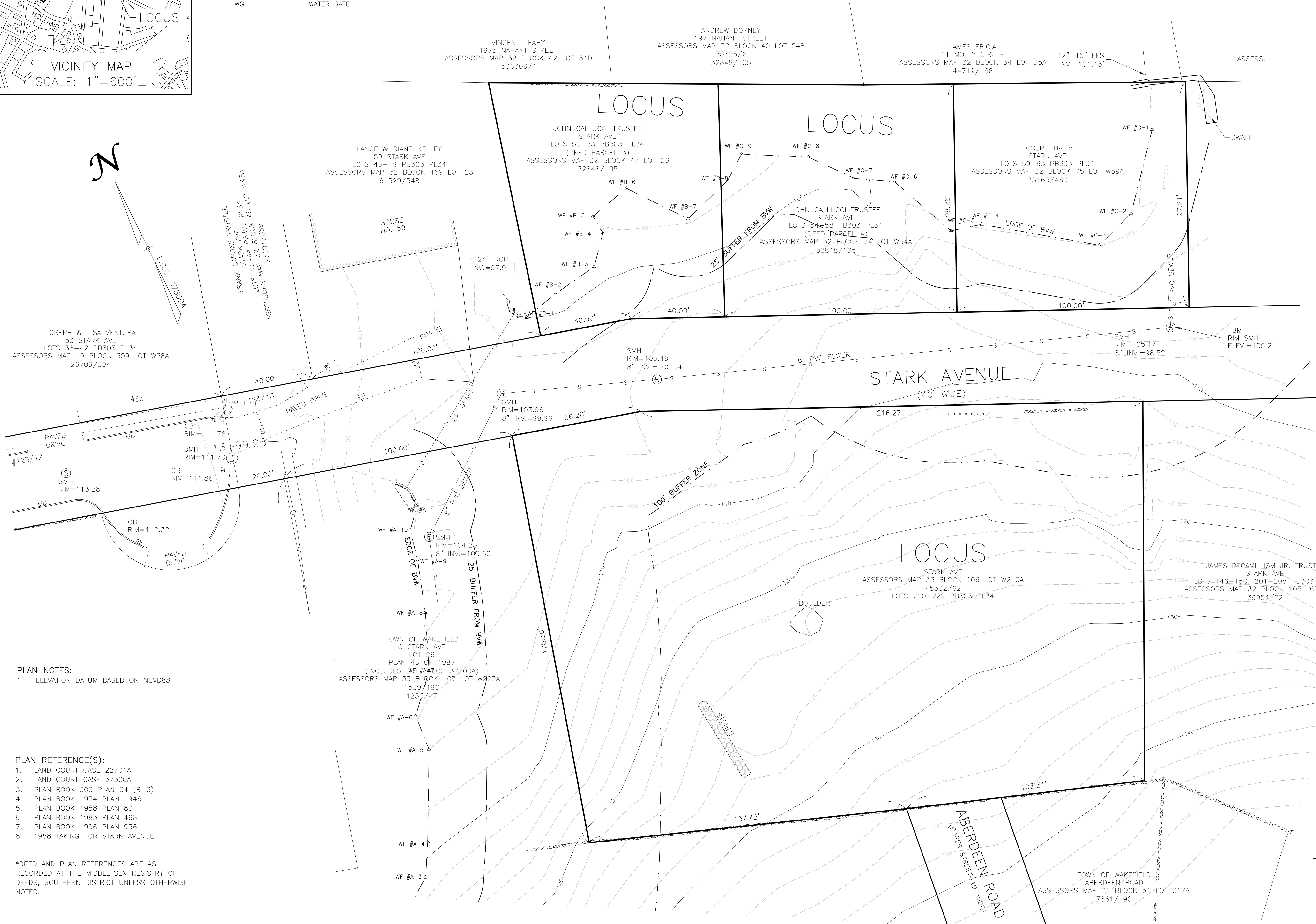
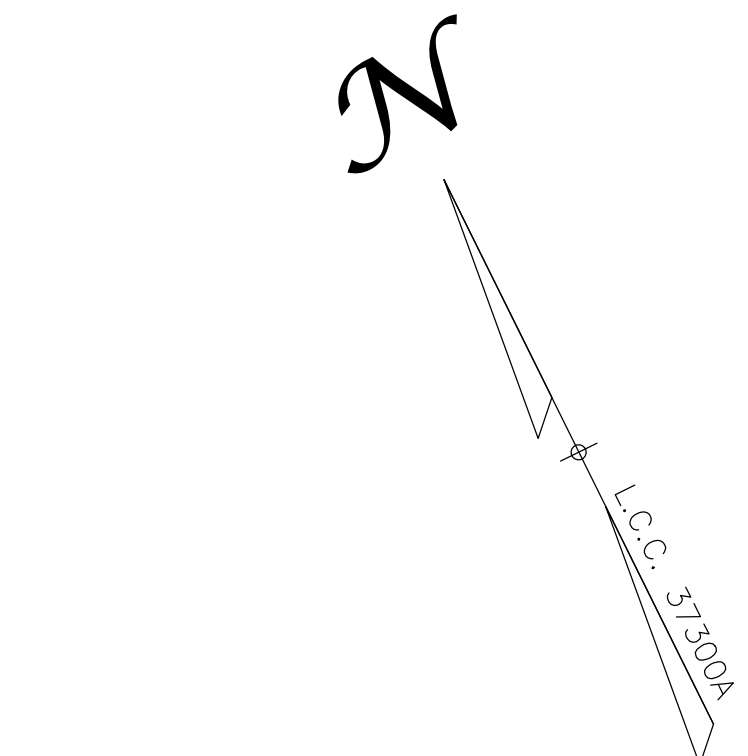


CURRENT OWNER OF RECORD:

XXXX
XXXX
XXXX
ASSESSORS MAP XX BLOCK XX PARCEL XXX
DEED BOOK XXXXX PAGE XXX

ZONE: SINGLE RESIDENCE (SR)

MIN. LOT FRONTAGE	100 FT
LOT WIDTH	100 FT
MIN. LOT AREA	12,000 S.F.
FRONT YARD	20 FT
SIDE YARD	15 FT
REAR YARD	25 FT
MAX. BUILDING HEIGHT	35 FT
MAX. BUILDING COVERAGE	30%
MIN. OPEN AREA	40%



PLAN NOTES:
1. ELEVATION DATUM BASED ON NGVD88

- PLAN REFERENCE(S):**
1. LAND COURT CASE 22701A
 2. LAND COURT CASE 37300A
 3. PLAN BOOK 303 PLAN 34 (B-3)
 4. PLAN BOOK 1954 PLAN 1946
 5. PLAN BOOK 1958 PLAN 80
 6. PLAN BOOK 1983 PLAN 468
 7. PLAN BOOK 1996 PLAN 956
 8. 1958 TAKING FOR STARK AVENUE

*DEED AND PLAN REFERENCES ARE AS RECORDED AT THE MIDDLESEX REGISTRY OF DEEDS, SOUTHERN DISTRICT UNLESS OTHERWISE NOTED.

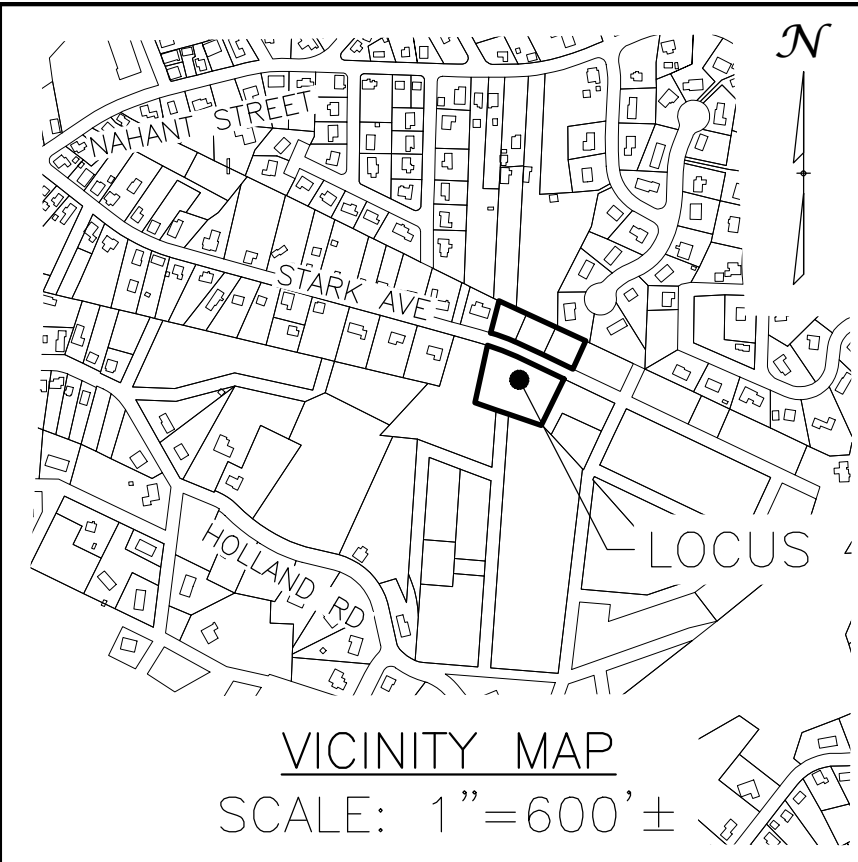
I HEREBY CERTIFY THAT THIS PLAN IS THE RESULT OF AN ACTUAL ON-THE-GROUND INSTRUMENT SURVEY PERFORMED BY WILLIAMS & SPARAGES LLC.

DRAFT

PHILLIP YETMAN, P.L.S.
MASSACHUSETTS PROFESSIONAL LAND SURVEYOR LICENSE #51910

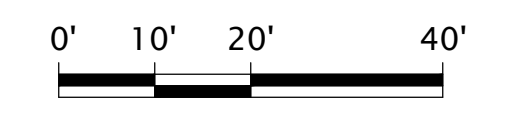
DATE _____

JOB NO. WAKE-0073
DRAWING: TP-stark ave.dwg



BY-RIGHT PLAN IN WAKEFIELD, MA STARK AVENUE

DATE: JUNE 13, 2023
SCALE: 1" = 20'



ZONE: SINGLE RESIDENCE (SR)

MIN. LOT FRONTAGE	100 FT
LOT WIDTH	100 FT
MIN. LOT AREA	12,000 S.F.
FRONT YARD	20 FT
SIDE YARD	15 FT
REAR YARD	25 FT
MAX. BUILDING HEIGHT	35 FT
MAX. BUILDING COVERAGE	30%
MIN. OPEN AREA	40%



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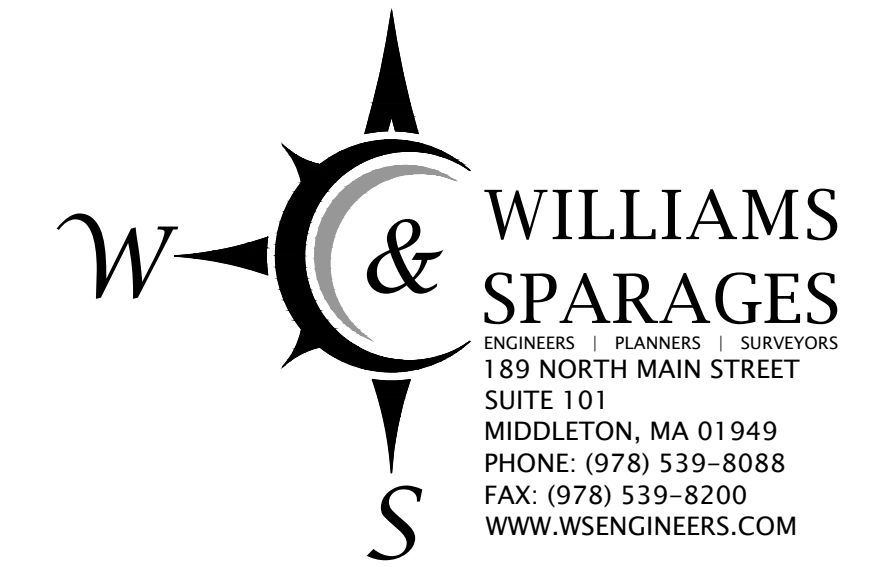
*DEED AND PLAN REFERENCES ARE AS RECORDED AT THE MIDDLESEX REGISTRY OF DEEDS, SOUTHERN DISTRICT UNLESS OTHERWISE NOTED.

CONCEPTUAL PLAN IN WAKEFIELD, MA

STARK AVENUE

DATE: JUNE 13, 2023
SCALE: 1" = 20'

0' 10' 20' 40'



N/F
JAMES DEBERARDINIS
STARK AVE
ASSESSORS MAP 33 BLOCK 106 LOT W210A
45332/62
LOTS 210-222 PB303 PL34

ZONE: SINGLE RESIDENCE (SR)
MIN. LOT FRONTAGE 100 FT
LOT WIDTH 100 FT
MIN. LOT AREA 12,000 S.F.

FRONT YARD 20 FT
SIDE YARD 15 FT
REAR YARD 25 FT

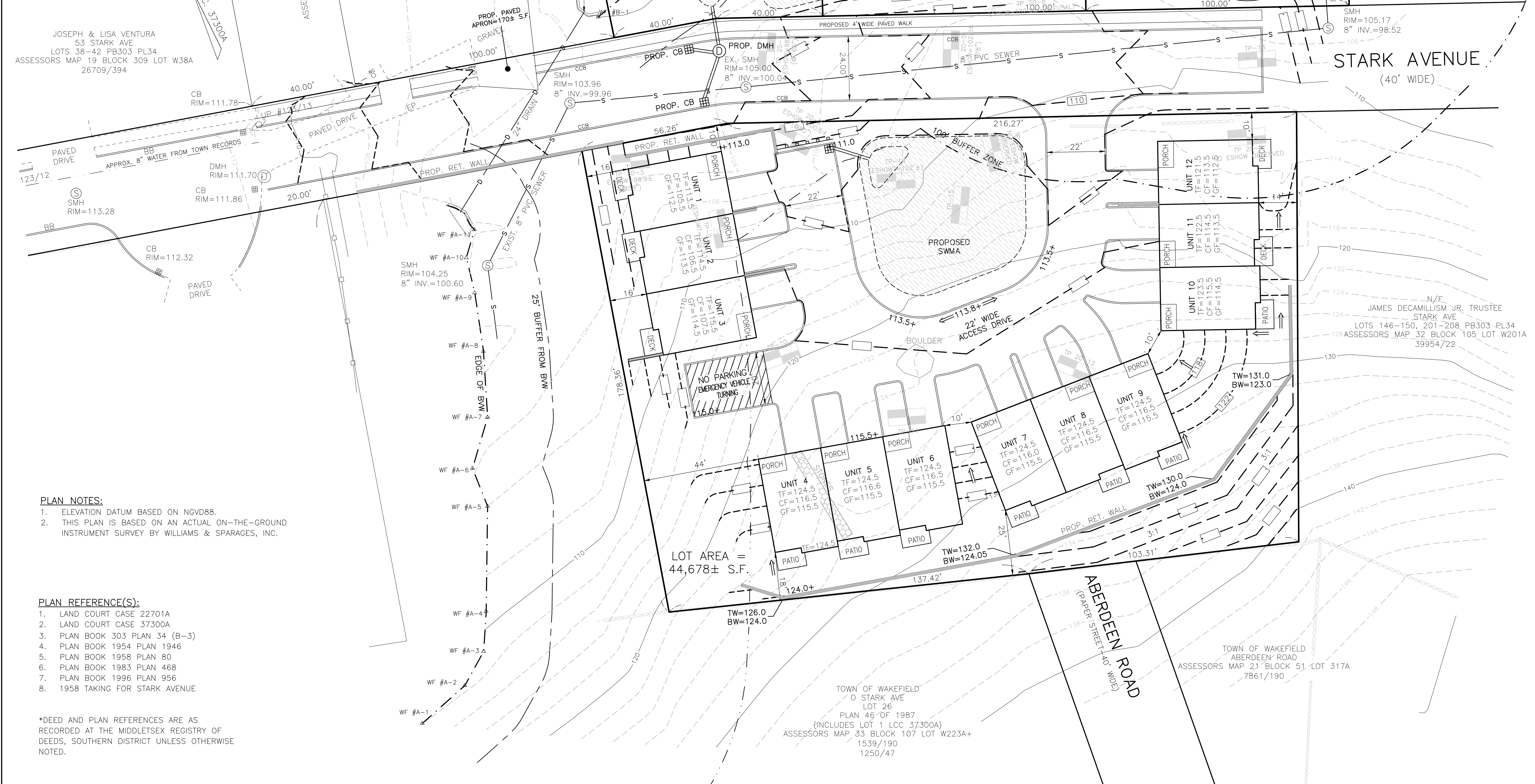
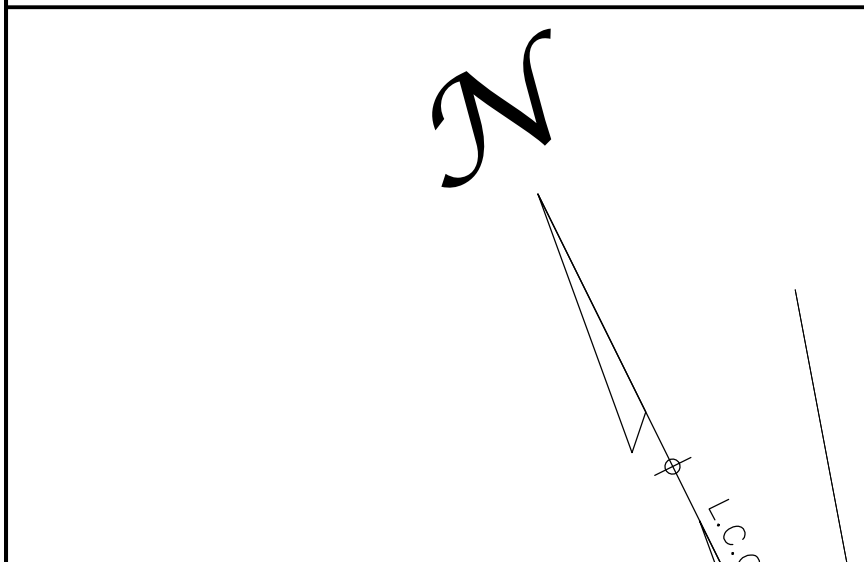
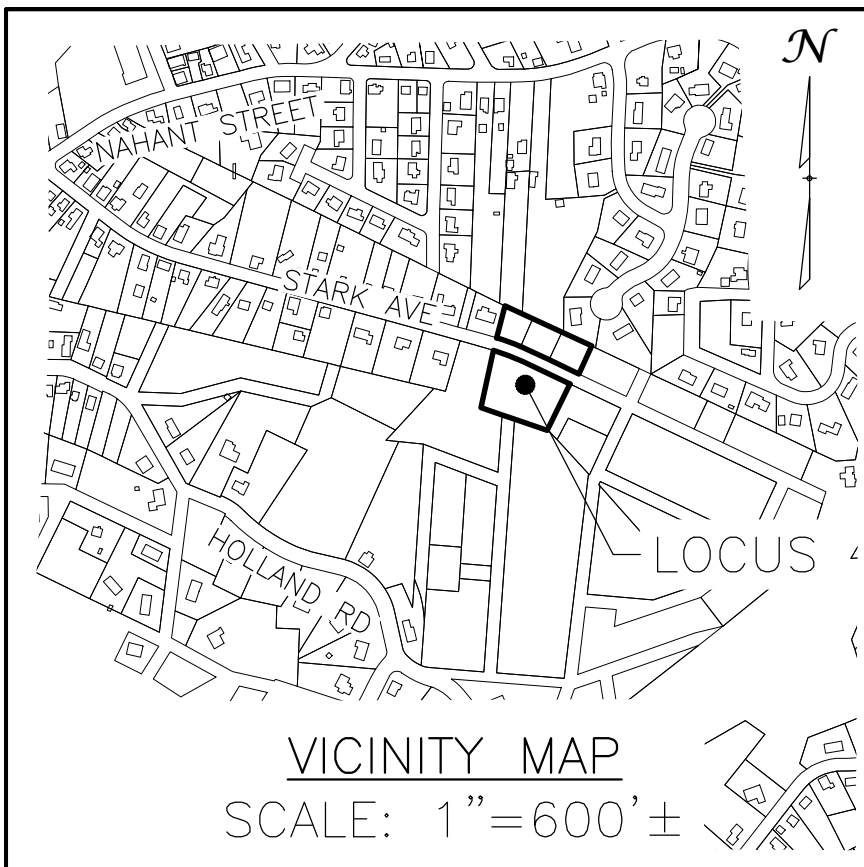
MAX. BUILDING HEIGHT 35 FT
MAX. BUILDING COVERAGE 30%
MIN. OPEN AREA 40%

LEGEND

BB BITUMINOUS BERM
CB CATCH BASIN
CCB CAPE COD BERM
C.F. CELLAR FLOOR
DH DRILL HOLE
DMH DRAIN MANHOLE
EP EDGE OF PAVEMENT
F.F. FIRST FLOOR
IP IRON PIPE
N/F NOW OR FORMERLY
SB STONE BOUND
SMH SEWER MANHOLE
S.F. SQUARE FOOT
SWMA STORM WATER MANAGEMENT AREA
T.F. TOP OF FOUNDATION
WG WATER GATE

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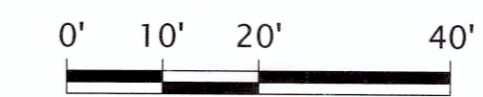
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CONCEPTUAL PLAN IN WAKEFIELD, MA STARK AVENUE

DATE: JUNE 13, 2023
SCALE: 1" = 20'



N/F
JAMES DEBERARDINIS
STARK AVE
ASSESSORS MAP 33 BLOCK 106 LOT W210A
45332/62
LOTS 210-222 PB303 PL34

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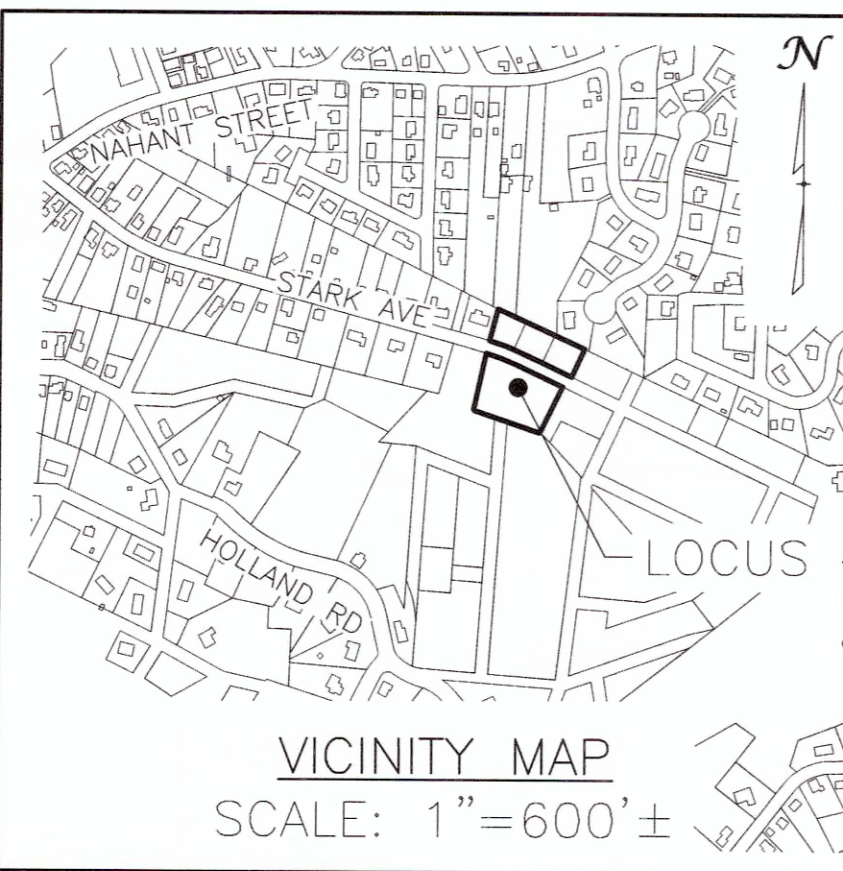
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LEGEND

BB	BITUMINOUS BERM
CB	CATCH BASIN
CCB	CAPE COD BERM
C.F.	CELLAR FLOOR
DH	DRILL HOLE
DMH	DRAIN MANHOLE
EP	EDGE OF PAVEMENT
F.F.	FIRST FLOOR
IP	IRON PIPE
N/F	NOW OR FORMERLY
SB	STONE BOUND
SMH	SEWER MANHOLE
S.F.	SQUARE FOOT
SWMA	STORM WATER MANAGEMENT AREA
T.F.	TOP OF FOUNDATION
WG	WATER GATE

FLOOD NOTE:

THE SUBJECT PROPERTY IS LOCATED IN A ZONE X: AREA OF MINIMAL FLOOD HAZARD ABOVE THE 500-YEAR FLOOD LEVEL AS ILLUSTRATED ON THE FLOOD INSURANCE RATE MAP COMMUNITY PANEL NO. 25017C0431E, WHICH HAS AN EFFECTIVE DATE OF JUNE 4, 2010.



PLAN NOTES:

- ELEVATION DATUM BASED ON NGVD88.
- THIS PLAN IS BASED ON AN ACTUAL ON-THE-GROUND INSTRUMENT SURVEY BY WILLIAMS & SPARAGES, INC.

PLAN REFERENCE(S):

- LAND COURT CASE 22701A
- LAND COURT CASE 37300A
- PLAN BOOK 303 PLAN 34 (B-3)
- PLAN BOOK 1954 PLAN 1946
- PLAN BOOK 1958 PLAN 80
- PLAN BOOK 1983 PLAN 468
- PLAN BOOK 1996 PLAN 956
- 1958 TAKING FOR STARK AVENUE

*DEED AND PLAN REFERENCES ARE AS RECORDED AT THE MIDDLESEX REGISTRY OF DEEDS, SOUTHERN DISTRICT UNLESS OTHERWISE NOTED.

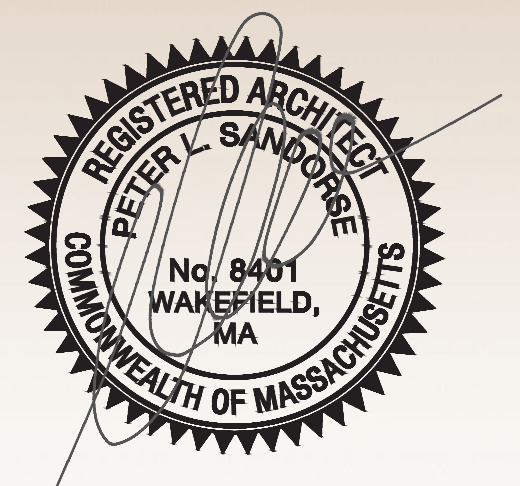
8.16.23



TOTAL UNIT COUNT

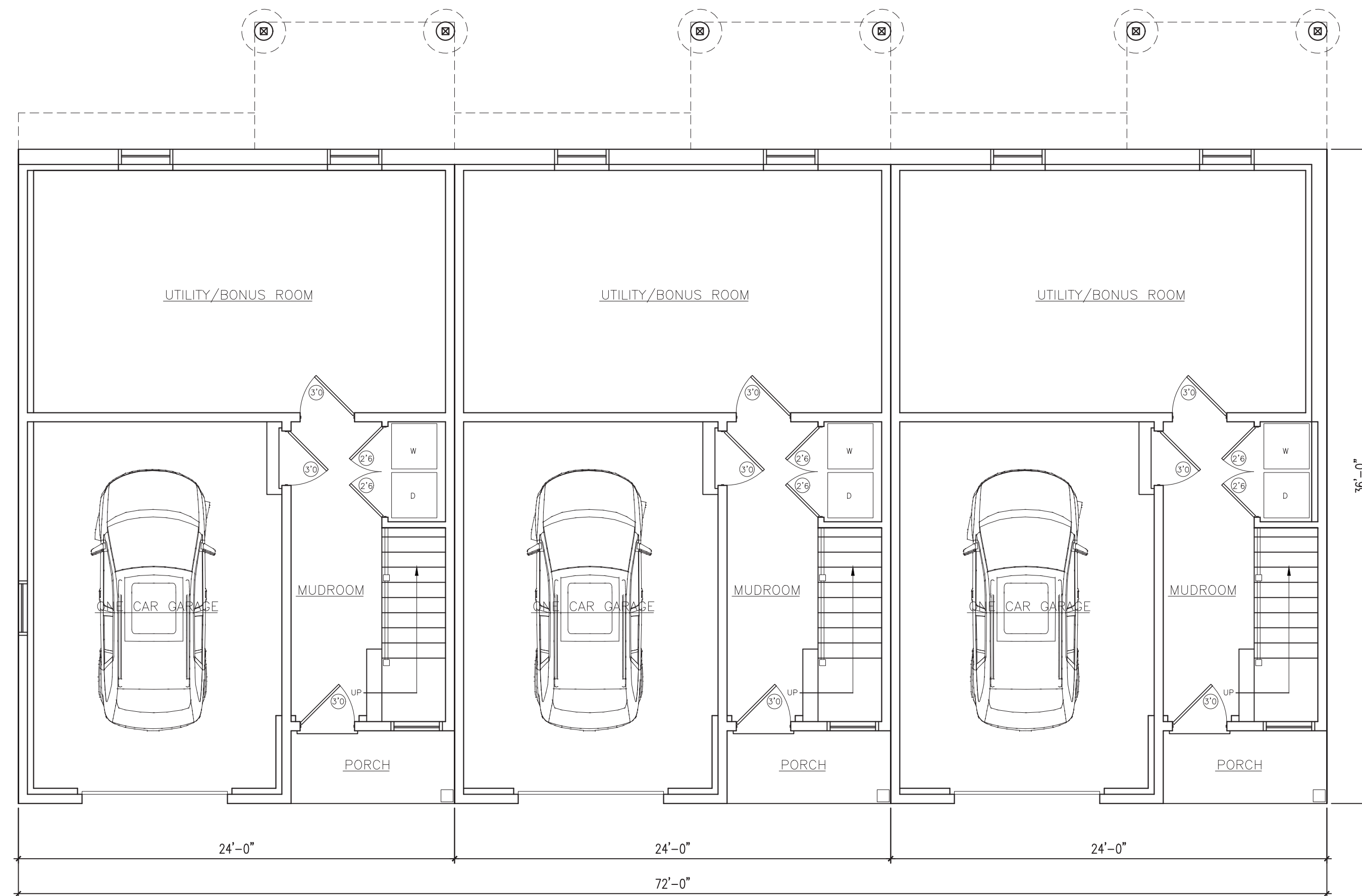
4 BUILDINGS (3 UNITS PER BUILDING) - 12 UNITS TOTAL
EACH UNIT - 3 BEDROOM, 2.5 BATH, +/- 1,960 FINISHED SQ. FT.

PROPOSED STREET GRAPHIC



STARK AVENUE, WAKEFIELD, MA

8.16.23



PROPOSED GROUND LEVEL PLAN

Scale: 3/16" = 1'-0"



PROPOSED FIRST FLOOR PLAN

Scale: 3/16" = 1'-0"

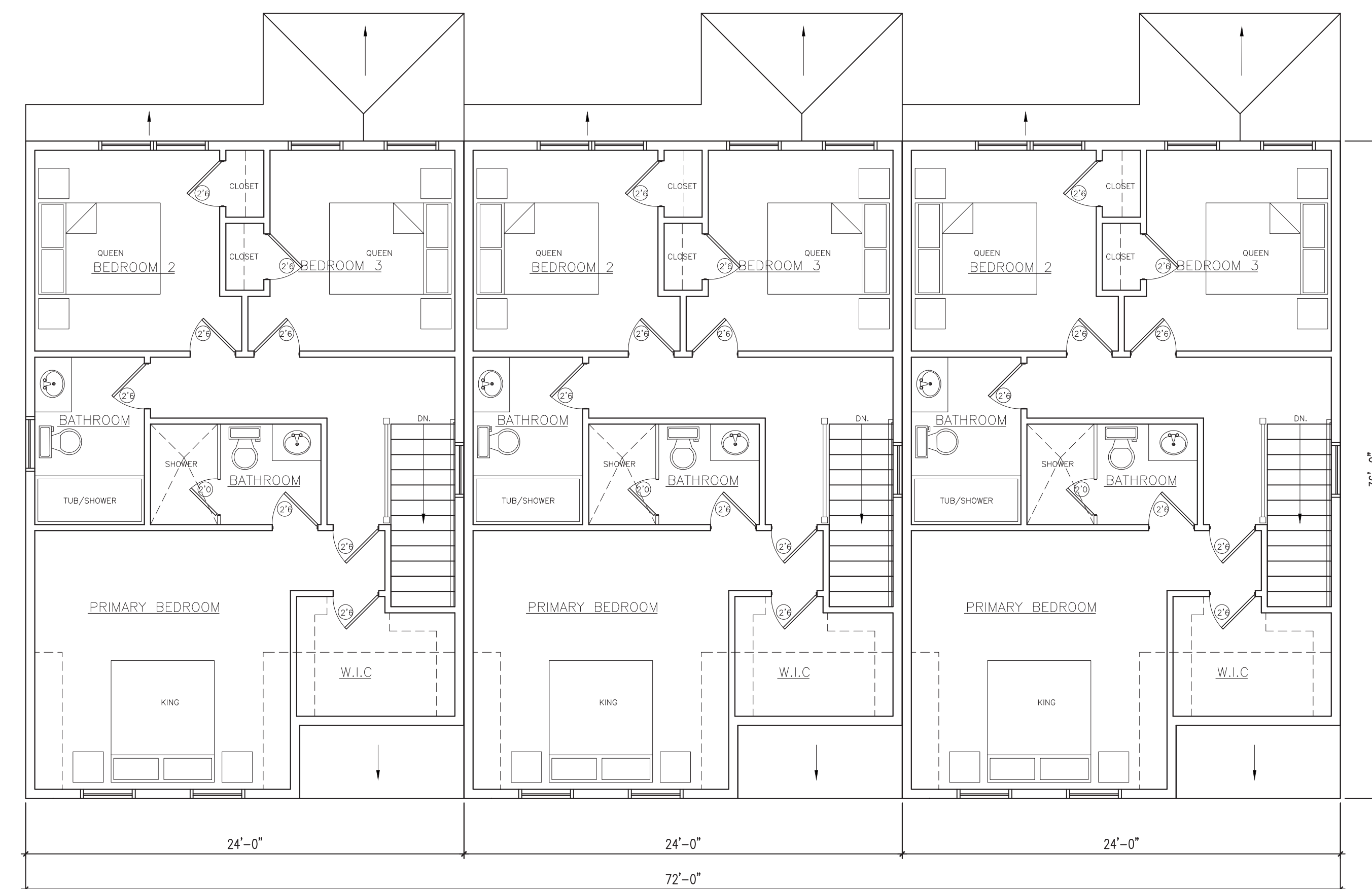
TOTAL - 3 UNITS

GROUND LEVEL - 450 FINISHED SQ. FT.

FIRST FLOOR - 795 FINISHED SQ. FT.

SECOND FLOOR - 715 FINISHED SQ. FT.

TOTAL SQ FT. - +/- 1,960 PER UNIT

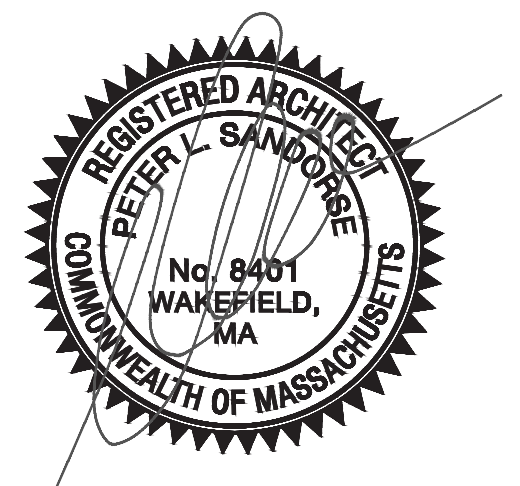


PROPOSED SECOND FLOOR PLAN

Scale: 3/16" = 1'-0"

PROPOSED BUILDING A FLOOR PLANS

Scale: 3/16" = 1'-0"



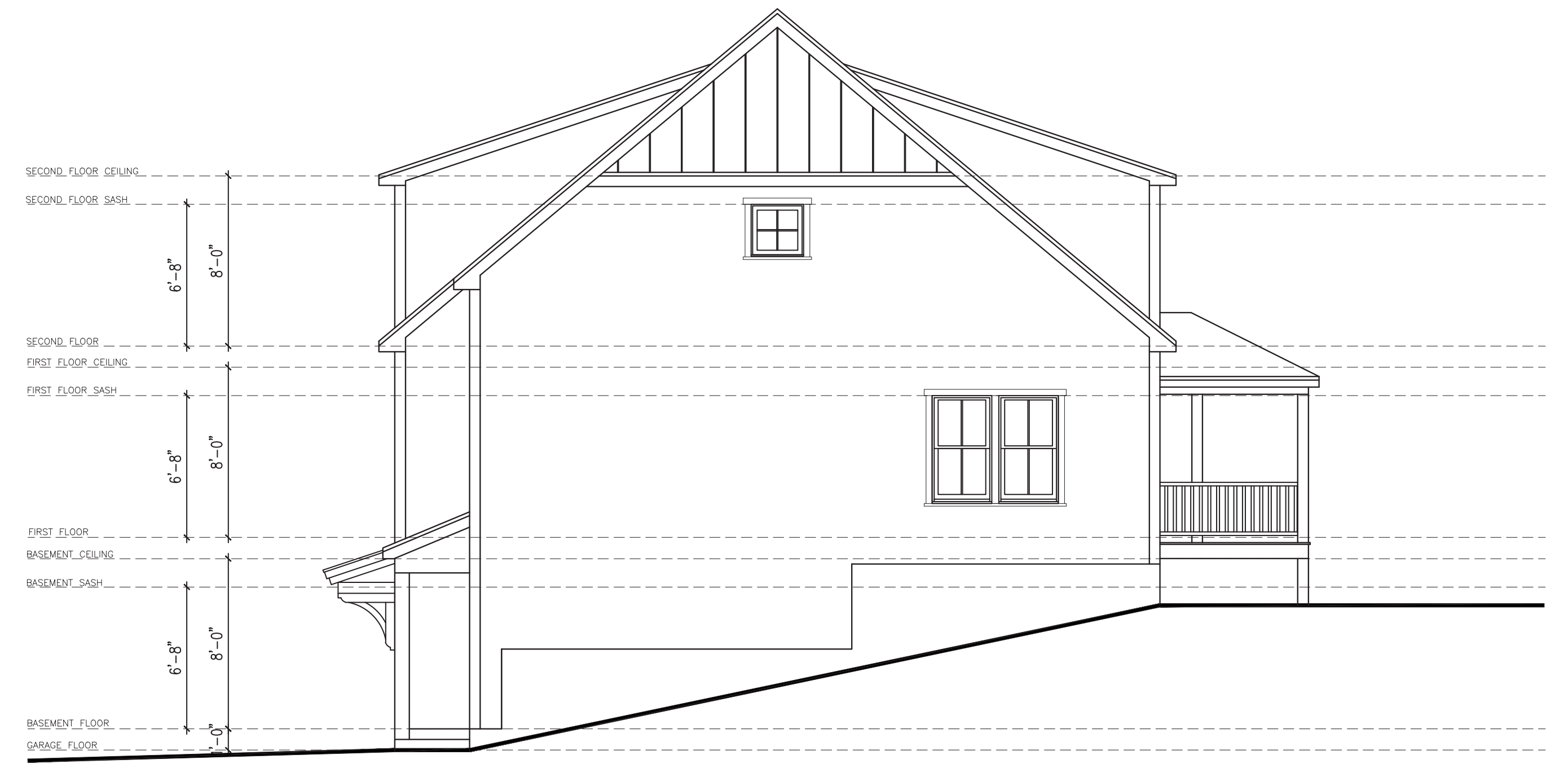
STARK AVENUE, WAKEFIELD, MA

8.16.23



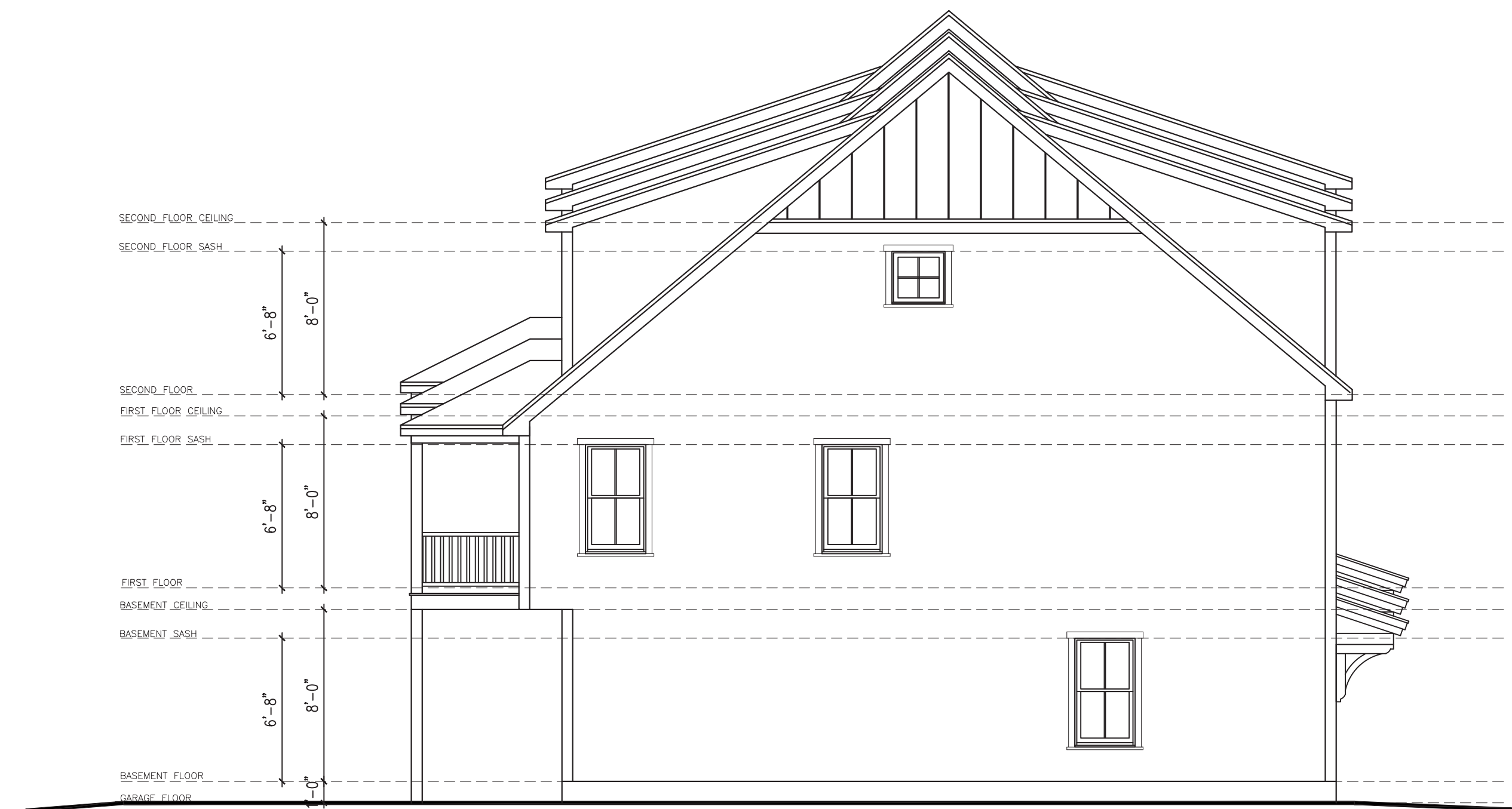
PROPOSED FRONT ELEVATION

Scale: 3/16" = 1'-0"



PROPOSED RIGHT ELEVATION

Scale: 3/16" = 1'-0"



PROPOSED LEFT ELEVATION

Scale: 3/16" = 1'-0"

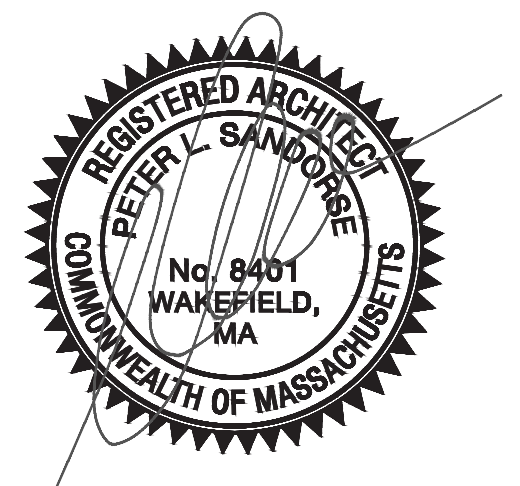


PROPOSED REAR ELEVATION

Scale: 3/16" = 1'-0"

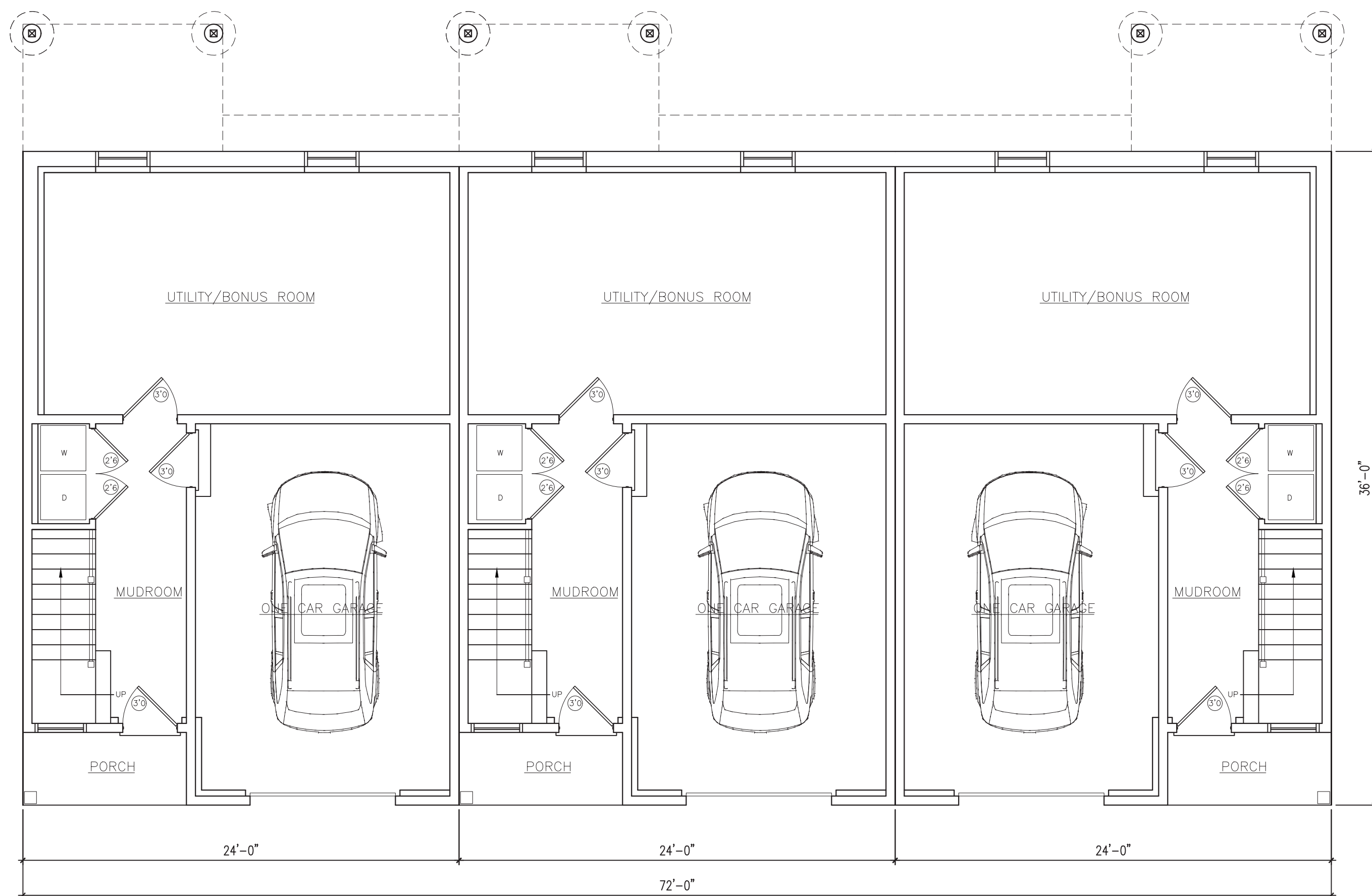
PROPOSED BUILDING A ELEVATIONS

Scale: 3/16" = 1'-0"



STARK AVENUE, WAKEFIELD, MA

8.16.23



PROPOSED GROUND LEVEL PLAN

Scale: 3/16" = 1'-0"



PROPOSED FIRST FLOOR PLAN

Scale: 3/16" = 1'-0"

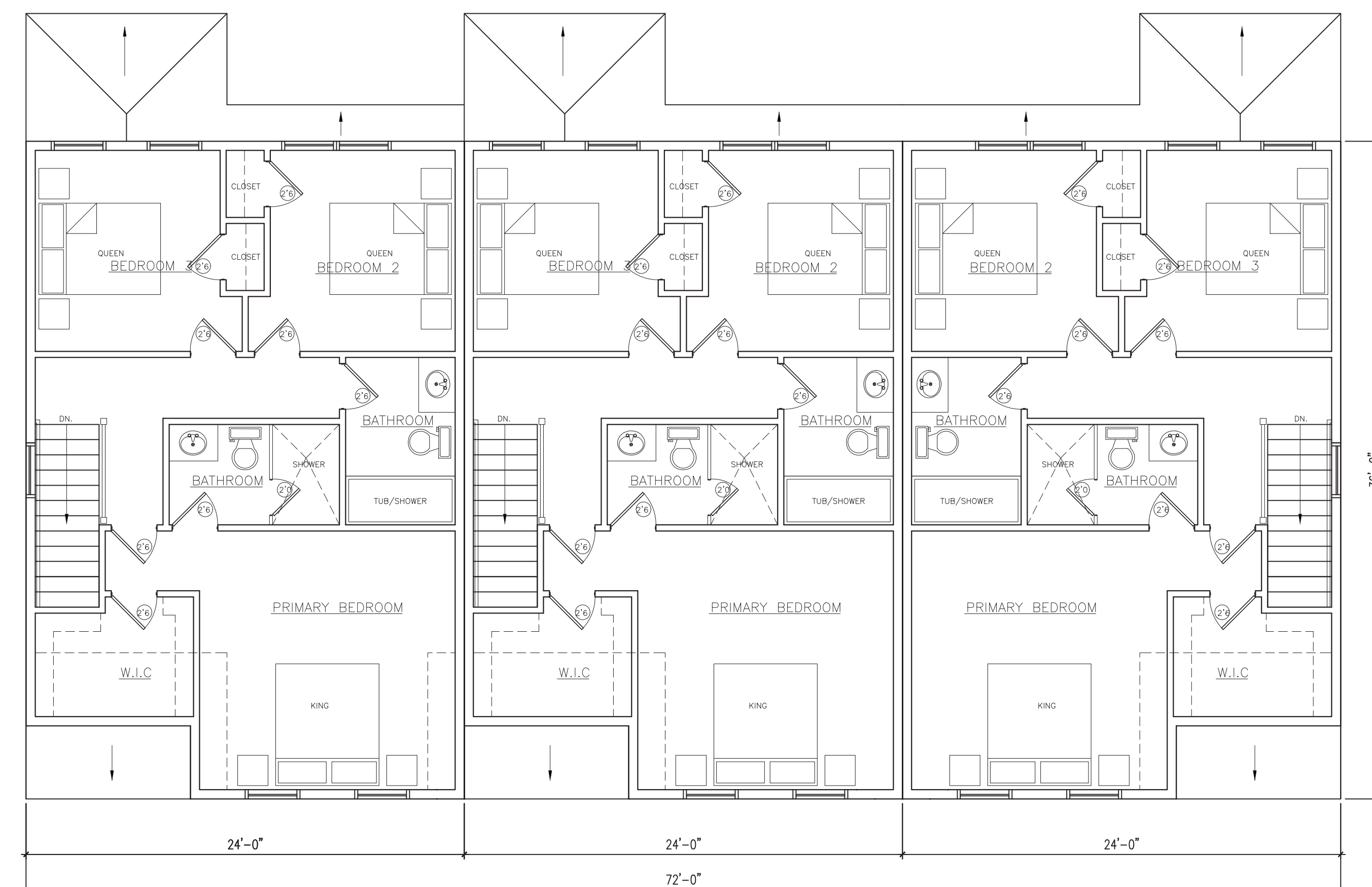
TOTAL - 3 UNITS

GROUND LEVEL - 450 FINISHED SQ. FT.

FIRST FLOOR - 795 FINISHED SQ. FT.

SECOND FLOOR - 715 FINISHED SQ. FT.

TOTAL SQ FT. - +/- 1,960 PER UNIT

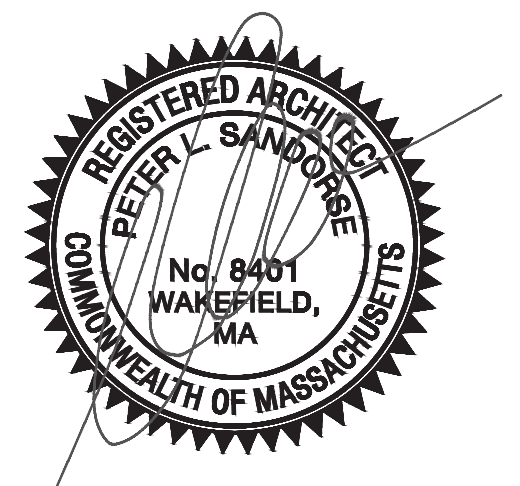


PROPOSED SECOND FLOOR PLAN

Scale: 3/16" = 1'-0"

PROPOSED BUILDING B FLOOR PLANS

Scale: 3/16" = 1'-0"



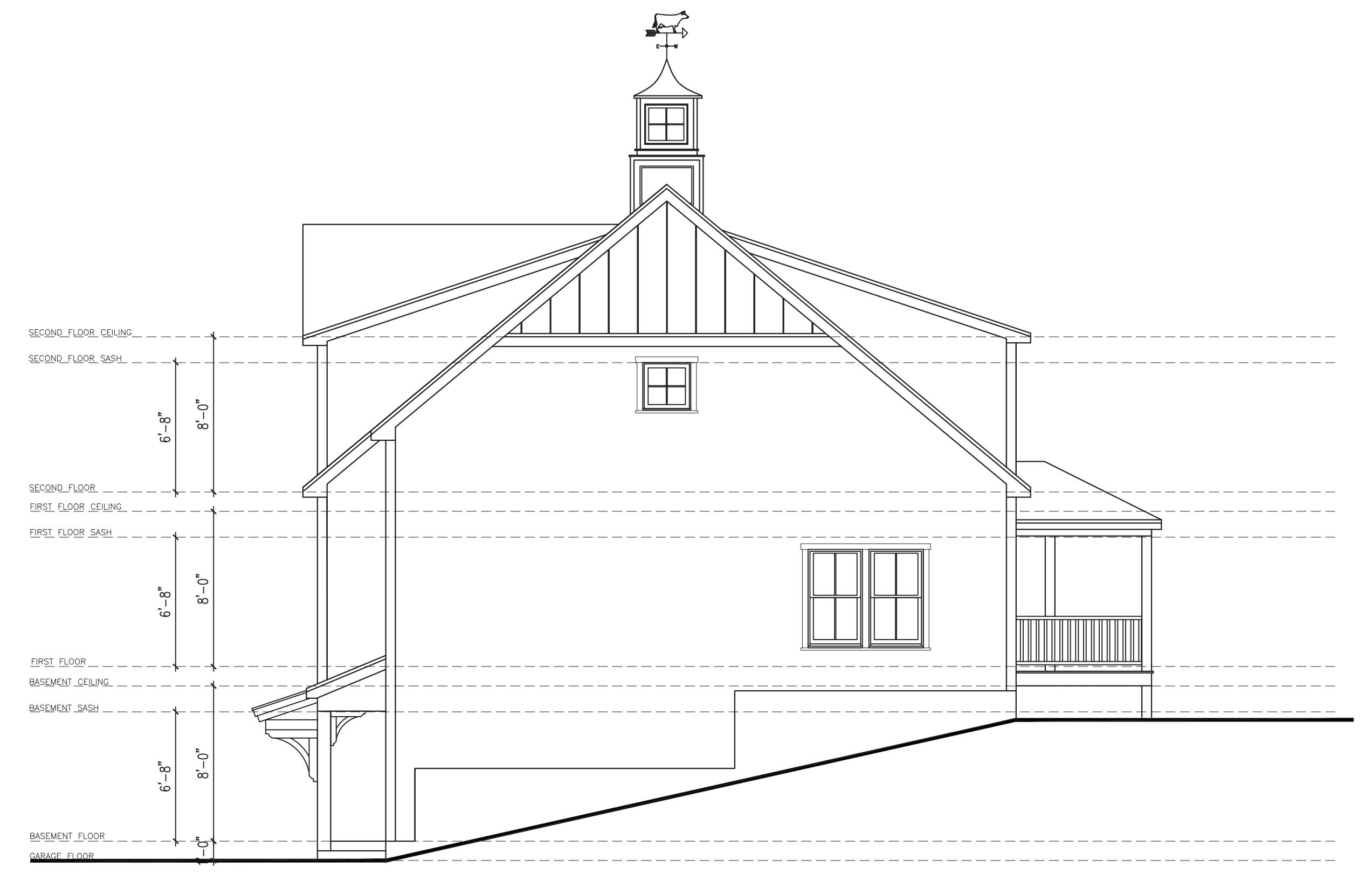
STARK AVENUE, WAKEFIELD, MA

8.16.23



PROPOSED FRONT ELEVATION

Scale: 3/16" = 1'-0"



PROPOSED RIGHT ELEVATION

Scale: 3/16" = 1'-0"



PROPOSED LEFT ELEVATION

Scale: 3/16" = 1'-0"

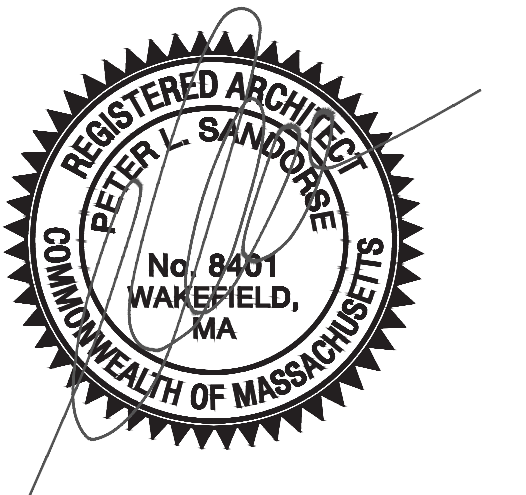


PROPOSED REAR ELEVATION

Scale: 3/16" = 1'-0"

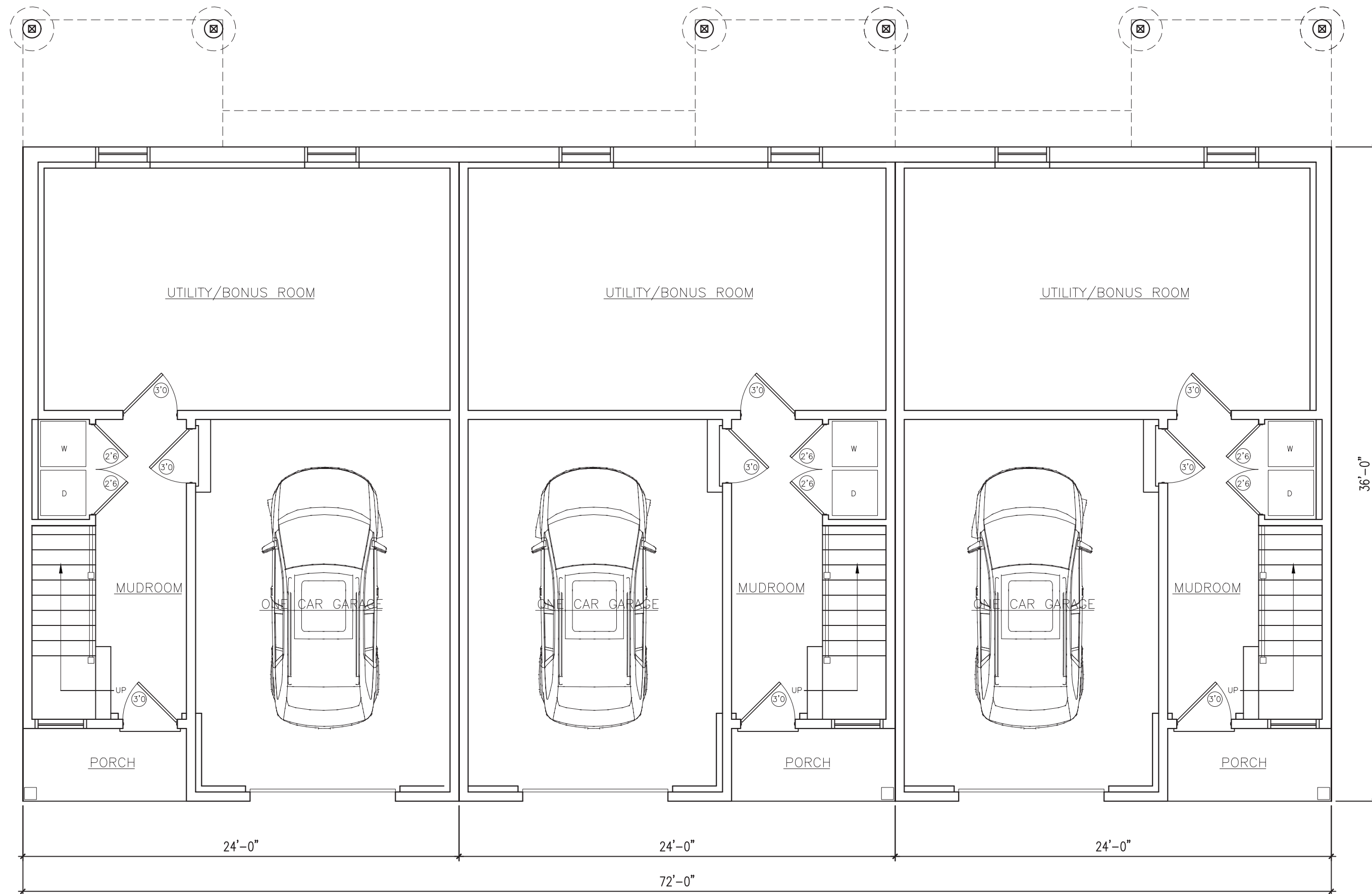
PROPOSED BUILDING B ELEVATIONS

Scale: 3/16" = 1'-0"



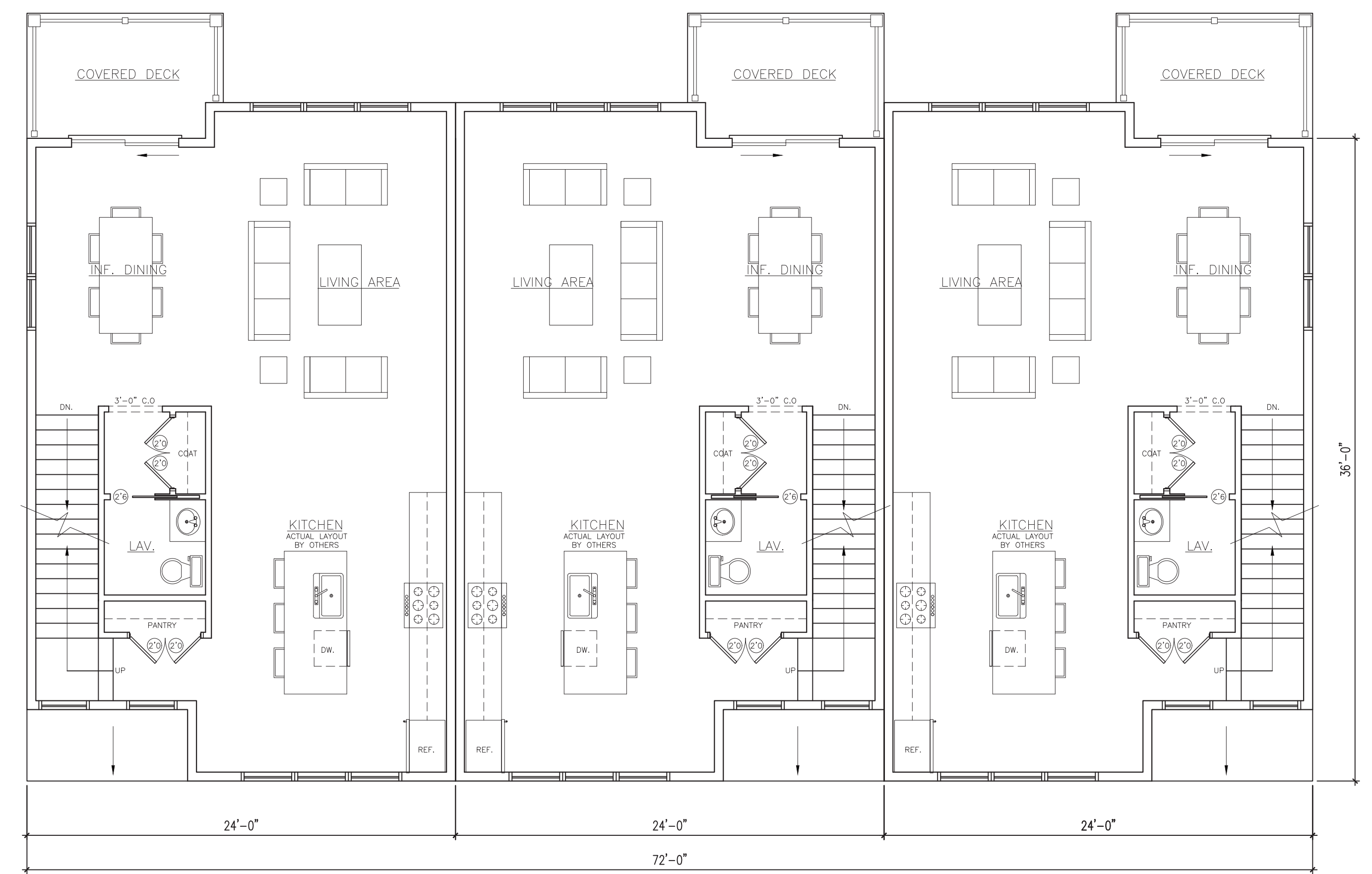
STARK AVENUE, WAKEFIELD, MA

8.16.23



PROPOSED GROUND LEVEL PLAN

Scale: 3/16" = 1'-0"



PROPOSED FIRST FLOOR PLAN

Scale: 3/16" = 1'-0"

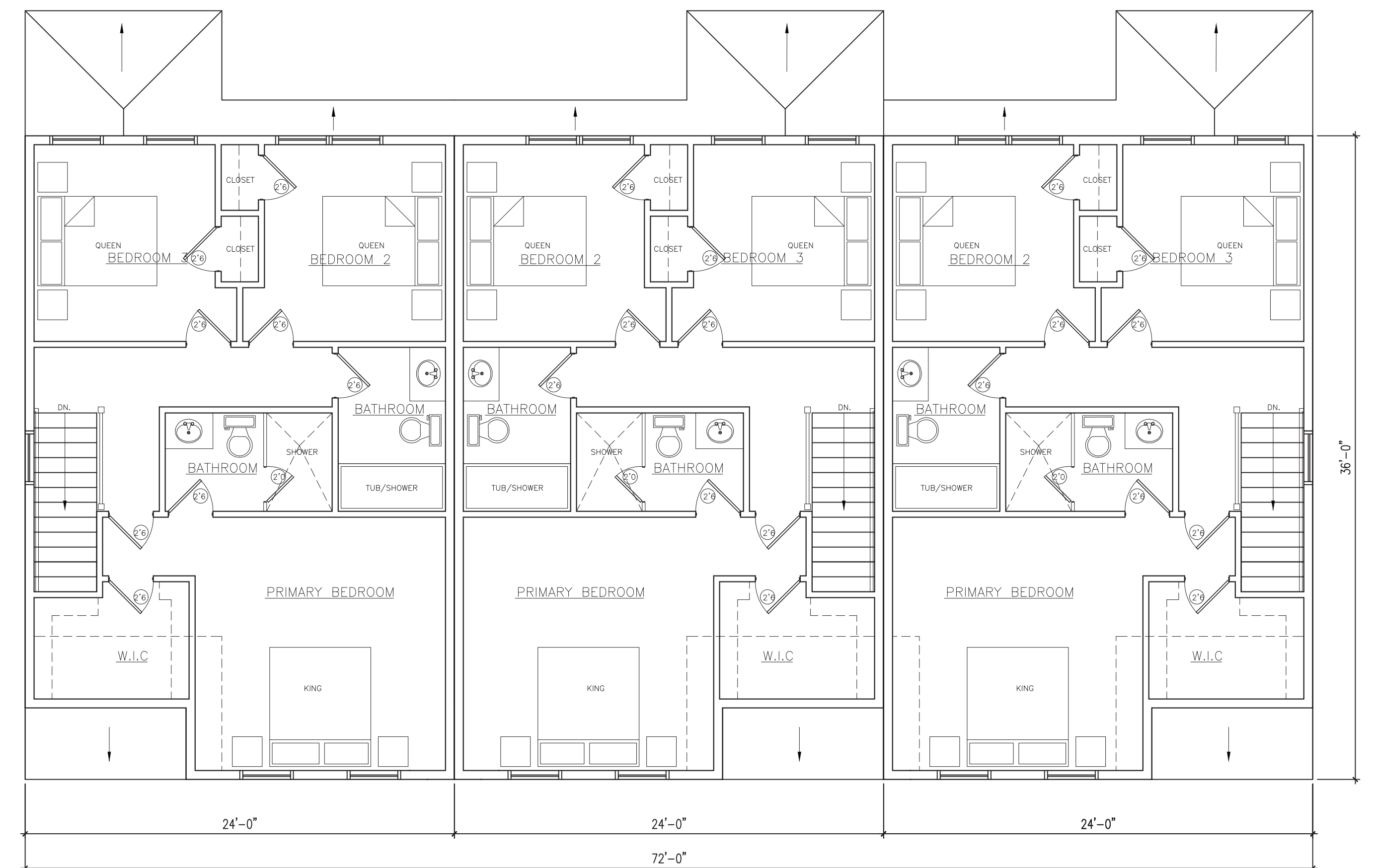
TOTAL - 3 UNITS

GROUND LEVEL - 450 FINISHED SQ. FT.

FIRST FLOOR - 795 FINISHED SQ. FT.

SECOND FLOOR - 715 FINISHED SQ. FT.

TOTAL SQ FT. - +/- 1,960 PER UNIT

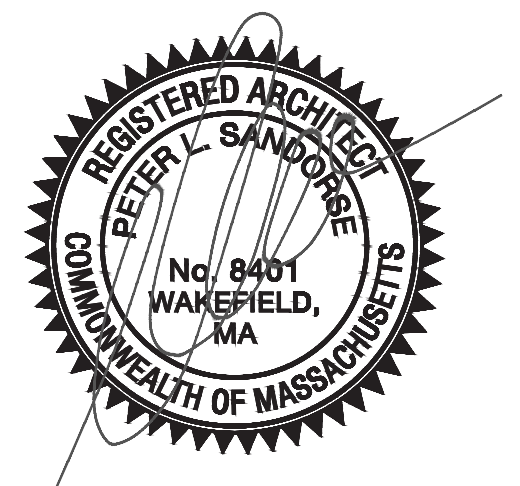


PROPOSED SECOND FLOOR PLAN

Scale: 3/16" = 1'-0"

PROPOSED BUILDING C FLOOR PLANS

Scale: 3/16" = 1'-0"



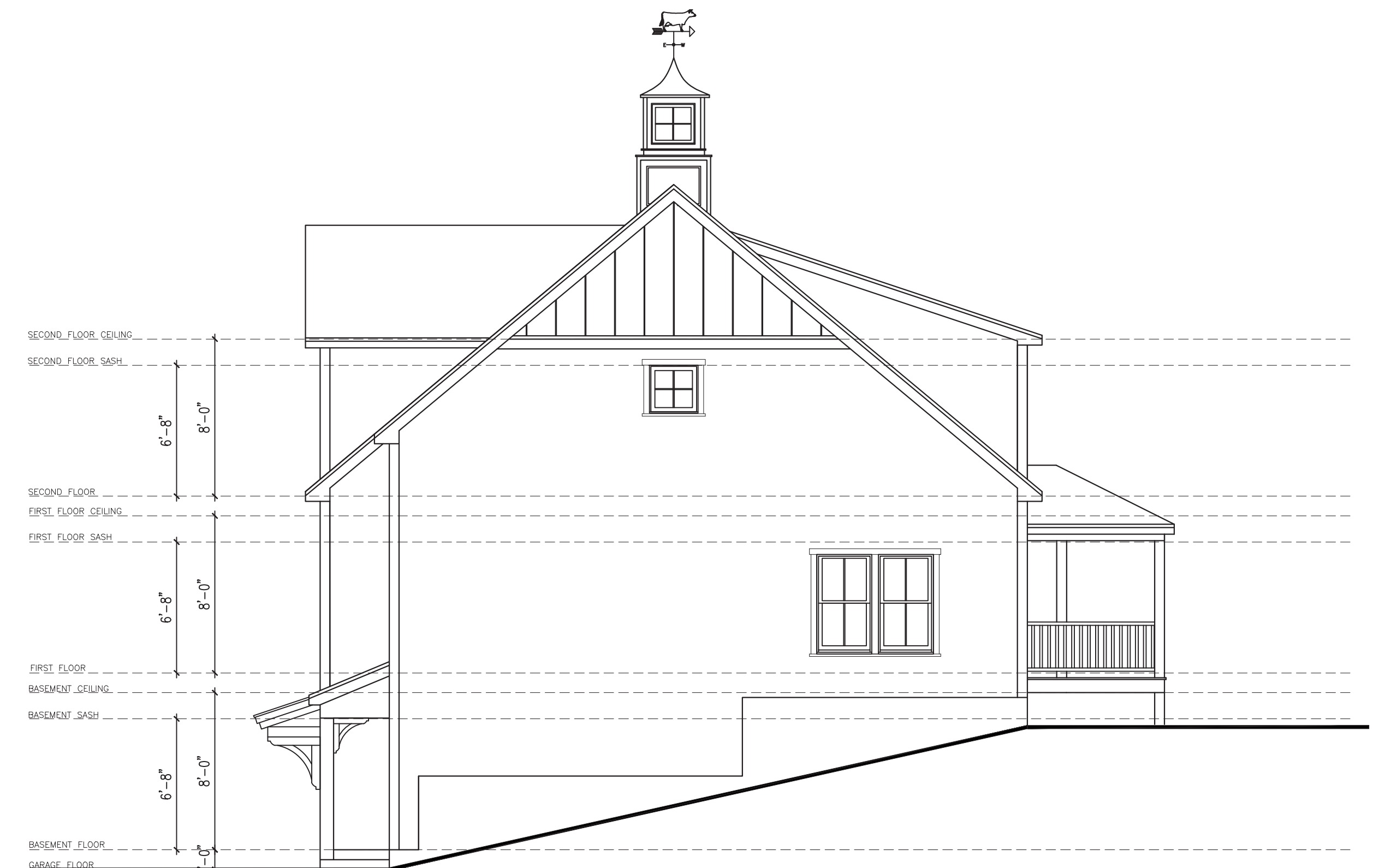
STARK AVENUE, WAKEFIELD, MA

8.16.23



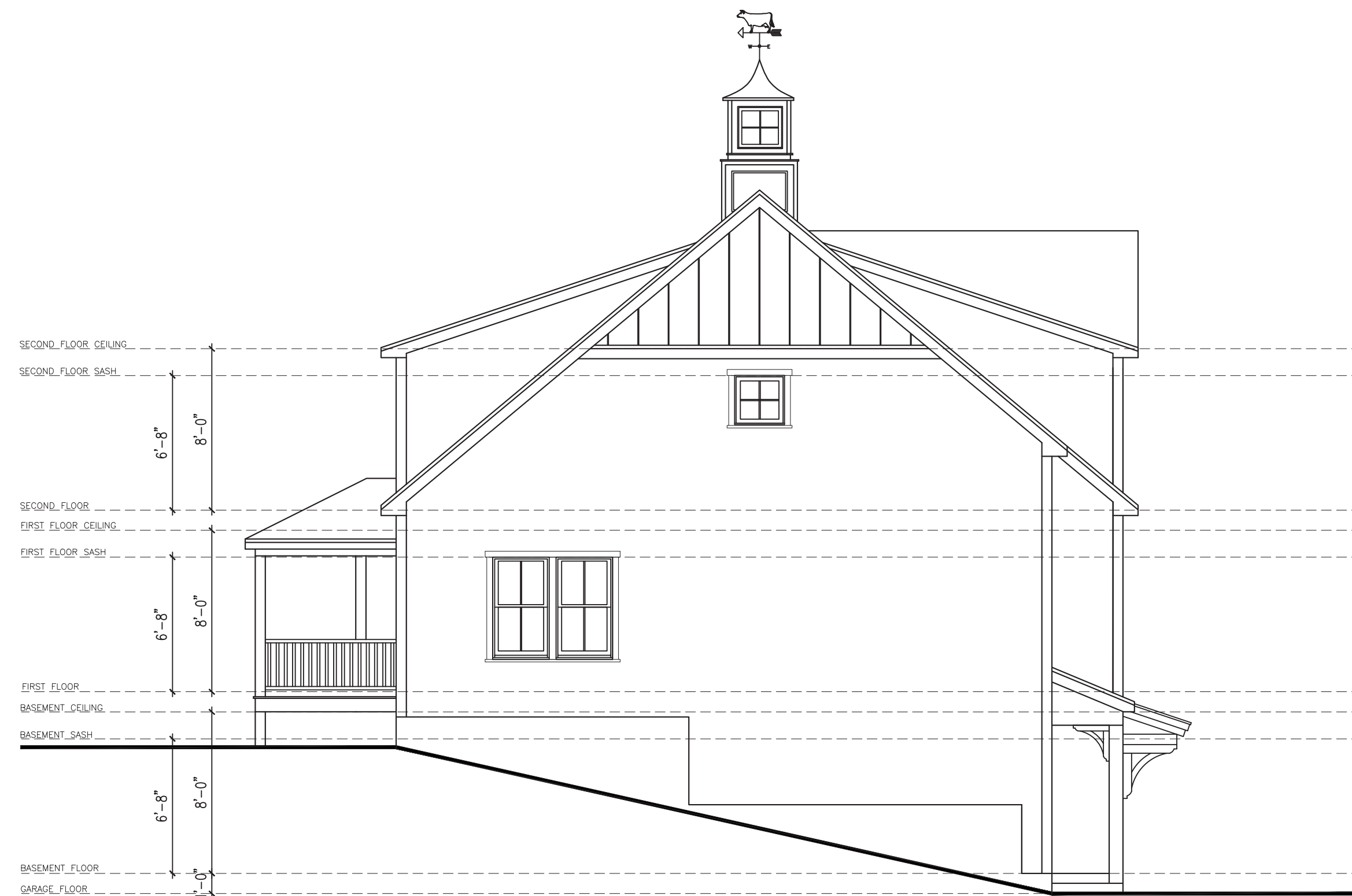
PROPOSED FRONT ELEVATION

Scale: 3/16" = 1'-0"



PROPOSED RIGHT ELEVATION

Scale: 3/16" = 1'-0"



PROPOSED LEFT ELEVATION

Scale: 3/16" = 1'-0"

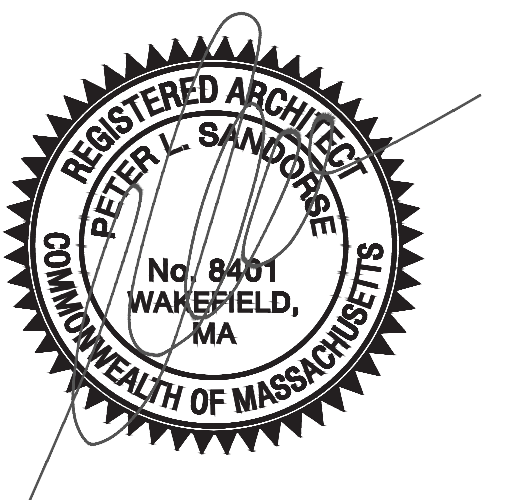


PROPOSED REAR ELEVATION

Scale: 3/16" = 1'-0"

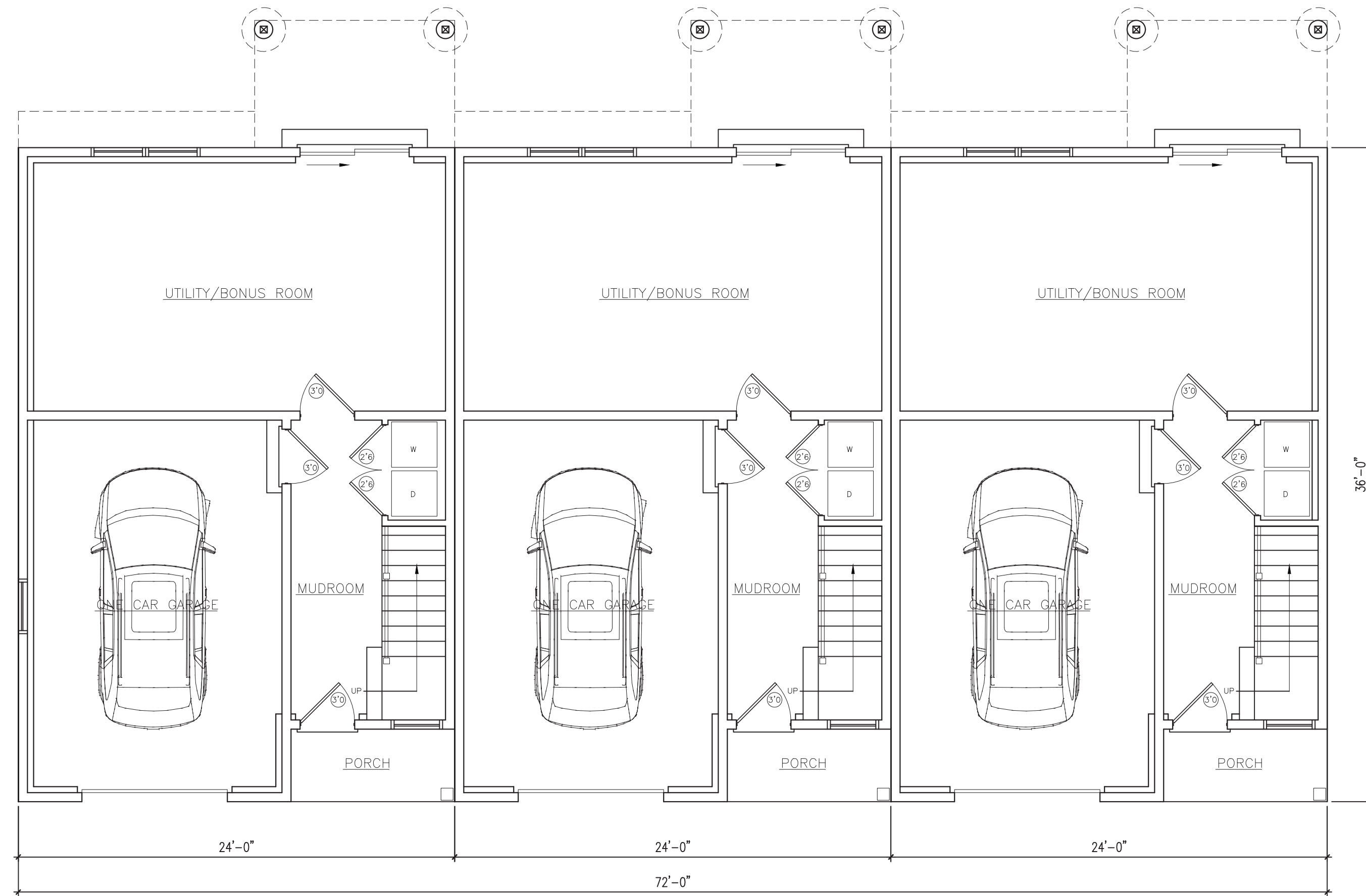
PROPOSED BUILDING C ELEVATIONS

Scale: 3/16" = 1'-0"



STARK AVENUE, WAKEFIELD, MA

8.16.23



PROPOSED GROUND LEVEL PLAN

Scale: 3/16" = 1'-0"



PROPOSED FIRST FLOOR PLAN

Scale: 3/16" = 1'-0"

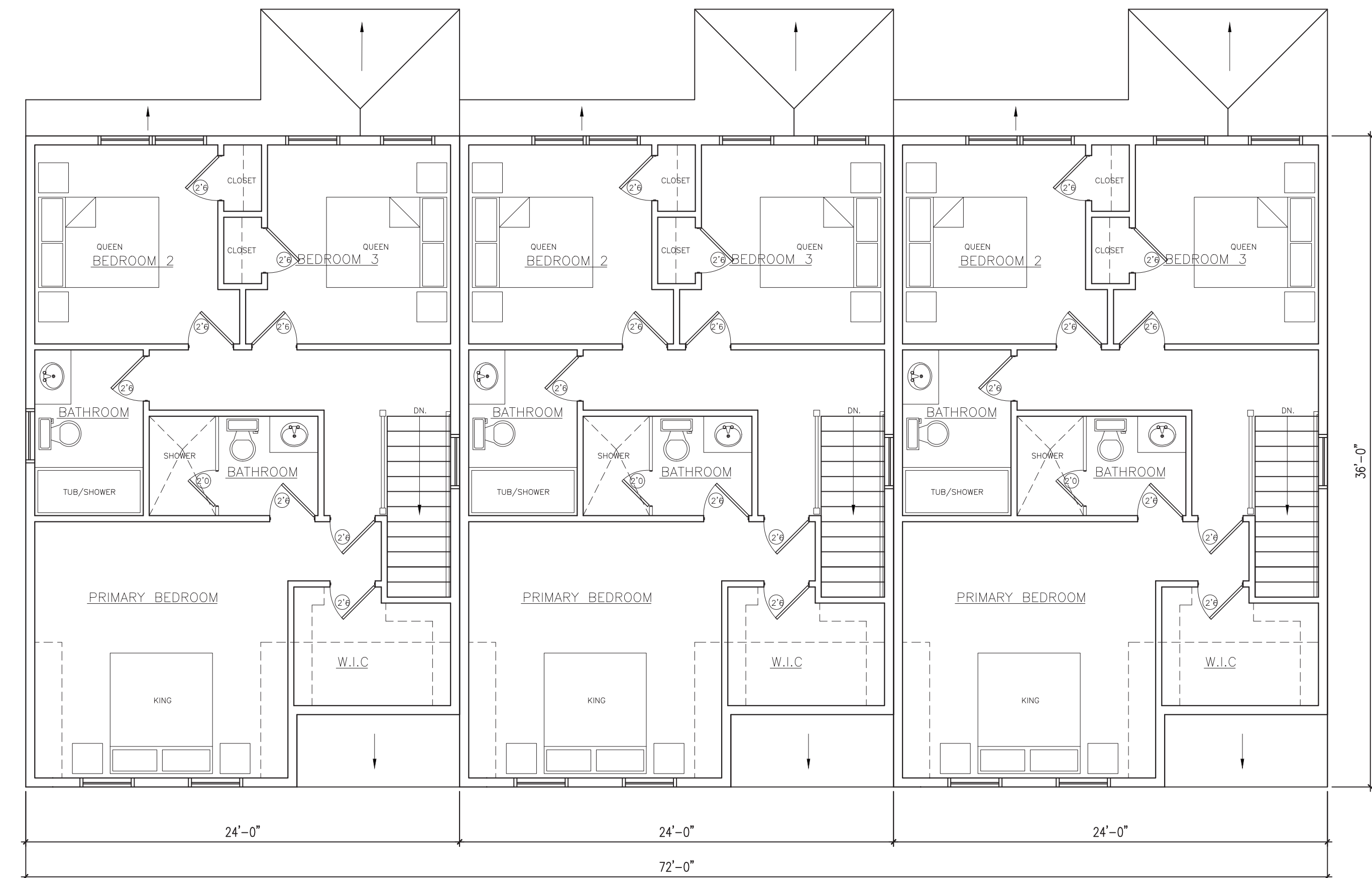
TOTAL - 3 UNITS

GROUND LEVEL - 450 FINISHED SQ. FT.

FIRST FLOOR - 795 FINISHED SQ. FT.

SECOND FLOOR - 715 FINISHED SQ. FT.

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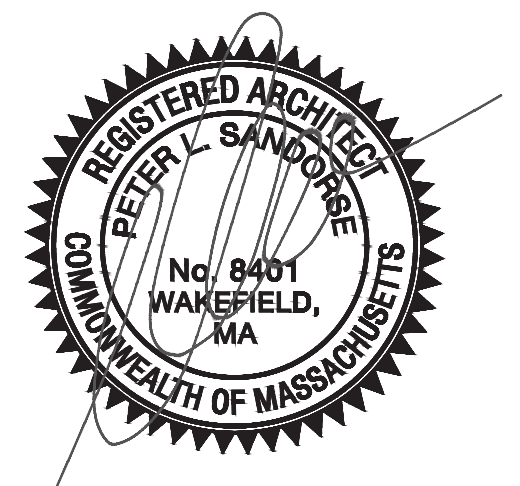


PROPOSED SECOND FLOOR PLAN

Scale: 3/16" = 1'-0"

PROPOSED BUILDING D FLOOR PLANS

Scale: 3/16" = 1'-0"



8.16.23



PROPOSED FRONT ELEVATION

Scale: 3/16" = 1'-0"



PROPOSED RIGHT ELEVATION

Scale: 3/16" = 1'-0"



PROPOSED LEFT ELEVATION

Scale: 3/16" = 1'-0"

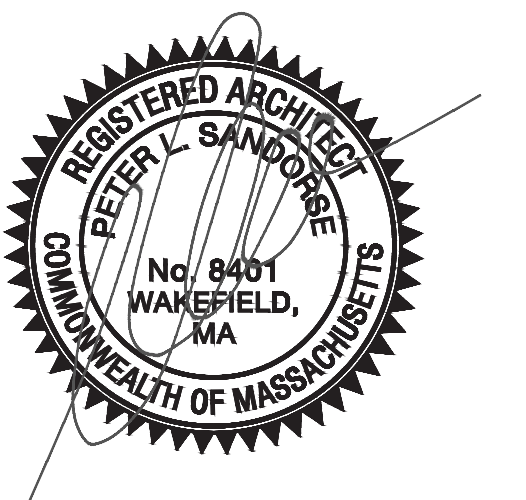


PROPOSED REAR ELEVATION

Scale: 3/16" = 1'-0"

PROPOSED BUILDING D ELEVATIONS

Scale: 3/16" = 1'-0"



STARK AVENUE, WAKEFIELD, MA

8.16.23



42" WEATHERVANE FACTORY
CAMBRIDGE PVC CUPOLA

TIMBERLINE PEWTER GRAY
HDZ ARCHITECTURAL SHINGLES

MATHEWS BROTHERS SANFORD HILLS
DUAL PANE DOUBLE HUNG WINDOW

LOUISIANA-PACIFIC (LP) - DESERT
STONE SMOOTH 5" LAP SIDING

LOUISIANA-PACIFIC (LP) - WHITE
SMOOTH TRIM BOARDS

EKENA MILLWORK 4"X24"X24" STANDARD
THORTON ARCHITECTURAL WESTERN
RED CEDAR BRACKET

PROPOSED MATERIAL LIST



Transit Advisory Committee Micro Transit and Transportation Demand Management



Community Transit Advisory Committee

- Community Advocates that work collaboratively with residents, businesses, municipal and state officials to expand mobility choices and safer travel for all.
 - Partners
 - Safe Streets Working Group
 - Chamber of Commerce
 - Youth Action Teams
 - School Department
 - Council on Aging
 - Disability Council
 - Traffic Advisory Committee



What is Micro Transit

- A form of responsive transport vehicles for hire (or subsidized).
- Flexible Routes
- Flexible Scheduling
- Shared Routes



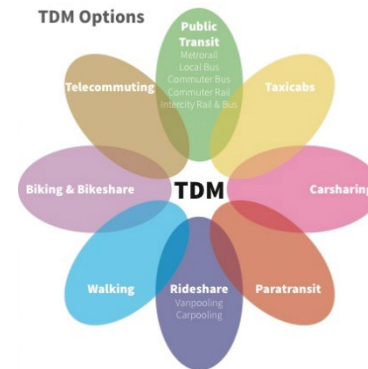
What is Traffic Demand Management?

- Defined set of strategies aimed at maximizing traveler choices
- Commuter/residential ridesharing and planning
- Reduce trip generation rates and parking needs
- Increase multi-modalism in transportation plans



Alternative Modes of Transportation

- Ultimate Goal: to shift away from single occupancy vehicles (SOV) and provide alternative modes of transportation including:
 - Public transit
 - Carpooling
 - Vanpooling
 - Ridesharing
 - Walking
 - Cycling



- TDM strategies used to encourage broader engagement with transportation alternatives, and guide residents to use them more

Benefits of TDM

- Conserving energy and reducing emissions
- Reduced wear and tear on roads and bridges
- Improving community health and fitness levels
- Achieving equity
- Enhanced quality of life in walkable, bikeable communities
- Solving parking problems
- Enhancing community safety
- Making alternative transportation more affordable



Current TDM Efforts in Wakefield

- Zoning Board of Appeals already implementing TDM practices
 - Shared shuttle from 200 Quannapowitt to MBTA stations and downtown, how do we build on this?
- Town of Wakefield Bike/Pedestrian Plan
 - Community & ED Office and Engineering working with MAPC to look at our current and future bike and pedestrian connectivity and accommodations to encourage more biking, walking and rolling
- Micro transit opportunities have been highlighted in Vision 2030 and Master Plan



Future TDM Efforts in Wakefield

- Unbundle parking (separate cost of parking from the cost of renting, leasing or ownership)
- Improve walking conditions (sidewalk, multi-use path, and streetscape improvements to encourage walking)
- Bicycle parking (provide secure bicycle parking at least 1.5 times zoning requires)
- Bicycle Parking downtown
- Support transit stops
- Promote transit-oriented development with new sidewalks to transit
- Multi-modal wayfinding signage
- Shuttle service for residents and employees
- Subsidize MBTA passes
- Regionalization
- Real-time transportation information displays
- Transportation Advisory Committee



TDM Goals/Implementation

Goal: To create a mode shift away from single occupancy vehicles (SOV) trips while reducing vehicle miles travelled and carbon emissions, alleviate congestion, improve air quality, and making better use of existing transportation infrastructure (MBTA, bike lanes, etc.)

Implementation/Regulation/Monitoring Process:

1. Determine if the TDM program is applicable to the Project and a TDM Plan must be submitted to prior to Site Plan Review– Zoning/Regulation Change.
2. Applicant submits a TDM Plan/Application to the Traffic Advisory Committee (TAC) and Community & Economic Development Office to make sure it follows all requirements for approval and prior to issuance of a special permit with the Zoning Board of Appeals
3. Prior to Occupancy all TDM measures in the plan are being implemented and/or installed
4. Yearly Transportation Management reports of the project is required to submit a monitoring and reporting form to the appropriate Town departments and TAC to documents baseline information and makes sure all physical TDM elements are active.



Questions, Feedback, Thoughts?
Thank you!



From: [Karen L Burke](#)
To: [Sherri Dalton](#)
Subject: RE: donation
Date: Wednesday, September 20, 2023 10:28:14 AM

Hi Sherri,
I have an additional donations our total is now \$75.
Thank you,
Karen

From: Sherri Dalton <sdalton@wakefield.ma.us>
Sent: Friday, September 8, 2023 11:47 AM
To: Karen L Burke <kburke1@wakefield.ma.us>
Subject: RE: donation

Thank you! I will add this to the October 2nd Town Council agenda. We only have one meeting in September and that is Monday. If you receive more just send me an updated email.

Thanks and have a great weekend!!

Sherri



My working day may not be your working day. Please do not feel obligated to respond outside of your normal working hours.

Confidentiality Notice

This electronic message and any attached files contain information from the Town of Wakefield that may be privileged and/or confidential. The information is intended for the recipient named above, and use by any other person is not authorized. If you are not the intended recipient, any disclosure, distribution, copying or use of this information is strictly prohibited. If you have received this message in error, please notify the sender by e-mail immediately. Also, please be advised that the Secretary of State's office has determined that most e-mails sent to and from municipal officials are considered to be public records and consequently may be subject to public disclosure.

From: Karen L Burke <kburke1@wakefield.ma.us>
Sent: Friday, September 8, 2023 11:45 AM
To: Sherri Dalton <sdalton@wakefield.ma.us>

Subject: donation

Hi Sherri,

We have one donation for approval for the next available Town Council meeting.

A donation in the amount of \$25 [REDACTED]

Thank you,

Karen

9/25/2023

SOURCE	DONOR INTENT	DETAIL	AMOUNT	ACCOUNT TOTAL
VARIOUS GIFTS - ORG 20610290, OBJECT 483000				29,370.00
Various Patrons	Public Printer Donations	Public printer supplies, paper, toner	505.00	
Friends of the Beebe Library	Donation	Programming	28865.00	
MAGAZINE GIFTS - ORG 20610295, OBJECT 483000				0.00
FRIENDS OF BEEBE LIBRARY GIFTS - ORG 20610291, OBJECT 483000				0.00
GIFT BOOKS - ORG 20610296, OBJECT 483000				0.00
TOTAL DONATIONS			29,370.00	29,370.00



Town of Wakefield, MA

VEAA-81

Common Victualler, Entertainment,
Automatic Amusement

Status: Active

Submitted On: 8/15/2023

Primary Location

316 MAIN ST
Wakefield, MA 01880

Owner

CARMINE PETROSINO
15 SHASTA DR NORTH READING, MA 01864

Applicant

Jevena Lin

[Redacted]

@ [Redacted]

[Redacted]

Business Information

Business Name*

Mojo Sushi

Business Street Address*

316 Main Street

Business City/Town*

Wakefield

Business State*

MA

Business Zip Code *

01880

Owner Information

Owner Name*

Jevena Lin

Owner Street Address*

5 Rose Ave

Owner City/Town*

Waintree

Owner State*

MA

Owner Zip Code*

[Redacted]

Email Address*

[Redacted]

Phone Number*

[Redacted]

License Info

Common Victualler

Number of Seats *

15

Entertainment (Televisions, Music, Streaming Devices)

Number of Devices* ?

1

List Entertainment Devices for which license is requested*

TV

Automatic Amusement ?

Are Applying for a License for This Year or Next Year?

*

This Year

Applicant e-Signature

Application is made to the Town of Wakefield Licensing Authority in accordance with their Rules and Regulations made under authority of applicable statutes.

Signature*

✓ Jevena Lin
Aug 15, 2023

e-Signature

I the undersigned certify under the penalties of perjury that I, to my best knowledge and belief, have filed all State tax returns and paid all State taxes required by law.

**Social Security # or Federal Identification Number
(whichever is applicable)**

██████████

Signature of individual or Corporate Officer*

✓ Jevena Lin
Aug 15, 2023

This license will not be issued unless this certification clause is signed by the applicant. Your social security number or FID number will be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing or tax payment obligations. Licensees who fail to correct their non-filing or delinquency will be subject to license suspension or revocation. This request is made under the authority of Mass. G.L. c. 62C, s. 49

Historical Permit Data

- 🔒 Name
- 🔒 Permit Type
- 🔒 # of Seats
- 🔒 Current
- 🔒 Fee Due
- 🔒 Physical Address
- 🔒 City
- 🔒 State

🔒 Zip Code

🔒 Business Phone

🔒 Business Fax

🔒 Applicant Last

🔒 Applicant First

🔒 Email

🔒 Permit No

🔒 Mailing Address

🔒 Mailing City

🔒 Mailing State

🔒 Mailing Zip

Attachments



History

Date	Activity
8/15/2023, 10:08:20 AM	Jevena Lin started a draft of Record VEAA-81
8/15/2023, 10:29:34 AM	Jevena Lin submitted Record VEAA-81
8/15/2023, 10:29:37 AM	approval step Town Administrative Review was assigned to Sherri Dalton on Record VEAA-81
8/15/2023, 10:31:40 AM	Sherri Dalton altered Record VEAA-81, changed expirationDate from "" to Dec 31, 2023
8/15/2023, 10:32:10 AM	Sherri Dalton added the location 316 MAIN ST, , Wakefield MA 01880 to Record VEAA-81

Date	Activity
8/15/2023, 10:32:25 AM	Sherri Dalton approved approval step Town Administrative Review on Record VEAA-81
8/18/2023, 7:02:33 AM	Sherri Dalton added attachment Copy of check to Record VEAA-81
8/18/2023, 7:03:42 AM	completed payment step License Fee on Record VEAA-81
8/18/2023, 7:03:43 AM	approval step Health and Human Services was assigned to Cindy Luongo on Record VEAA-81
8/18/2023, 7:03:43 AM	approval step Inspectional Services was assigned to Gail Conroy on Record VEAA-81
8/18/2023, 7:03:43 AM	approval step Fire Administration was assigned to Chief Michael Sullivan on Record VEAA-81
8/18/2023, 7:03:43 AM	approval step Fire Prevention was assigned to David Shinney on Record VEAA-81
8/18/2023, 7:03:43 AM	approval step Tax Department was assigned to Debra Ruehrwein on Record VEAA-81
8/18/2023, 7:03:51 AM	Sherri Dalton assigned approval step Tax Department to Kathy Kelly on Record VEAA-81
8/18/2023, 8:39:03 AM	Gail Conroy approved approval step Inspectional Services on Record VEAA-81
8/18/2023, 9:34:48 AM	Cindy Luongo approved approval step Health and Human Services on Record VEAA-81
8/22/2023, 3:39:50 PM	David Shinney approved approval step Fire Prevention on Record VEAA-81
8/24/2023, 9:55:14 AM	Chief Michael Sullivan approved approval step Fire Administration on Record VEAA-81
8/28/2023, 12:37:18 PM	Kathy Kelly approved approval step Tax Department on Record VEAA-81
8/28/2023, 12:37:19 PM	approval step Town Administrative Approval was assigned to Sherri Dalton on Record VEAA-81
9/7/2023, 9:58:36 AM	Cindy Luongo altered approval step Health and Human Services, changed status from Complete to On Hold on Record VEAA-81
9/15/2023, 11:48:40 AM	Cindy Luongo altered approval step Health and Human Services, changed status from On Hold to Complete on Record VEAA-81

Timeline

Label	Activated	Completed	Assignee	Due Date
✓ Town Administrative Review	8/15/2023, 10:29:36 AM	8/15/2023, 10:32:25 AM	Sherri Dalton	-
✓ Health and Human Services	8/18/2023, 7:03:43 AM	9/15/2023, 11:48:40 AM	Cindy Luongo	-
✓ Inspectional Services	8/18/2023, 7:03:43 AM	8/18/2023, 8:39:03 AM	Gail Conroy	-
✓ Fire Administration	8/18/2023, 7:03:43 AM	8/24/2023, 9:55:14 AM	Chief Michael Sullivan	-
✓ Fire Prevention	8/18/2023, 7:03:43 AM	8/22/2023, 3:39:50 PM	David Shinney	-
✓ Tax Department	8/18/2023, 7:03:43 AM	8/28/2023, 12:37:18 PM	Kathy Kelly	-
💰 License Fee	8/15/2023, 10:32:26 AM	8/18/2023, 7:03:42 AM	Jevena Lin	-
✓ Town Administrative Approval	8/28/2023, 12:37:19 PM	-	Sherri Dalton	-
📄 Common Victualler License Issuance This Year	-	-	-	-
📄 Entertainment License Issuance This Year	-	-	-	-
📄 Automatic Amusement License Issuance This Year	-	-	-	-
📄 Automatic Amusement License Issuance Next Year	-	-	-	-



AA-37

Alcohol License for Businesses

Status: Active

Submitted On: 8/31/2023

Primary Location

21 BROADWAY
Wakefield, MA 01880

Owner

RAYMOND S FALITE TR - FALITE TR, RONALD
J - 32 ANNESE RD REALTY TRUST
9 BROADWAY WAKEFIELD, MA 01880

Applicant

Brian McGrail

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Application Type

Application Type*

New License

Establishment Type*

Restaurant

Business Type*

Other

License Type*

All Alcohol License (Service Only)

License Number*

05828-RS-1310

Is this license for this year or next year?*

This year

Historical Permit Data

Name

Permit Type

of Seats

Current

Fee Due

Physical Address

City

State

Zip Code

Business Phone

Business Fax

Applicant Last

Applicant First

Email

Date	Activity
8/31/2023, 9:35:01 AM	Brian McGrail submitted Record AA-37
8/31/2023, 9:35:02 AM	approval step Town Administrative Review was assigned to Sherri Dalton on Record AA-37
8/31/2023, 10:57:06 AM	Sherri Dalton added attachment Public Hearing request to Record AA-37
8/31/2023, 10:58:19 AM	Sherri Dalton added the location 21 BROADWAY, , Wakefield MA 01880 to Record AA-37
8/31/2023, 10:58:29 AM	Sherri Dalton altered Record AA-37, changed expirationDate from "" to Dec 31, 2023
8/31/2023, 10:59:28 AM	Sherri Dalton changed Is this license for this year or next year? from "" to "This year" on Record AA-37
9/5/2023, 7:09:52 AM	Sherri Dalton changed Application Type from "Other" to "New License" on Record AA-37
9/5/2023, 7:11:44 AM	Sherri Dalton approved approval step Town Administrative Review on Record AA-37
9/11/2023, 11:30:41 AM	Sherri Dalton waived payment step License Fee on Record AA-37
9/11/2023, 11:30:42 AM	approval step Police Administration was assigned to Chief Steven Skory on Record AA-37
9/11/2023, 11:30:42 AM	approval step Inspectional Services was assigned to Gail Conroy on Record AA-37
9/11/2023, 11:30:42 AM	approval step Health and Human Services was assigned to Cindy Luongo on Record AA-37
9/11/2023, 11:30:42 AM	approval step Fire Prevention was assigned to David Shinney on Record AA-37
9/11/2023, 11:30:42 AM	approval step Fire Administration was assigned to Chief Michael Sullivan on Record AA-37
9/11/2023, 11:30:42 AM	approval step Tax Department was assigned to Kathy Kelly on Record AA-37
9/11/2023, 11:31:30 AM	Sherri Dalton added payment step License Fee to Record AA-37
9/11/2023, 11:32:13 AM	Cindy Luongo approved approval step Health and Human Services on Record AA-37
9/11/2023, 11:54:33 AM	Gail Conroy approved approval step Inspectional Services on Record AA-37
9/11/2023, 12:10:11 PM	Kathy Kelly approved approval step Tax Department on Record AA-37
9/11/2023, 12:24:23 PM	Chief Steven Skory approved approval step Police Administration on Record AA-37
9/12/2023, 8:05:38 AM	David Shinney approved approval step Fire Prevention on Record AA-37
9/12/2023, 11:20:17 AM	Chief Michael Sullivan approved approval step Fire Administration on Record AA-37
9/14/2023, 2:11:33 PM	Sherri Dalton added attachment Public Hearing Notice to Record AA-37
9/25/2023, 8:50:27 AM	Brian McGrail added attachment Su Shizhen CORI.pdf to Record AA-37
9/25/2023, 8:52:27 AM	Brian McGrail added attachment Floor Plan.jpg to Record AA-37
9/25/2023, 8:54:15 AM	Brian McGrail added attachment Naturalization Papers.jpg to Record AA-37
9/25/2023, 8:58:46 AM	Brian McGrail added attachment DOR Good Standing.jpg to Record AA-37
9/25/2023, 8:58:52 AM	Brian McGrail added attachment DUA Good Standing.jpg to Record AA-37

Date	Activity
9/26/2023, 11:48:20 AM	Brian McGrail added attachment Purchase Agreement WXSS LLC dba Wei Asian Cuisine.pdf to Record AA-37
9/26/2023, 11:49:38 AM	Brian McGrail added attachment Lease 21 Broadway Street. Wakefield. MA 01880 WXSS LLC dba Wei Asian Cuisne.pdf to Record AA-37
9/26/2023, 11:50:05 AM	Brian McGrail added attachment Affidavit of Abutter Notification WXSS LLC dba Wei Asian Cuisine.pdf to Record AA-37
9/27/2023, 7:53:40 AM	Brian McGrail added attachment Financial Information WXSS LLC dba Wei Asian Cuisine.pdf to Record AA-37
9/27/2023, 7:56:58 AM	Brian McGrail added attachment WXSS LLC dba Wei Asian Kitchen Business Structure Documents.pdf to Record AA-37
9/27/2023, 5:55:23 PM	Sherri Dalton changed Approved Hours of Operation (for renewals, this information needs to exactly as stated on License) from "Requesting Sunday thru Monday 11AM to 1AM" to "<div>Requesting Sunday thru Saturday 11AM to 1AM 7 days a week</div>" on Record AA-37
9/27/2023, 5:55:23 PM	Sherri Dalton changed Description of Premises from "One main dining room, restrooms to the rear of the dining area, kitchen & stoarge in the rear..." to "<div>One main dining room, restrooms to the rear of the dining area, kitchen & stoarge in the..." on Record AA-37

Timeline

Label	Activated	Completed	Assignee	Due Date
✓ Town Administrative Review	8/31/2023, 9:35:02 AM	9/5/2023, 7:11:44 AM	Sherri Dalton	-
✓ Police Administration	9/11/2023, 11:30:42 AM	9/11/2023, 12:24:23 PM	Chief Steven Skory	-
✓ Inspectional Services	9/11/2023, 11:30:42 AM	9/11/2023, 11:54:33 AM	Gail Conroy	-
✓ Health and Human Services	9/11/2023, 11:30:42 AM	9/11/2023, 11:32:13 AM	Cindy Luongo	-
✓ Fire Prevention	9/11/2023, 11:30:42 AM	9/12/2023, 8:05:38 AM	David Shinney	-
✓ Fire Administration	9/11/2023, 11:30:42 AM	9/12/2023, 11:20:17 AM	Chief Michael Sullivan	-
✓ Tax Department	9/11/2023, 11:30:42 AM	9/11/2023, 12:10:11 PM	Kathy Kelly	-
💰 License Fee	9/5/2023, 7:11:45 AM	9/11/2023, 11:30:41 AM	Brian McGrail	-
💰 License Fee	9/11/2023, 11:31:27 AM	-	Brian McGrail	-
✓ Town Administrative Approval	-	-	-	-
✓ Town Administration Final Review	-	-	-	-
📅 All Alcohol License Issuance This Year	-	-	-	-



The Commonwealth of Massachusetts
 Alcoholic Beverages Control Commission
 95 Fourth Street, Suite 3, Chelsea, MA 02150-2358
 www.mass.gov/abcc

RETAIL ALCOHOLIC BEVERAGES LICENSE APPLICATION
 MONETARY TRANSMITTAL FORM

APPLICATION FOR A TRANSFER OF LICENSE

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

ECRT CODE: RETA

Please make \$200.00 payment here: [ABCC PAYMENT WEBSITE](#)

PAYMENT MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP, OR INDIVIDUAL AND INCLUDE THE PAYMENT RECEIPT

ABCC LICENSE NUMBER (IF AN EXISTING LICENSEE, CAN BE OBTAINED FROM THE CITY)

ENTITY/ LICENSEE NAME

ADDRESS

CITY/TOWN STATE ZIP CODE

For the following transactions (Check all that apply):

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> New License | <input type="checkbox"/> Change of Location | <input type="checkbox"/> Change of Class (i.e. Annual / Seasonal) | <input type="checkbox"/> Change Corporate Structure (i.e. Corp / LLC) |
| <input checked="" type="checkbox"/> Transfer of License | <input checked="" type="checkbox"/> Alteration of Licensed Premises | <input type="checkbox"/> Change of License Type (i.e. club / restaurant) | <input type="checkbox"/> Pledge of Collateral (i.e. License/Stock) |
| <input type="checkbox"/> Change of Manager | <input type="checkbox"/> Change Corporate Name | <input type="checkbox"/> Change of Category (i.e. All Alcohol/Wine, Malt) | <input type="checkbox"/> Management/Operating Agreement |
| <input type="checkbox"/> Change of Officers/
Directors/LLC Managers | <input type="checkbox"/> Change of Ownership Interest
(LLC Members/ LLP Partners,
Trustees) | <input type="checkbox"/> Issuance/Transfer of Stock/New Stockholder | <input type="checkbox"/> Change of Hours |
| | | <input type="checkbox"/> Other <input type="text"/> | <input type="checkbox"/> Change of DBA |

THE LOCAL LICENSING AUTHORITY MUST SUBMIT THIS APPLICATION ONCE APPROVED VIA THE ePLACE PORTAL

Alcoholic Beverages Control Commission
 95 Fourth Street, Suite 3
 Chelsea, MA 02150-2358

TRANSFER OF LICENSE

To apply for a transfer of alcoholic beverages retail license, you will need the following:

- **\$200 Fee** paid online through our online payment link: [ABCC PAYMENT WEBSITE](#)
- **Monetary Transmittal Form**
- **DOR Certificate of Good Standing** This must be obtained by the seller, not the buyer.
- **DUA Certificate of Compliance** This must be obtained by the seller, not the buyer.
- **Transfer Application**
- **Manager Application**
- **Vote of the Entity**
- **Business Structure Documents**
 - If Sole Proprietor, **Business Certificate**
 - If partnership, **Partnership Agreement**
 - If corporation or LLC, **Articles of Organization** from the Secretary of the Commonwealth
- **CORI Authorization Form** Complete one for each individual with financial or beneficial interest in the entity that is applying AND one for the proposed manager of record. *This form must be notarized with a stamp or raised seal.*
- **Purchase and Sales Agreement**
- **Proof of Citizenship** for the proposed Manager of Record.
- **Supporting Financial Records** for all financing and or loans, including pledge documents, if applicable.
- **Legal Right to Occupy**, a lease or deed.
- **Floor Plan**
- **Advertisement**
- **Additional information, if necessary, utilizing the formats provided and or any affidavits.**
- **Management Agreement**, if applicable, requires the following :
 - Management Agreement Application
 - Management Agreement
 - Vote of the Entity
 - CORI Forms for all listed in Section 13 and attachments

Please Note: You may be requested to submit additional supporting documentation if necessary.



The Commonwealth of Massachusetts
 Alcoholic Beverages Control Commission
 95 Fourth Street, Suite 3, Chelsea, MA 02150-2358
 www.mass.gov/abcc

APPLICATION FOR A TRANSFER OF LICENSE

Municipality

1. TRANSACTION INFORMATION

- Transfer of License
- Alteration of Premises
- Change of Location
- Management/Operating Agreement
- Pledge of Inventory
- Pledge of License
- Pledge of Stock
- Other
- Change of Class
- Change of Category
- Change of License Type (\$12 ONLY, e.g. "club" to "restaurant")

Please provide a narrative overview of the transaction(s) being applied for. On-premises applicants should also provide a description of the intended theme or concept of the business operation. Attach additional pages, if necessary.

1. Seeking a transfer of an All-Alcohol License currently held by Ben 123, Inc. d/b/a Bamboo House at 21 Broadway Street, Wakefield, MA to WXSS LLC d/b/a Wei Asian Cuisine.
2. Seeking to alter the premises by changing the seating arrangements to be as shown on the floor plan submitted with this application.

2. LICENSE CLASSIFICATION INFORMATION

ON/OFF-PREMISES	TYPE	CATEGORY	CLASS
<input type="text" value="On-Premises-12"/>	<input type="text" value="\$12 Restaurant"/>	<input type="text" value="All Alcoholic Beverages"/>	<input type="text" value="Annual"/>

3. BUSINESS ENTITY INFORMATION

The entity that will be issued the license and have operational control of the premises.

Current or Seller's License Number FEIN

Entity Name

DBA Manager of Record

Street Address

Phone Email

Add'l Phone Website

4. DESCRIPTION OF PREMISES

Please provide a complete description of the premises to be licensed, including the number of floors, number of rooms on each floor, any outdoor areas to be included in the licensed area, and total square footage. If this application alters the current premises, provide the specific changes from the last approved description. You must also submit a floor plan.

One main dining room, restrooms to the rear of the dining area, kitchen & storage in th rear, entrance/exit in front, emergency exit in rear. The premises are all on one floor and consist of approximately 2,400 square feet.

Total Sq. Footage	<input type="text" value="2,400"/>	Seating Capacity	<input type="text" value="62"/>	Occupancy Number	<input type="text" value="62"/>
Number of Entrances	<input type="text" value="1"/>	Number of Exits	<input type="text" value="2"/>	Number of Floors	<input type="text" value="1"/>

APPLICATION FOR A TRANSFER OF LICENSE

5. CURRENT OFFICERS, STOCK OR OWNERSHIP INTEREST

Transferor Entity Name By what means is the license being transferred?

List the individuals and entities of the current ownership. Attach additional pages if necessary utilizing the format below.

Name of Principal	Title/Position	Percentage of Ownership
<input type="text" value="[REDACTED]"/>	<input type="text" value="President"/>	<input type="text" value="100%"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

6. PROPOSED OFFICERS, STOCK OR OWNERSHIP INTEREST

List all individuals or entities that will have a direct or indirect, beneficial or financial interest in this license (E.g. Stockholders, Officers, Directors, LLC Managers, LLC Members, LLP Partners, Trustees etc.). Attach additional page(s) provided, if necessary, utilizing Addendum A.

- The individuals and titles listed in this section must be identical to those filed with the Massachusetts Secretary of State.
- The individuals identified in this section, as well as the proposed Manager of Record, must complete a CORI Release Form.
- Please note the following statutory requirements for Directors and LLC Managers:
 - On Premises (E.g. Restaurant/ Club/Hotel) Directors or LLC Managers** - At least 50% must be US citizens;
 - Off Premises(Liquor Store) Directors or LLC Managers** - All must be US citizens and a majority must be Massachusetts residents.
- If you are a Multi-Tiered Organization, please attach a flow chart identifying each corporate interest and the individual owners of each entity as well as the Articles of Organization for each corporate entity. Every individual must be identified in Addendum A.

<input type="text" value="Wei Xiao"/>	<input type="text" value="[REDACTED]"/>	<input type="text" value="[REDACTED]"/>	<input type="text" value="[REDACTED]"/>
<input type="text" value="Manager and Member"/>	<input type="text" value="100"/>	<input type="text" value="Yes No"/>	<input type="text" value="Yes No"/>
<input type="text" value="Shizen Su"/>	<input type="text" value="[REDACTED]"/>	<input type="text" value="[REDACTED]"/>	<input type="text" value="[REDACTED]"/>
<input type="text" value="Manager"/>	<input type="text" value="0"/>	<input type="text" value="Yes No"/>	<input type="text" value="Yes No"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

APPLICATION FOR A TRANSFER OF LICENSE

6. PROPOSED OFFICERS, STOCK OR OWNERSHIP INTEREST (Continued...)

Name of Principal	Residential Address	SSN	DOB
<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Additional pages attached? Yes No

CRIMINAL HISTORY

Has any individual listed in question 6, and applicable attachments, ever been convicted of a State, Federal or Military Crime? If yes, attach an affidavit providing the details of any and all convictions.

Yes No

6A. INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE
 Does any individual or entity identified in question 6, and applicable attachments, have any direct or indirect, beneficial or financial interest in any other license to sell alcoholic beverages? Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality

6B. PREVIOUSLY HELD INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE
 Has any individual or entity identified in question 6, and applicable attachments, ever held a direct or indirect, beneficial or financial interest in a license to sell alcoholic beverages, which is not presently held? Yes No
 If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality

APPLICATION FOR A TRANSFER OF LICENSE

6C. DISCLOSURE OF LICENSE DISCIPLINARY ACTION

Have any of the disclosed licenses listed in question 6A or 6B ever been suspended, revoked or cancelled?

Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Date of Action	Name of License	City	Reason for suspension, revocation or cancellation

7. CORPORATE STRUCTURE

Entity Legal Structure

Date of Incorporation

State of Incorporation

Is the Corporation publicly traded? Yes No

8. OCCUPANCY OF PREMISES

Please complete all fields in this section. Please provide proof of legal occupancy of the premises.

- If the applicant entity owns the premises, a deed is required.
- If leasing or renting the premises, a signed copy of the lease is required.
- If the lease is contingent on the approval of this license, and a signed lease is not available, a copy of the unsigned lease and a letter of intent to lease, signed by the applicant and the landlord, is required.
- If the real estate and business are owned by the same individuals listed in question 6, either individually or through separate business entities, a signed copy of a lease between the two entities is required.

Please indicate by what means the applicant will occupy the premises

Landlord Name

Landlord Phone

Landlord Email

Landlord Address

Lease Beginning Date

Rent per Month

Lease Ending Date

Rent per Year

Will the Landlord receive revenue based on percentage of alcohol sales? Yes No

9. APPLICATION CONTACT

The application contact is the person who the licensing authorities should contact regarding this application.

Name:

Phone:

Title:

Email:

APPLICATION FOR A TRANSFER OF LICENSE

10. FINANCIAL DISCLOSURE

A. Purchase Price for Real Estate	[REDACTED]
B. Purchase Price for Business Assets	[REDACTED]
C. Other* (Please specify)	[REDACTED]
D. Total Cost	[REDACTED]

*Other: (i.e. Costs associated with License Transaction including but not limited to: Property price, Business Assets, Renovations costs, Construction costs, Initial Start-up costs, Inventory costs, or specify other costs):"

SOURCE OF CASH CONTRIBUTION

Please provide documentation of available funds. (E.g. Bank or other Financial institution Statements, Bank Letter, etc.)

Name of Contributor	Amount of Contribution
[REDACTED]	[REDACTED]
Total:	[REDACTED]

SOURCE OF FINANCING

Please provide signed financing documentation.

Name of Lender	Amount	Type of Financing	Is the lender a licensee pursuant to M.G.L. Ch. 138.
Not Applicable			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No

FINANCIAL INFORMATION

Provide a detailed explanation of the form(s) and source(s) of funding for the cost identified above.

Using own funds.

11. PLEDGE INFORMATION

Please provide signed pledge documentation.

Are you seeking approval for a pledge? Yes No

Please indicate what you are seeking to pledge (check all that apply) License Stock Inventory

To whom is the pledge being made?

12. MANAGER APPLICATION

A. MANAGER INFORMATION

The individual that has been appointed to manage and control the licensed business and premises.

Proposed Manager Name Date of Birth SSN

Residential Address

Email Phone

Please indicate how many hours per week you intend to be on the licensed premises

B. CITIZENSHIP/BACKGROUND INFORMATION

Are you a U.S. Citizen?* Yes No *Manager must be a U.S. Citizen
If yes, attach one of the following as proof of citizenship US Passport, Voter's Certificate, Birth Certificate or Naturalization Papers.
Have you ever been convicted of a state, federal, or military crime? Yes No
If yes, fill out the table below and attach an affidavit providing the details of any and all convictions. Attach additional pages, if necessary, utilizing the format below.

Date	Municipality	Charge	Disposition

C. EMPLOYMENT INFORMATION

Please provide your employment history. Attach additional pages, if necessary, utilizing the format below.

Start Date	End Date	Position	Employer	Supervisor Name
8/1/2002	Current	Bar Manager	Green Tea	Collean Than

D. PRIOR DISCIPLINARY ACTION

Have you held a beneficial or financial interest in, or been the manager of, a license to sell alcoholic beverages that was subject to disciplinary action? Yes No If yes, please fill out the table. Attach additional pages, if necessary,utilizing the format below.

Date of Action	Name of License	State	City	Reason for suspension, revocation or cancellation

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

Manager's Signature Date

13. MANAGEMENT AGREEMENT

Are you requesting approval to utilize a management company through a management agreement?

Yes No

If yes, please fill out section 13.

Please provide a narrative overview of the Management Agreement. Attach additional pages, if necessary.

IMPORTANT NOTE: A management agreement is where a licensee authorizes a third party to control the daily operations of the license premises, while retaining ultimate control over the license, through a written contract. *This does not pertain to a liquor license manager that is employed directly by the entity.*

13A. MANAGEMENT ENTITY

List all proposed individuals or entities that will have a direct or indirect, beneficial or financial interest in the management Entity (E.g. Stockholders, Officers, Directors, LLC Managers, LLP Partners, Trustees etc.).

Entity Name	Address	Phone
<div style="border: 1px solid black; height: 25px;"></div>	<div style="border: 1px solid black; height: 25px;"></div>	<div style="border: 1px solid black; height: 25px;"></div>

Name of Principal	Residential Address	SSN	DOB
<div style="border: 1px solid black; height: 25px;"></div>	<div style="border: 1px solid black; height: 25px;"></div>	<div style="border: 1px solid black; height: 25px;"></div>	<div style="border: 1px solid black; height: 25px;"></div>

Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
<div style="border: 1px solid black; height: 25px;"></div>	<div style="border: 1px solid black; height: 25px;"></div>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<div style="border: 1px solid black; height: 25px;"></div>	<div style="border: 1px solid black; height: 25px;"></div>	<div style="border: 1px solid black; height: 25px;"></div>	<div style="border: 1px solid black; height: 25px;"></div>

Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
<div style="border: 1px solid black; height: 25px;"></div>	<div style="border: 1px solid black; height: 25px;"></div>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<div style="border: 1px solid black; height: 25px;"></div>	<div style="border: 1px solid black; height: 25px;"></div>	<div style="border: 1px solid black; height: 25px;"></div>	<div style="border: 1px solid black; height: 25px;"></div>

Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
<div style="border: 1px solid black; height: 25px;"></div>	<div style="border: 1px solid black; height: 25px;"></div>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<div style="border: 1px solid black; height: 25px;"></div>	<div style="border: 1px solid black; height: 25px;"></div>	<div style="border: 1px solid black; height: 25px;"></div>	<div style="border: 1px solid black; height: 25px;"></div>

Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
<div style="border: 1px solid black; height: 25px;"></div>	<div style="border: 1px solid black; height: 25px;"></div>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

CRIMINAL HISTORY

Has any individual identified above ever been convicted of a State, Federal or Military Crime?

Yes No

If yes, attach an affidavit providing the details of any and all convictions.

13B. EXISTING MANAGEMENT AGREEMENTS AND INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Does any individual or entity identified in question 13A, and applicable attachments, have any direct or indirect, beneficial or financial interest in any other license to sell alcoholic beverages; and or have an active management agreement with any other licensees?

Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality

13C. PREVIOUSLY HELD INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Has any individual or entity identified in question 13A, and applicable attachments, ever held a direct or indirect, beneficial or financial interest in a license to sell alcoholic beverages, which is not presently held?

Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality

13D. PREVIOUSLY HELD MANAGEMENT AGREEMENT

Has any individual or entity identified in question 13A, and applicable attachments, ever held a management agreement with any other Massachusetts licensee?

Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Licensee Name	License Type	Municipality	Date(s) of Agreement

13E. DISCLOSURE OF LICENSE DISCIPLINARY ACTION

Have any of the disclosed licenses listed in question section 13B, 13C, 13D ever been suspended, revoked or cancelled?

Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Date of Action	Name of License	City	Reason for suspension, revocation or cancellation

13F. TERMS OF AGREEMENT

- a. Does the agreement provide for termination by the licensee? Yes No
- b. Will the licensee retain control of the business finances? Yes No
- c. Does the management entity handle the payroll for the business? Yes No

d. Management Term Begin Date e. Management Term End Date

f. How will the management company be compensated by the licensee? (check all that apply)

- \$ per month/year (indicate amount)
- % of alcohol sales (indicate percentage)
- % of overall sales (indicate percentage)
- other (please explain)

ABCC Licensee Officer/LLC Manager

Signature:
 Title:
 Date:

Management Agreement Entity Officer/LLC Manager

Signature:
 Title:
 Date:

ADDITIONAL INFORMATION

Please utilize this space to provide any additional information that will support your application or to clarify any answers provided above.

APPLICANT'S STATEMENT

I, the: sole proprietor; partner; corporate principal; LLC/LLP manager
Authorized Signatory
of
Name of the Entity/Corporation

hereby submit this application (hereinafter the "Application"), to the local licensing authority (the "LLA") and the Alcoholic Beverages Control Commission (the "ABCC" and together with the LLA collectively the "Licensing Authorities") for approval.

I do hereby declare under the pains and penalties of perjury that I have personal knowledge of the information submitted in the Application, and as such affirm that all statements and representations therein are true to the best of my knowledge and belief. I further submit the following to be true and accurate:

- (1) I understand that each representation in this Application is material to the Licensing Authorities' decision on the Application and that the Licensing Authorities will rely on each and every answer in the Application and accompanying documents in reaching its decision;
- (2) I state that the location and description of the proposed licensed premises are in compliance with state and local laws and regulations;
- (3) I understand that while the Application is pending, I must notify the Licensing Authorities of any change in the information submitted therein. I understand that failure to give such notice to the Licensing Authorities may result in disapproval of the Application;
- (4) I understand that upon approval of the Application, I must notify the Licensing Authorities of any change in the ownership as approved by the Licensing Authorities. I understand that failure to give such notice to the Licensing Authorities may result in sanctions including revocation of any license for which this Application is submitted;
- (5) I understand that the licensee will be bound by the statements and representations made in the Application, including, but not limited to the identity of persons with an ownership or financial interest in the license;
- (6) I understand that all statements and representations made become conditions of the license;
- (7) I understand that any physical alterations to or changes to the size of the area used for the sale, delivery, storage, or consumption of alcoholic beverages, must be reported to the Licensing Authorities and may require the prior approval of the Licensing Authorities;
- (8) I understand that the licensee's failure to operate the licensed premises in accordance with the statements and representations made in the Application may result in sanctions, including the revocation of any license for which the Application was submitted; and
- (9) I understand that any false statement or misrepresentation will constitute cause for disapproval of the Application or sanctions including revocation of any license for which this Application is submitted.
- (10) I confirm that the applicant corporation and each individual listed in the ownership section of the application is in good standing with the Massachusetts Department of Revenue and has complied with all laws of the Commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting of child support.

Signature:

Date:

Title:

ADDENDUM A

6. PROPOSED OFFICER, STOCK OR OWNERSHIP INTEREST (Continued...)

List all individuals or entities that will have a direct or indirect, beneficial or financial interest in this license (E.g. Stockholders, Officers, Directors, LLC Managers, LLP Partners, Trustees etc.).

Entity Name	Percentage of Ownership in Entity being Licensed (Write "NA" if this is the entity being licensed)			
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>			

Name of Principal	Residential Address	SSN	DOB
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

CRIMINAL HISTORY

Has any individual identified above ever been convicted of a State, Federal or Military Crime?
If yes, attach an affidavit providing the details of any and all convictions.

Yes No

12. MANAGER APPLICATION

A. MANAGER INFORMATION

The individual that has been appointed to manage and control the licensed business and premises.

Proposed Manager Name Date of Birth SSN

Residential Address

Email Phone

Please indicate how many hours per week you intend to be on the licensed premises

B. CITIZENSHIP/BACKGROUND INFORMATION

Are you a U.S. Citizen? Yes No *Manager must be a U.S. Citizen
If yes, attach one of the following as proof of citizenship US Passport, Voter's Certificate, Birth Certificate or Naturalization Papers.

Have you ever been convicted of a state, federal, or military crime? Yes No
If yes, fill out the table below and attach an affidavit providing the details of any and all convictions. Attach additional pages, if necessary, utilizing the format below.

Date	Municipality	Charge	Disposition

C. EMPLOYMENT INFORMATION

Please provide your employment history. Attach additional pages, if necessary, utilizing the format below.

Start Date	End Date	Position	Employer	Supervisor Name
8/1/2002	Current	Bar Manager	Green Tea	Collean Than

D. PRIOR DISCIPLINARY ACTION

Have you held a beneficial or financial interest in, or been the manager of, a license to sell alcoholic beverages that was subject to disciplinary action? Yes No If yes, please fill out the table. Attach additional pages, if necessary,utilizing the format below.

Date of Action	Name of License	State	City	Reason for suspension, revocation or cancellation

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

Manager's Signature Date

September 14, 2023

Wm. J. Lee Memorial Town Hall
Attn: Town Council: Chairman Chines
1 Lafayette Street
Wakefield, MA 01880

RE: Permission to Fly a Flag During the Month of October 2023

Dear Chairman Chines:

I am seeking permission to fly my Christopher Columbus Christian flag on the outside flagpole in front of the Americal Civic Center that is reserved for flag-flying with the permission of the Town Council Board/Committee. I'm requesting permission to fly this flag in honor of Christopher Columbus' discovery of the Americas.

When people are asked... Where did Columbus land when he discovered America? Most people say, "Why, Plymouth Rock!" Actually, he landed on a small island in the Caribbean called San Salvador which he named which means "Holy Savior" in English.

I've seen fit to send each member of the Town Council Board/Committee a copy of this letter so as to not cause any confusion about the possibility of any one of you not reviewing and/or possibly not receiving my letter.

The description of the Christopher Columbus flag is as follows: It contains a white background with a large Celtic-style green cross in the middle of the flag. There is a smaller king's gold crown with a gold/green initial F underneath the crown representing King Ferdinand to the left-hand side of the Celtic-style cross: There is a smaller queen's gold crown with a gold/green initial I underneath the crown representing Queen Isabella on the right-hand side of the Celtic cross. The gold crowns and gold/green initials are symmetrically designed with the larger green Celtic-style cross as the main focus in the center of the flag.

To view the flag as described above, just "google" it is on your phone or computer.

I am delivering each of my seven letters, personally, to the Town Council Board's/Committee's secretary.

Respectfully,


Sam Stella

