

TOWN COUNCIL AGENDA

Edward F. Dombroski, Jr., Chair
Ann McGonigle Santos, Vice-Chair
Mehreen N. Butt
Jonathan P. Chines
Paul R. DiNocco
Peter J. May
Julie Smith-Galvin

Stephen P. Maio, Town Administrator
Sherri A. Dalton, Clerk



NOTICE OF MEETING
December 09, 2019 | 6:30 p.m.
WCAT Studios, 24 Hemlock Road, Wakefield

ITEM 1 | Call to Order

ITEM 2 | Executive Session

There is a need for Executive Session to discuss Woods Subdivision litigation, because an open meeting may have detrimental effects on the bargaining position of the Town, with the intent of returning to open session immediately after. Motion and roll call vote anticipated. *Open session is expected to begin at 7:00 p.m.*

ITEM 2 | Pledge of Allegiance

ITEM 3 | Attendance

ITEM 4 | Approval of Minutes

A. Approval of November 25, 2019 Regular Town Council Meeting Minutes. Vote anticipated.

ITEM 5 | Public Engagement

Any member of the public who wishes to address the Town Council is asked to arrive by 6:55 p.m. and sign in with the Clerk. Each person who is signed in will be allotted three (3) minutes to address the Council. The Chair reserves the right to extend that time. Members of the Town Council may ask any clarifying questions or make statements related to the matters presented. In the event further deliberation or action is warranted, any issues raised may be included as an item on a future Town Council Agenda.

ITEM 6 | Committee, Board, & Commission Updates

Representatives of the Capital Planning Committee to provide updates to Councilors regarding projects and undertakings, as part of an ongoing initiative for improved communication between Town Council and Committees, Boards, and Commissions.

ITEM 7 | Appointments

A. Board of Health Joint Appointment

Appointment of one (1) member to the Board of Health to fill the remainder of a three-year term ending April 2020. Vote anticipated.

B. Town Council to authorize Sherri Dalton/Town Administrator's office to advertise for Election/Town Meeting Workers. Vote anticipated.

1 Lafayette Street Wakefield, MA 01880

www.wakefield.ma.us

781.246.6390

TOWN COUNCIL AGENDA

ITEM 8 | Licenses

A. Change of Manager Application

Applicant seeks Change of Manager for CMRG, LLC d/b/a Tonno Wakefield. Vote anticipated.

B. Common Victualler Renewal Applications

Applicants seek approval for 2020 Common Victualler licenses. Vote anticipated.

C. Liquor Renewal Applications

Applicants seek approval for 2020 Liquor licenses. Vote anticipated.

D. Lodging House Renewal Applications

Applicants seek approval for 2020 Lodging House licenses. Vote anticipated.

E. Entertainment Renewal Applications

Applicants seek approval for 2020 Entertainment licenses. Vote anticipated.

F. Automated Devices Renewal Applications

Applicants seek approval for 2020 Automated Devices licenses. Vote anticipated.

G. Class II Renewal Applications

Applicants seek approval for 2020 Class II licenses. Vote anticipated.

H. Class I Renewal Applications

Applicants seek approval for 2020 Class I licenses. Vote anticipated.

ITEM 11 | Constituent Issues

Councilors have opportunity to briefly report any issues raised by constituents that are not included on current Agenda. No votes will be taken at this time, but items may be included on a future Town Council Agenda.

ITEM 12 | Chairman's Comments

Chairman Dombroski to offer brief comments on:

A. Public Safety Building Reassessment Committee update.

B. 2019-2020 PSA & Poster Project "RESPECTfully".

C. Envision Wakefield Downtown Revitalization update.



TOWN COUNCIL AGENDA

ITEM 13 | Public Hearing

D&M Liquors

Set Public Hearing date of January 13, 2020 at 7:05 p.m. for transfer of stock.
Vote anticipated.

ITEM 14 | Matters Not Anticipated for Agenda

Any matters not anticipated prior to the 48-hour public notice requirement but necessitating immediate action by the Council.

ITEM 15 | Announcements & Acknowledgements

Town Councilors, Town Administrator, Town Counsel, and Clerk may offer recognitions and notices to the public.

ITEM 16 | Adjournment

Vote anticipated.

Next Regular Town Council Meeting: January 13, 2020 @ 7:00 p.m., WCAT Studios, 24 Hemlock Road, Wakefield





WAKEFIELD TOWN COUNCIL

Monday, November 25, 2019

7:00 P.M.

WCAT Studios, 24 Hemlock Road, Wakefield, MA. 01880

COUNCIL MEMBERS PRESENT:

Councilor Edward F. Dombroski, Jr., Chair
Councilor Ann McGonigle Santos, Vice-Chair
Councilor Mehreen N. Butt
Councilor Jonathan P. Chines
Councilor Paul R. DiNocco
Councilor Peter J. May
Councilor Julie Smith-Galvin

ADMINISTRATION PRESENT:

Town Council Clerk Sherri A. Dalton
Town Administrator Stephen P. Maio
Town Counsel Thomas A. Mullen

----- TOPICS OF DISCUSSION -----

Call to Order	Councilor Dombroski called the meeting to order at 7:03 p.m.
Pledge of Allegiance	Leading the body in the Pledge of Allegiance was Thomas Stapleton, a longtime Wakefield resident and Director of WCAT who is retiring in December 2019. Chairman Dombroski presented Mr. Stapleton with a Citation of Recognition on behalf of the Town Council and Mr. Stapleton offered remarks.
Attendance	Councilor Dombroski noted that all seven (7) Councilors were present as well as Madam Clerk, Town Administrator and Town Counsel.
Approval of Minutes – November 13, 2019	<p>Councilor Santos motioned to approve the November 13, 2019 Executive Session Minutes as presented. Councilor DiNocco seconded. Motion passed 6-0-1 with Councilor May abstaining.</p> <p>Councilor DiNocco motioned to approve the November 13, 2019 Regular Meeting Minutes as presented. Councilor Santos. Motion passed 6-0-1 with Councilor May abstaining.</p>
Public Engagement	There was no public engagement.
Planning Board Update	Bill Spaulding, Chairman of the Planning Board along with Matt Lowry, Vice-Chair and Paul Reavis, Town Planner presented a brief overview of the tasks, projects and undertakings of the Planning Board. The Wakefield Planning Board is a five member elected body with the powers and duties to carry out the provisions of the subdivision control laws. The Board holds regularly scheduled meetings and public hearings on the second and fourth Tuesday of each month. The Planning Board acts as a special permit granting authority as defined in the Town's bylaws and is responsible for preparing, adopting and issuing a Master Plan. The Planning

Board's role is to study the resources, possibilities and needs of the Town; regulate the subdivision of land within the Town by the enactment of rules and regulations; make recommendations at Town Meeting on all proposed warrant articles which affect land use and development, including, but not limited to proposals to amend the zoning bylaw and zoning map. Chairman Dombroski thanked the Board for the thorough and helpful presentation. Councilor Smith-Galvin asked what role the Planning Board plays in ensuring that as many trees are saved that can be with the new developments cutting them down. On some projects the Planning Board will bring in a landscape architect to work with the Board. Chairman Dombroski stated that one of the goals in Town is to see more trees and to preserve the trees that we do have. The Council thanked the Planning Board for all the work they are doing.

Water Division Update

Joseph Conway, Director of DPW and Steve Fitzpatrick, Supervisor of the Water and Sewer division of DPW presented the water division update. The goal is to read meters every 90 days. During review, if consumption appears to be substantially higher (double), a phone call to the resident is attempted. If unsuccessful, a card is delivered with the bill asking the resident to contact the town with a meter read. Leaky toilets and sprinklers are major items that account for unusually high water bills. Enhancements to the Water Division web page is in the works. There will be a "How to" section explaining reading your bill and calculating your consumption as well as tips for spotting and stopping leaks in your home.

Appointments – Clean Lake Committee & Retirement Board

Councilor Chines nominated Brie Weiler Reynolds as a member to the Clean Lake Committee. Councilor DiNocco motioned to appoint Brie Weiler Reynolds to the Clean Lake Committee with a three year term ending April 30, 2023. Councilor Chines seconded. Motion passed 7-0-0.

Councilor Chines nominated Ken Alepidis as a member to the Clean Lake Committee. Councilor Santos motioned to appoint Ken Alepidis to the Clean Lake Committee with a four year term ending April 30, 2024. Councilor Chines seconded. Motion passed 7-0-0.

Councilor DiNocco motioned to authorize Sherri Dalton/Town Administrators Office to advertise for a Town Council appointment to the Retirement Board. Councilor Santos seconded. Motion passed 7-0-0.

Traffic Advisory Recommendations

Wakefield Police Lt. Joseph Anderson, Chairman of the Traffic Advisory Committee presented the recommendations of the Traffic Advisory Committee. The TAC recommends a "No Parking Here to Corner" sign be installed in front of 642 Main Street ten (10) feet south of the fire hydrant with an arrow pointing north toward Dunkin Donuts and Nahant Street. Councilor Santos so motioned. Councilor May seconded. Motion passed 7-0-0. There was discussion regarding the recommendation of one parking space being painted in front of 642 Main St. to make it clear that only one vehicle has room to park in that area, to keep the

fire hydrant and driveway to Dunkin Donuts clear. Councilor Dombroski asked that the TAC look identifying that whole area, south of this parking space, as 2-hour parking. The TAC will follow up on this request.

The TAC recommended approval of Pitman Avenue; Cedar Street from Chestnut Street to Gould Street; Murray Street; Oak Street from Main Street to Greenwood Avenue; Chestnut Street from North Avenue to Cedar Street; Gould Street from Albion Street to Cedar Street; Greenwood Avenue and Emerson Street from Gould Street to Chestnut Street for residential parking permits. Councilor Santos so motioned. Councilor May seconded. Motion passed 7-0-0. Councilor Chines asked that some consideration be put in for Albion Street as well. Councilor Santos stated that apartment buildings on Albion Street have their own parking lot and that she is not in favor of expanding residential parking permits to all of Albion Street. The Town Council asked that Cedar Street to Albion Street; Francis Street and Madison Street be on the next TAC agenda.

The TAC recommends a stop sign be installed on the southern end of Hawes Avenue at the intersection of Hawley Road. Councilor DiNocco so motioned. Councilor Santos seconded. Motion passed 7-0-0.

Licenses

Councilor Santos motioned to approve the one-day liquor license application from The Scholarship Foundation of Wakefield, Inc. for an event on January 25, 2020 from 6:00 p.m. until 11:00 p.m. at St. Joseph's Church Parish Hall. Councilor DiNocco seconded. Motion passed 7-0-0.

Councilor Santos motioned to approve the 2020 Common Victualler applications as presented and attached. Councilor May seconded. Motion passed 7-0-0.

Councilor DiNocco motioned to approve the 2020 Liquor applications as presented and attached. Councilor May seconded. Motion passed 7-0-0.

Councilor DiNocco motioned to approve the 2020 Lodging House applications as presented and attached. Councilor Santos seconded. Motion passed 7-0-0.

Councilor May stepped out of the room.

Councilor Santos motioned to approve the 2020 Entertainment applications as presented and attached. Councilor DiNocco seconded. Motion passed 6-0-0.

Councilor Santos motioned to approve the 2020 Fortune Teller application as presented and attached. Councilor DiNocco seconded. Motion passed 6-0-0.

Councilor May rejoined the meeting.

Councilor DiNocco motioned to approve the 2020 Automated Device applications as presented and attached. Councilor Santos seconded. Motion passed 7-0-0.

Councilor DiNocco motioned to approve the 2020 Class II applications as presented and attached. Councilor Santos seconded. Motion passed 6-o-o.

Councilor Santos motioned to approve the 2020 Class I applications as presented and attached. Councilor May seconded. Motion passed 7-o-o.

**Constituent
Issues**

Councilor Smith-Galvin stated the crosswalk in front of the High School is now painted but feels more awareness needs to be around it like a flashing light or signage; asked about a crosswalk in front of the Light Department. Town Administrator replied that is in the works.

Councilor Butt has received emails regarding the noise by-law in residential areas where leaf blowers have gotten louder and asked to look in to a later than 7:00 a.m. start time; asked about updates and consistency to school playgrounds; the Massachusetts legislature just passed the vaping product law and wanted to know what that means for stores in Wakefield.

Councilor Chines received concern regarding the left side of parking on Common Street now that it is a one-way. He also received an email regarding the dust pollution from the concrete plant on New Salem Street and asked the Town Administrator to follow-up with the Health Department.

**Chairman's
Comments**

The deadline for the Town Council appointment to the Human Rights Commission has been extended in hopes of generating more applicant interest.

As of January 1, 2020 the Town Administrator's office will handle all banner requests.

**Videoing of
Meetings
Update**

Video recording equipment in the first floor conference room at Town Hall is no longer serviceable so an RFP for upgrades was issued. One submission that was received would allow for meetings in the first floor conference room with expansion to the second floor conference room in the future. The system if purchased would allow for meetings at the first floor conference room to be filmed in one of three methods: on site, from the studio at WCAT or the system could be managed from a laptop. Appropriated funding will be needed for the improvements and the capital cost is \$30,987.00. If implemented, the system can be up and running within a month of funding. In the meantime the bigger committee/boards/commissions can meet at WCAT where the meeting will be recorded and shown on the WCAT schedule and YouTube, but not live streamed.

**Gift
Acceptance**

Councilor DiNocco motioned to accept and expend a gift or gifts to the library in the amount of \$12,321.35 from various donors with thanks. Councilor Santos seconded. Motion passed 7-o-o.

**Liaison
Updates**

Councilor Santos – Fire Department: has heard from many firefighters that they are pleased with the vote for the Ambulance Contract with Cataldo. Committees:

asked for an updated list from Sherri. Community Planning and Economic Development: will have a job description for the Town Council to review shortly.

Councilor Smith-Galvin – WMGLD: a workshop presentation will be on Tuesday evening December 3, 2019 at the Library regarding energy efficiency changes particularly around heat pumps and incentives for heat pumps. She also met with the Manager of the WMGLD and everything is on track with the electric vehicle charging stations with the hope they will be installed by January 1, 2020. And their solar program continues. Communications: the style guide and consistency of branding is well underway. The best way to stay informed is to click on “Get Town News” on the homepage of the website.

Councilor May – Department of Public Works: roadway paving on Lowell Street and Main Street to Vernon Street is done or will be done in the spring. The DPW will be seeking additional funding at the Spring Town Meeting. Blatts Field construction is moving along and will hopefully be done for the 2020 softball season. Phase three of the Juniper Avenue water distribution upgrade has been completed. The survey and design of the Pickle Ball court at Veterans Field has been completed and underway. The design survey for the Grafton Street drainage to improve the area drainage is out to bid and the sinking floor at the Public Works facility has been improved for egress and safety. The fleet management section of the facility now has a leaky roof and floor issues.

Councilor Butt – Arts and Culture: thank you to the library as Wakefield 101 was very successful. The new van at the Council of Aging is working really well and the Council of Aging was mentioned in the Blue Cross Blue Shield magazine. They are also looking into ways of being an age friendly community with an age friendly website. The Albion Cultural Exchange Committee is having many activities coming up. A bid for the new bathroom is on track.

Councilor DiNocco – Police Department: looking to possibly add to the current personnel in the future. All police officers have been re-certified in the use of Tasers and firearms. The month of November is “No Shave November”. All monies raised goes to the Cops for Kids initiative and will be extended to the month of December where monies raised in December will go to the Wakefield Food Pantry and WAAV. Female officers will be coming up with ideas to participate in this process for the month of December. Officer Michael Pietrantonio, the Resource Officer at the Voke is the officer of the quarter. Any placements of roadway signage by residents is illegal and residents can be prosecuted. Traffic leaving the Galvin School onto North Avenue, cars need to stay in their lane and not travel onto the wrong side of the road. Salem Street will be shut down very shortly due to the National Grid work.

Councilor Chines – Schools: the design funding for the Greenwood School was voted on and approved at the November Town Meeting. Feedback from the MSBA is anticipated with regards to the Statement of Interest within the month

as to whether Wakefield will be moving on to the next round. The School Committee is setting up the High School Working Group and there has been no meeting as of yet but hopefully they will meet before the end of the year. The School Committee has settled 6 out of 7 bargaining units within the school department. The one left is the Teacher's Contract which is currently in the middle of negotiations. The budget cycle is starting soon and one thing the school department is focusing on is special education to develop a multi-year strategy with the aim of improving the services available within the Wakefield public schools to meet student needs in a more effective way and to save money in the long term in terms on avoiding out of district placements wherever possible.

Chairman Dombroski – Long-range forecasting: we are getting into budget season now and that is expected to include a meeting in January. Finance Committee: we currently have an available position for a member of the Finance Committee that has been posted.

Matters Not Anticipated for Agenda

There were no unanticipated matters.

Announcements & Acknowledgements

Councilor DiNocco – December 7, 2019 is the Holiday Stroll from 2:00 p.m. until 6:00 p.m.; Governor signed the Hands Free Driving bill today and there will be 90 days of educational enforcement

Councilor Butt – Wakefield Lynnfield Interfaith Clergy Association is having their Thanksgiving Service tomorrow night at 7:00 p.m.; December 17, 2019 at 7:00 p.m. is a meeting regarding the Community Garden

Councilor Smith-Galvin – Thursday at 9:00 a.m. is a pop-up 5K at Quannapowitt Parkway with donations going to Wreaths Across America; WCAT Annual Meeting is December 4, 2019 at the Crystal Community Club from 6:00 p.m. until 9:00 p.m.; a number of Wakefield students are taking leadership roles in the December 6, 2019 Boston climate strike and they are looking for adult marshalls.

Councilor Chines – recognized Senator Lewis for the Student Opportunity Act that has passed both houses and will be signed tomorrow; this weekend is Shop Local for small businesses; WCNA lighting of the lights is December 6, 2019 at 6:30 p.m.

Chairman Dombroski – inquired regarding yard waste pick-up on November 23, 2019; congratulations on a very successful Wakefield 101; Coffee with the Council was well attended; thank you to Tom Stapleton and congratulations to Ryan Boyd.


Adjournment

At 10:08 p.m. Councilor Santos motioned to adjourn. Councilor DiNocco seconded. Motion passed 7-0-0.

**Next Council
Meeting**

The next regular Town Council meeting is December 09, 2019 at 7:00 p.m. at
WCAT Studios, 24 Hemlock Road, Wakefield

Respectfully submitted,



Sherri A. Dalton, Executive Assistant

DRAFT

Capital Planning Update

12/09/2019

Members

- Frank Leone*- 2021
- Daniel Calore- 2020
- David Whitham-2021
- Tracey Claversey-2020
- Phillip Renzi-2022

*Chairperson

Schedule

- FY2021 Process to begin after January 1
- Committee compiles all capital requests into one working spreadsheet and prioritizes funding based on need and the Town Administrators recommended budget
- Plan is submitted to Council for addition to the Annual Town Meeting Warrant

Departments included:

Police, Fire, School Dept, Public Works, IT
Senior Center, Library, Recreation

FY2020 Update/Highlights

Fleet

All Vehicles Ordered

Awaiting Delivery on 3 DPW trucks, all others delivered and in service
(Lead time on larger vehicles can be up to 1 year or more)

Buildings

Completed Projects

- Doyle/Town Hall Boilers
 - Paid from FY19 DPW Operating Budget, \$19,000 in interest savings to town
- Doyle Addressable Fire Alarm Panel Upgrade
- Town Hall Exterior Fascia/Trim/Paint
- 5 Common Street Ceiling and Window Replacement
- Yeuell/Doyle Under ground Oil Tank Removals
- Greenwood/Dolebare 2nd Boilers (12/19 Completion)
- Civic Center Sign Replacement and Gym Floor Upgrade

In Progress....

- Vets Field- Tennis/Pickleball Courts

Survey & Design Completed

Bid this winter for Spring Construction

Blatz Field- Softball Field

Design and Layout Complete

Laser Grading of Outfield Turf, New Grass Planting Complete

Fence Install currently ongoing

On Schedule for completion before 1st pitch 2020

Water Quality Swale- Main @ Cordis Street

Survey & Design Completed

Spring 2020 Construction

Greenwood School Playground

Spring 2020 Construction

Thank You!

Thomas L. Marchant, BS, CNMT, (NMTCB)
19 Beechtree Circle
Wakefield, MA 01880

Ph: 617-759-9239

E-Mail: TMarchant1@aol.com

EXPERIENCE

Senior Director, Business Development
ICON Medical Imaging

03/2011 – Present
Warrington, PA

- Reporting to VP Business Development.
- Responsible for Business Development Corporate Sales and Marketing support activities for US and CAN clinical trial business.
- Business Derived from Therapeutic Areas: Oncology, Neurology, Musculoskeletal, and Cardiovascular.
- Consult and advise Pharma and Biotech Business Development staff and clients during the planning phases of clinical protocols and follow progress of clinical trials during study life cycle.
- Main point of contact for Imaging protocol development review for client studies.

Senior Director, Business Development
Synarc Inc.

2009 – 03/2011
San Francisco, CA

- Reporting to VP Business Development.
- Responsible for Corporate Sales and Marketing activities for Eastern US and CAN clinical trial business.
- Business Derived from Therapeutic Areas: Oncology, Neurology, Musculoskeletal, and Cardiovascular.
- Consult and advise Pharma and Biotech clients during the planning phases of clinical protocols and follow progress of clinical trials during study life cycle. Main point of contact for Outsourcing and Clinical Leads

Vice President, Business Development
M2S Inc.

2008 - 2009
W. Lebanon, NH

- Reporting to CEO.
- Responsible for Corporate Sales and Marketing activities for Sales and Marketing activities for US and OUS clinical trial business.
- Annual expected sales for Clinical Trials FY 2009 \$5mm from <\$1mm in FY 2007. Expanded business into Oncology and Musculoskeletal therapeutic areas as well as Orthopedic device studies.
- Established new clinical registries business for vascular and cardiovascular surgeon groups

Director, Business Development
Bio_Imaging Technologies Inc.

1997 - 2008
Newtown, PA

- Reporting to VP Sales

- Responsible for all business development activities in New England, New York State and Midwest States.
- Working with Pharmaceutical, Biotech, and Medical Device companies to design and oversee the conduct of the medical imaging portions of their product clinical trials. Following all USFDA guidelines in respect to such trials.
- Responsible for approx \$10mm in business for FY 2006
- 20% Growth Rate Annually since FY 2000

Product Manager

Park Medical Systems

1993 - 1997

**Montreal, Quebec, CAN
Framingham, MA**

- Direct product development and clinical support for gamma camera product line
- Responsible for marketing and trade show activities in the US and Canada
- Direct customer sales training
- Provide Sales support for US and Canadian sales staff

Nuclear Medicine Imaging Specialist, Business Development

McNeil Pharmaceutical

1993 - 1997

Spring House, PA

- Developed relationships with thought leaders in the area of Nuclear Cardiology
- Organized and directed pre-marketing activities for new business segment at McNeil (J&J Company)
- Provided oversight for clinical trial activity at clinical sites working on new cardiac perfusion imaging agent

Technical Business Development Representative

Scanditronix, Inc

1988 - 1990

Essex, MA

- Managed Positron Imaging (PET) Systems sales activities for Eastern United States and Canada
- Closed multimillion dollar sales in San Antonio Un of Texas, San Antonio and Boston (MGH) San Antonio systems

Hospital Representative

E.R Squibb and sons

1986 - 1988

Princeton, NJ

- Managed pharmaceutical sales for Cardiovascular/Anti-Infective segment
- Successfully introduced new anti-infective agent into 13 teaching hospitals in Boston area. 60% Formulary acceptance in first year
- Won Squibb's Go-Getter Sales Award in 1986

Technical Services Imaging Specialist

E.I. DuPont Medical Products (New England Nuclear)

1981 - 1986

Billerica, MA

- Co-Developed product customer inquiry/complaint protocol which involved co-operation between sales, manufacturing, QA/QC and Regulatory Affairs. This resulted in a streamlined problem reporting process which greatly reduced the number of costly product recalls while providing a value-added service to our customers.
- Developed marketing programs and materials in support of radiopharmaceutical business segment
- Organized and conducted sales evaluation and training in US and Europe

1980 - 1981

Nuclear Medical Technologist
Dana-Farber Cancer institute

Boston, MA

- Performed all routine Nuclear Medicine diagnostic procedures
- Participated In radiopharmaceutical clinical trial studies
- Provided technical training of Radiology and nursing students

Nuclear Medical Technologist
Salem Hospital

1976 - 1980
Salem, MA

- Performed all routine Nuclear Medicine diagnostic procedures
- Provided technical training of Radiology and nursing students

EDUCATION

BS Biology (Medical Technology)
Suffolk University

1972 - 1976
Boston, MA

Sat for and passed Registry Exams for:

- **America Society of Clinical Pathologists, Nuclear Medicine (ASCP)NM**
- **Nuclear Medicine Technology certification board NMTCB**

1977 - 1978

Salem Hospital School of Nuclear Medicine Technology

Salem, MA

PROFESSIONAL MEMBERSHIPS

- Society of Nuclear Medicine (1978)
- American Society of Nuclear Cardiology (1997)
- Drug Information Association (1998)

Application for Appointment/Re-Appointment to Town Board, Committee or Commission Please email this form, along with a current resume, to Sherri Dalton sdalton@wakefield.ma.us

Name: Candace Linehan

Address: 51 Oak Street, Wakefield, MA 01880

Email: candace.linehan@gmail.com

Daytime Phone: 617-733-1618 Evening Phone: 617-733-1618

How long have you lived in Wakefield? Since 8/2018

Current occupation: Family Nurse Practitioner

Board or commission in which you are interested: Board of Health

Why are you interested in serving on this board or commission?

I am a newer Wakefield resident and interested in a role in town leadership. This role specifically appealed to me since it involved public health. My educational background is in public health and my profession is providing healthcare. I have two young daughters and, as you can imagine, their health and wellbeing are of the highest importance to me. I would like to contribute to making Wakefield a healthy and safe place for them and for all residents. I also hope to ensure the needs of Wakefield's most vulnerable populations are acknowledged and understood by the Board of Health. I would value the opportunity to collaborate with other Board members and apply my primary care experience to population management, wellness promotion and environmental protection.

In addition to the experience listed in your resume, what specific skills or expertise do you believe you can bring to this board or commission?

I have worked for fourteen years providing primary care at a large community health center in East Boston; mainly serving a urban, poor, immigrant population. This role has not only allowed me the opportunity to impact individual health; but also to understand the health needs of a community. I have seen the gains that successful public health initiatives offer my patients, and have also seen

many suffer from lack of access to needed services. As a healthcare provider, I believe I bring a unique perspective to an administrative board.

I also bring my educational background, I have a Masters in Public Health from Boston University. During my course of study I developed a specific interest in public policy and chose to pursue a focused study in that area. I am eager to utilize the knowledge I have and learn from others on the Board.

I have served as the medical staff representative on the East Boston Neighborhood Health Center's Infection Control Committee for six years. This committee is charged with monitoring employee health and safety, health center emergency preparedness and infection control. My role was to offer a provider's opinion on health center policies and procedures. My experience considering and making decisions about disease control, wellness and environmental safety with this committee would prove useful when serving on a board of health.

Personally, I am driven and passionate about health; I feel these are desirable attributes for a board member. As a full time working parent, I have learned to be organized and focused in my career and home life. I am confident my efficiency will translate to my commitment and contributions to this board as well. I am grateful for the opportunity to participate in such important work.

If you are currently serving on any other Town boards, please indicate which one(s): none

Signature: Candace Linehan Date: November 11, 2019

Contact

candace.linehan@gmail.com

www.linkedin.com/in/

candacelinehan (LinkedIn)

www.ebnhc.org (Company)

Top Skills

Healthcare

Public Health

Hospitals

Languages

Spanish (Full Professional)

Portuguese (Limited Working)

Certifications

RN

NP-C

ACLS

Certified Specialist in Wine

Candace Linehan, NP-C, MPH

Family Nurse Practitioner at East Boston Neighborhood Health Center

Wakefield, Massachusetts

Summary

A highly motivated woman with a deep commitment to public health and primary care. Extensive experience in providing health care to urban poor and immigrant populations. Interested in novel public health initiatives, expanding primary care access and developing affordable health insurance for all.

Specialties: Family Nurse Practitioner, Fluent in Spanish

Experience

East Boston Neighborhood Health Center

Family Nurse Practitioner

December 2005 - Present

Department of Family Medicine

Board certified family nurse practitioner, providing primary care in a family practice at a large community health center. Primarily serving a urban, Latino, immigrant population.

Mount Auburn Hospital

Registered Nurse

August 2004 - Present

Cambridge, Massachusetts

Staff nurse on a telemetry floor serving patients with cardiac disease.

Eascare Ambulance

Emergency Medical Technician

1999 - 2004 (6 years)

Provided pre and post hospital care working as an emergency medical technician for a city based private ambulance company

Education

Boston University

MPH, Master of Public Health, Concentration in Health Policy and
Management · (2009 - 2011)

Regis College

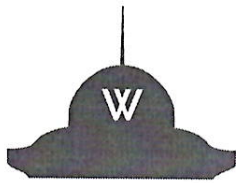
MSN, Master of Science in Nursing · (2004 - 2005)

Regis College

BSN, Bachelor of Science in Nursing · (2002 - 2004)

Boston University

BS, Bachelor of Science in Biology with a Specialization in Marine
Science · (1998 - 2002)



TOWN OF WAKEFIELD

TOWN ADMINISTRATOR'S OFFICE

Application for Appointment / Re-Appointment to Town Board, Committee, or Commission

Please submit this application with a current resume to Sherri Dalton at sdalton@wakefield.ma.us.

Name: Anita M. Loughlin Email: amloughlin@gmail.com

Address: 13 Sheffield Road Wakefield, MA 01880

Daytime phone: 617 721 8214 (cell) Evening phone: 781 245 7158 (home)

How long have you lived in Wakefield: 57 years Current occupation: Epidemiologist

Board or commission in which you are interested: Board of Health

Please state why you are interested in serving on this board or commission:

I'm a public health expert and being on the Board of Health would be a way I could use my expertise in the service of our town. I read online that there was a need for the town to appoint a new BOH member this year. As a lifelong Wakefield resident, I'm willing to serve the town in this capacity. Thank you in advance for your consideration.

In addition to the experience listed in your attached resume, what specific skills or expertise do you believe you can bring to this board or commission?

I have bachelors degree in Health Sciences, and both a masters and a doctoral degree in Epidemiology, the study of disease/health in the population. I have over 30 years experience working in public health, including working for the State's Department of Public Health. I have specific expertise in vaccines and infectious diseases, and I have a strong background in public health in general. My CV is attached, and I'm happy to discuss my qualifications

Are you currently serving on any other Town boards? ☐ Yes ☒ No

If yes, please specify: _____

Anita M. Loughlin 10 NOV 2019
Signature Date



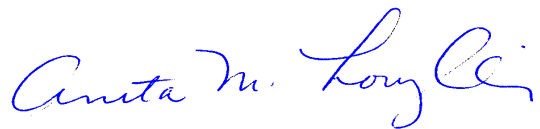
Anita M. Loughlin, PhD
13 Sheffield Road
Wakefield, MA 01880

November 10, 2019

Dear Mr. Maio and Ms. Dalton

I'm am responding to the notice for applicants for appointment to the Town's Board of Health. Attached please find my application and resume. I would appreciate your consideration. Please reach out if you have any questions.

Best Regards,

A handwritten signature in blue ink that reads "Anita M. Loughlin". The signature is written in a cursive style with a large, stylized "L" at the end.

ANITA M. LOUGHLIN, BS, MS, PhD

13 Sheffield Road Wakefield, MA 01880 | (617) 721-8214 | email: amloughlin@gmail.com

Summary of Qualifications

- Experienced Pharmacoepidemiologist providing scientific direction and guidance for industry sponsored research including comparative effectiveness studies, post-licensure drug/vaccine safety studies, and observational cohort studies conducted in large administrative databases, specifically claims data and electronic health record data
- A trained Infectious Disease (ID) Epidemiologist, with more than 20 years of experience implementing large national and international clinical and epidemiologic studies and who has led as PI or co-PI for multiple government funded research projects
- Familiar with federal regulations governing clinical research, including post-approval regulatory requirements, International Society for Pharmacoepidemiology's Guidelines for Good Pharmacoepidemiology Practices (<http://www.pharmacoepi.org>), ICH good clinical practice guidelines (GCP), and conduct of regulatory affairs for industry sponsored clinical trials
- Responsible for the scientific and financial administration of many projects, including the development of study protocols and operation manuals; development of study tracking, data collection tools and databases; development of specimen collection and processing standard operating procedures; training of research staff; obtaining IRB approvals; creation of study budgets and tracking expenditures
- Primary liaison to multi-disciplinary investigators and vendors, leading study-wide meetings throughout project implementation
- Responsible for interim, annual, and final reports to study sponsors and for the development of study manuscripts
- Highly experienced statistical analyst with expertise in SAS and familiarity with other statistical software packages
- An insightful manager, a team builder and problem solver, with an amiable style that values teamwork and collaboration for project success

Education

The Johns Hopkins Bloomberg School of Public Health, Baltimore, MD

- Ph.D. Epidemiology with specialties in infectious disease and clinical trials (2003)

University of Massachusetts, Amherst, MA

- M.S. Epidemiology (1991)

Merrimack College, North Andover, MA

- B.S. Health Sciences (1985)

Experience**Senior Epidemiologist** – 2013 to present

OptumInsight – Waltham, MA

- Participate in one or more project teams as epidemiologist/lead epidemiologist
- Day-to-day leadership of epidemiologic studies, including preparation of analytic and management plans
- Interpretation of study results and writing of study protocols, reports, and manuscripts for publication
- Direct client interaction
- Proposal development and study design
- Development of research methods ensuring compliance with appropriate standard operating procedures
- Formal consulting with external clients
- Serve as internal reviewer of colleague deliverables and mentor of junior research staff

Assistant Professor – 2003 to 2013

Boston University Schools of Medicine and Public Health

Division of Pediatric Infectious Disease and the Center for Pediatric and Vaccine Research – Boston Medical Center, Boston, MA

- Lead as Principal Investigator the design and implementation of an active pertussis surveillance project and an investigation of memory B-cells as a marker of waning immunity to acellular pertussis vaccines
- Designed and lead the implementation of research protocols to assess vaccine safety, including a large study of the genetic predictors of Guillain-Barré syndrome
- Collaborate with government public health agencies, and local and national investigators on analysis, manuscript development and professional presentations
- Managed grants -- including the writing of proposals and study protocols, obtaining funding, obtaining IRB approvals and oversight of the financial and scientific administration of grants and research projects
- Hired, trained and managed research staff
- Mentored pediatric ID fellows on research methods and statistical analysis
- Served as the principal research methodologist/analyst for the Division of Pediatric ID
- Manuscript authorship
- Research interests include infectious disease epidemiology, clinical trials and intervention evaluation, evaluation of vaccine safety and effectiveness

Associate – Department of Epidemiology – 2003-2013

Johns Hopkins Bloomberg School of Public Health, Baltimore, MD

- Professional appointment

Consultant – 2004-2006

John Snow Inc, Boston, MA

- Completed a survival analysis assessing the predictors of early death and changes in mortality rates across differing antiretroviral treatment eras, utilizing the MA Department of Public Health HIV/AIDS registry data

Principal Investigator/Director – Project ACCESS (ARTAS) and ACCESS II – 1999-2002

Department of Epidemiology – Johns Hopkins Bloomberg School of Public Health

- Conduct of research projects evaluating a linkage case-management intervention to improve entry into HIV medical care, assessing the barriers to HIV medical care, and evaluating the acceptability of Hepatitis A and B vaccines in a Hepatitis C infected population.
- Co-authored grant proposal submissions
- Designed study methods and research instruments
- Hired, trained and managed staff
- Oversight of implementation of field research
- Oversight of data management
- Completion of data analysis for presentations and manuscripts
- Manuscript authorship

Protocol Specialist/Senior Analyst – 1997-1998

Abt Associates, Boston, MA

- Monitored the conduct of research projects assigned under the Under the NIAID – HIVNET Master Contract
- Collaborated with network investigators to create or update research proposals, regulatory affairs documents, and scientific instruments

Operations Director/Study Coordinator/Data Manager – 1994-1997

Case Western Reserve University – Cleveland, OH

Uganda-CWRU Research Collaboration in Kampala, Uganda,

- Managed overall field research operations,
- Oversight of Phase I to III tuberculosis treatment trials and epidemiologic studies of tuberculosis and HIV infection, and implementation planning for HIV vaccine studies
- Trained and managed research staff
- Maintained clinical study's operation manuals
- Wrote standard operation procedures for clinical procedures, data collection, monitoring, and evaluation of research outcomes
- Maintained regulatory affairs documents
- Oversight of data management
- Completion of data analysis for presentations and manuscripts
- Manuscript authorship

Study Coordinator/Epidemiologist – 1990-1994**Massachusetts Department of Public Health Biologics Laboratories, Boston, MA**

- Monitored the conduct of research projects including Phase I/II clinical trials H. influenzae b conjugate vaccine and acellular pertussis vaccine
- Initiated active laboratory reporting and completed surveillance studies of *B. pertussis*, *H. influenzae b*, *N. meningitis* and *S. pneumoniae*
- Worked with investigators on development of research protocols
- Developed study documents and data collection instruments
- Trained field staff
- Oversight of data management
- Completion of data analysis for presentations and manuscripts
- Manuscript authorship

Intern/Data Analyst – 1987-1989**Massachusetts Department of Public Health, Cancer Registry – Division of Health Statistics, Boston, MA**

- Analysis of cancer clusters
- Conducted a case-control study of Bladder Cancer in Western MA (Master's Thesis)

Investigator Level Grants

2008-2011	NIH NIH/R03 AI076839-01A1–Loughlin (PI) Investigation of Pertussis Specific Memory B Cells–Role: Principal Investigator
2003-2008	CDC/U66/CCU123397-01–Loughlin (PI) Active Surveillance for Vaccine Preventable Disease as a Foundation for Evaluating the Effectiveness and Impact of an Adolescent/Adult Pertussis Immunization Program–Role: Principal Investigator
2003-2012	CDC/AHIP/200-2002-00732–Marchant (PI) Boston Center–Clinical Immunization Safety Assessment (CISA) Network–Role: Investigator
2005-2007	CDC/NVPO–Loughlin (PI) A Case-Control Study to Identify Risk Factors for Pertussis in Adolescents and Adults–Role: Principal Investigator
2000-2002	Open Society Institute # 20002363–Strathdee (PI) <i>Improving Medical Care Access for HIV, Hepatitis B, Hepatitis C and Syphilis among Drug Users Receiving Methadone Maintenance in Baltimore</i> –Role: Co-Principal Investigator (ACCESS II)
1999-2003	CDC/U64/ CCU317654-01 Strathdee (PI) <i>Antiretroviral Treatment Access Studies (ARTAS)</i> - Role: Co-Principal Investigator (Project ACCESS)

Professional Activities

- Reviewer: •Vaccine •Pediatric Infectious Disease Journal •Clinical Infectious Diseases •AIDS Care Journal
•Biomedical Central •JAIDS •Journal of General Internal Medicine •Medical Care
- Member, International Society of Pharmacoepidemiology (2013-2017)
- Board of Directors, Sibusiso, Inc. is a 501 (c)(3) non-profit organization dedicated to improve the quality of life for people infected and affected by HIV/AIDS in resource poor settings, including both Subsaharan African communities in Boston and communities in the KwaZulu-Natal and mBizana regions of South Africa (2004-2006)
- Member, Society of Clinical Trials (since 2001)
- Member, American Public Health Association (since 1982)
- Member, Graduate Student Organization – University of Massachusetts (1987-1988)

Honors and Awards

- Wakefield High School Alumni Hall of Fame Inductee (Science and Medicine) – 2010
- NIH Pediatric Research Loan Repayment Program Recipient – 2004-2006
- Charlotte Silverman Fund Award Recipient - In recognition of their outstanding commitment to public health, policy and community outreach. Johns Hopkins Bloomberg School of Public Health– 2002
- NEI Training Grant Recipient - Center for Clinical Trials Johns Hopkins Bloomberg School of Public Health – 1999-2002
- Presidential Scholar – Merrimack College – 1985

Teaching Experience

- Designing Clinical Research (HS3400A) Merrimack College (Instructor, 2011)
- Epidemiological Methods (EP712B) Boston University School of Public Health (Instructor Summer 2005,2006)
- Analytic Methods (PH855) Boston University School of Public Health (Instructor 2005)

Johns Hopkins Bloomberg School of Public Health

- Vaccines & Vaccine Research for the Infectious Disease Epidemiologist (Lectures 2000, 2001,2002, 2003)
- Conduct of Vaccine Clinical Trials for the Design and Conduct of Clinical Trials Course (Lectures 2002, 2003)
- Design and Conduct of Clinical Trials (Teaching Assistant 2001)
- Infectious Disease Epidemiology (Teaching Assistant 2000)
- Grant Writing Course (Teaching Assistant 1999)

University of Massachusetts School of Public Health

- Introduction to Epidemiology (Teaching Assistant 1988)
- Micro Computer Literacy (Teaching Assistant 1986 and 1987)

Book Chapters Authored

Loughlin AM and Strathdee SA Vaccines - Past, Present and Future; in Nelson KE et al., *Infectious Disease Epidemiology: Theory and Practice*. 3RD edition, John&Bartlett Learning, Burlington, MA. 2014

Loughlin AM and Strathdee SA Vaccines - Past, Present and Future; in Nelson KE et al., *Infectious Disease Epidemiology: Theory and Practice*. 2nd edition, Aspen Publishers, Inc. Gaithersburg, MD. 2007 (new edition to be printed in 2013)

Strathdee SA and **Loughlin AM**. Vaccines - Past, Present and Future, in Nelson KE et al., *Infectious Disease Epidemiology: Theory and Practice*. Aspen Publishers, Inc. Gaithersburg, MD. 2001

Publications

Loughlin AM, Qiao Q, Nunes AP, Ezzy S, Yochum L, Clifford CR, Gately R, Dore DD, Seeger JD. Effectiveness and tolerability of therapy with once-weekly exenatide once versus basal insulin among injectable-drug-naïve patients in a real-world setting in the United States. *Diabetes Spectr* 2018 May;31(2):129-137.

Loughlin AM, Qiao Q, Nunes AP, Öhman P, Ezzy S, Yochum L, Clifford CR, Gately R, Dore DD, Seeger JD. Effectiveness and tolerability of therapy with exenatide once weekly vs basal insulin among injectable-drug-naïve elderly or renal impaired patients with type 2 diabetes in the United States. *Diabetes Obes Metab* 2018 Apr;20(4):898-909.

Nunes AP, **Loughlin AM**, Qiao Q, Ezzy SM, Yochum L, Clifford CR, Gately RV, Dore DD, Seeger JD. Tolerability and Effectiveness of Exenatide Once Weekly Relative to Basal Insulin Among Type 2 Diabetes Patients of Different Races in Routine Care. *Diabetes Ther*. 2017 Dec;8(6):1349-1364.

Gardner LI, Marks G, Strathdee SA, **Loughlin AM**, Del Rio C, Kerndt P, Mahoney P, Pitasi MA, Metsch LR. Faster entry into HIV care among HIV-infected drug users who had been in drug-use treatment programs. *Drug Alcohol Depend*. 2016 Aug;165:15-21.

Loughlin AM, Qiao Q, Grandy S, Yochum LA, Clifford CR, Dore DD. Pharmacy Cost Differences Associated with the Initiation of Exenatide Once-Weekly Compared to Liraglutide Once-Daily. *Value Health*. 2015 Nov;18(7):

Loughlin AM, Hsu K, Silverio AL, Marchant CD, Pelton SI. Direct and Indirect Effects of PCV13 on Nasopharyngeal Carriage of PCV13 Unique Pneumococcal Serotypes in Massachusetts' Children. *Pediatr Infect Dis J*. 2014 May;33(5):504-10.

Loughlin AM, Marchant CD, Adams W, Barnett E, Baxter R, Black S, Casey C, Dekker C, Edwards KM, Klein J, Klein NP, Larussa P, Sparks R, Jakob K. Causality assessment of adverse events reported to the Vaccine Adverse Event Reporting System (VAERS). *Vaccine*. 2012 Nov 26;30(50):7253-9.

Schumacher SK, Marchant CD, **Loughlin AM**, Bouchet V, Stevenson A, Pelton SI. Prevalence and genetic diversity of nontypeable *haemophilus influenzae* in the respiratory tract of infants and primary caregivers. *Pediatr Infect Dis J*. 2012 Feb; 31(2):145-149.

Tinley KE, **Loughlin AM**, Jepson A, Barnett ED. *Evaluation of a rapid qualitative enzyme chromatographic test for glucose-6-phosphate dehydrogenase deficiency*. *Am J Trop Med Hyg*. 2010 Feb;82(2):210-4.

Mahon BE, Shea K, Dougherty NN, **Loughlin AM**. *Implications for Registry-Based Vaccine Effectiveness Studies from an Evaluation of an Immunization Registry: A Cross-sectional Study*, *BMC Public Health* 2008, **8**:160

Gardner LI, Marks G, Metsch LR, **Loughlin AM**, O'Daniels C, del Rio C, Anderson-Mahoney P, Wilkinson JD; ARTAS Study Group. Psychological and behavioral correlates of entering care for HIV infection: the Antiretroviral Treatment Access Study (ARTAS). *AIDS Patient Care STDS*. 2007 Jun;21(6):418-25.

Anthony MN, Gardner L, Marks G, Anderson-Mahoney P, Metsch LR, Valverde EE, Del Rio C, **Loughlin AM**; Antiretroviral Treatment and Access Study (ARTAS) Study Group. Factors associated with use of HIV primary care among persons recently diagnosed with HIV: examination of variables from the behavioral model of health-care utilization. *AIDS Care*. 2007 Feb;19(2):195-202.

Brewer TH, Zhao W, Pereyra M, Del Rio C, **Loughlin A**, Anderson-Mahoney P, Gardner L, Metsch LR; for the ARTAS Study Group. *Initiating HIV Care: Attitudes and Perceptions of HIV Positive Crack Cocaine Users*. *AIDS Behav*. 2007 Feb 13;

Valverde EE, Waldrop-Valverde D, Anderson-Mahoney P, **Loughlin AM**, Del Rio C, Metsch L, Gardner LI. *System and patient barriers to appropriate HIV care for disadvantaged populations: the HIV medical care provider perspective*. *J Assoc Nurses AIDS Care*. 2006 May-Jun;17(3):18-28.

Rudy ET, Mahoney-Anderson PJ, **Loughlin AM**, Metsch LR, Kerndt PR, Gaul Z, Del Rio C; ARTAS Group. *Perceptions of human immunodeficiency virus (HIV) testing services among HIV-positive persons not in medical care*. *Sex Transm Dis*. 2005 Apr;32(4):207-13.

Gardner LI, Metsch LR, Anderson-Mahoney P, **Loughlin AM**, del Rio C, Strathdee S, Sansom SL, Siegal HA, Greenberg AE, Holmberg SD; Antiretroviral Treatment and Access Study Study Group. *Efficacy of a brief case management intervention to link recently diagnosed HIV-infected persons to care*. AIDS. 2005 Mar 4;19(4):423-31.

Pelton SI, **Loughlin AM**, Marchant CD. *Seven valent pneumococcal conjugate vaccine immunization in two Boston communities: changes in serotypes and antimicrobial susceptibility among Streptococcus pneumoniae isolates*. Pediatr Infect Dis J. 2004 Nov;23(11):1015-22.

Loughlin A, Metsch L, Gardner L, Anderson-Mahoney P, Barrigan M, Strathdee S. *Provider barriers to prescribing HAART to medically-eligible HIV-infected drug users*. AIDS Care. 2004 May;16(4):485-500.

Loughlin AM, Schwartz R, and Strathdee SA, Prevalence and correlates of HCV infection among Methadone Maintenance Attendees: Implications for HCV treatment, International Journal for Drug Policy, 2004; 15(2);81-163

Krawczyk CS, Gardner LI, Wang J, Sadek R, **Loughlin AM**, Anderson-Mahoney P, Metsch L, Green S; Antiretroviral Treatment and Access Study Group. *Test-retest reliability of a complex human immunodeficiency virus research questionnaire administered by an Audio Computer-assisted Self-interviewing system*. Med Care. 2003 Jul;41(7):853-8.

Duffus WA, Barragan M, Metsch L, Krawczyk CS, **Loughlin AM**, Gardner LI, Anderson-Mahoney P, Dickinson G, del Rio C; Antiretroviral Treatment and Access Studies Study Group. *Effect of physician specialty on counseling practices and medical referral patterns among physicians caring for disadvantaged human immunodeficiency virus-infected populations*. Clin Infect Dis. 2003 Jun 15;36(12):1577-84. Epub 2003 Jun 5.

Johnson JL, Okwera A, Horn DL, Mayanja H, Mutuluza Kityo C, Nsubuga P, Nakibali JG, **Loughlin AM**, Yun H, Mugenyi PN, Vemon A, Mugerwa RD, Ellner JJ and Whalen CC. *Duration of efficacy of treatment of latent tuberculosis infection in HIV-infected adults*. AIDS. 2001 Nov 9; 15(16):2137-47.

Johnson JL, Kanya RM, Okwera A, **Loughlin AM**, Nyole S, Horn DL, Wallis RS, Hirsch CS, Wolski JK, Foulds J, Mugerwa RD and Ellner JJ. Randomized controlled trial of Mycobacterium vaccae immunotherapy in non-human immunodeficiency virus-infected Ugandan adults with newly diagnosed pulmonary tuberculosis. The Uganda-Case Western Reserve University Research Collaboration. Infect Dis. 2000 Apr; 181(4):1304-12.

Whalen CC, Johnson JL, Okwera A, Horn DL, Huebner R, Mugenyi P, Mugerwa RD, Ellner JJ, Nsubuga P, Vjecha M, Myanja H, Kityo C, **Loughlin A**, Milberg J and Pekovic V. *A trial of three regimens to prevent tuberculosis in Ugandan adults infected with the human immunodeficiency virus*. New Eng J Med. 1997 Sep; 337:801-808.

Hom DL, Johnson JL, Mugenyi P, Byaruhanga R, Kityo C, **Loughlin A**, Svalir GM, Vjecha M, Mugerwa RD and Ellner JJ. *HIV-1 risk and vaccine acceptability in the Ugandan military*. J Acquir Immune Defic Syndr Hum Retrovirol. 1997 Aug 15; 15(5):375-80.

Loughlin AM, Marchant CD and Lett SM. The changing epidemiology of invasive bacterial infections in Massachusetts children, 1984 through 1991. Am J Public Health. 1995 Mar; 85(3):392-4.

Marchant CD, **Loughlin AM**, Lett SM, Todd CW, Wetterlow LH, Bicchiari R, Higham S, Etkind P, Silva E and Siber GR. Pertussis in Massachusetts, 1981-1991: incidence, serologic diagnosis and vaccine effectiveness. J Infect Dis. 1994; 169(6):1297-305.

Loughlin AM, Marchant CD, Lett S and Shapiro ED. Efficacy of Haemophilus influenzae type b vaccines in Massachusetts children 18 to 59 months of age. Pediatr Infect Dis J. 1992 May; 11(5):374-9.

Abstracts and Presentations

Loughlin AM, Lin N, Abler V, Carroll B; Tardive Dyskinesia Among Patients Using Antipsychotic Medications in Customary Clinical Care in the United States; Psych Congress New Orleans, Louisiana, USA September 16–19, 2017, Abstract 252

Loughlin AM, Lin N, Abler V, Carroll B; Tardive Dyskinesia Among Patients Using Antipsychotic Medications in Customary Clinical Care in the United States; American Academy of Neurology 2018 Annual Meeting, Los Angeles, CA, USA April 21-27, 2018 Abstract P081

Seeger JD, **Loughlin AM**, Qiao Q, Nunes AP, Ezzy S, Yochum L, Clifford CR, Gately R, Ohman P, Dore DD; Real World Tolerability and Effectiveness of Exenatide Once-Weekly Compared to Basal Insulin Among Elderly Patients with Type 2 Diabetes; ISPOR 19th Annual European Congress, 29 October-2 November 2016, Vienna, Austria, Abstract 69968

Seeger JD, Nunes AP, **Loughlin AM**, Qiao Q, Ezzy S, Yochum L, Clifford CR, Gately R, Ohman P, Dore DD; Assessment of Race Specific Tolerability and Effectiveness of Exenatide Once-Weekly or Basal Insulin among Patients with Type 2 Diabetes in a Real World Setting in the USA; ISPOR 19th Annual European Congress, 29 October-2 November 2016, Vienna, Austria, Abstract 70037

Loughlin AM, Ezzy SM, Nunes AP, Enger CL, Dore DD, PhD, Seeger JD; Pitfalls and Value of Clinical and Laboratory Values in Electronic Health Record Data; 32nd International Conference on Pharmacoepidemiology & Therapeutic Risk Management, August 25-28, 2016, Dublin, Ireland. Abstract 677

Loughlin AM, Qiao Q, Johnsson KM, Grandy S, Ezzy S, Yochum L, Clifford CR, Gately R, Nunes AP, Dore DD, Seeger JD; Real World Use of Exenatide Once-Weekly Compared to Basal Insulin among Type 2 Diabetic Patients with Renal Impairment; American Diabetes Association 76th Scientific Sessions, New Orleans LA, June 10 – 14, 2016, Abstract 1053-P

Loughlin AM, Qiao Q, Johnsson KM, Grandy S, Ezzy S, Yochum L, Clifford CR, Gately R, Nunes AP, Dore DD, Seeger JD; Real World Clinical Outcomes Among Exenatide Once-Weekly Initiators Compared to Matched Initiators of Basal Insulin; American Diabetes Association 76th Scientific Sessions, New Orleans LA, June 10 – 14, 2016, Abstract 1056-P

Loughlin AM, Qiao Q, Grandy S, Yochum LA, Clifford CR, Dore DD; Pharmacy Cost Differences Associated with the Initiation of Exenatide Once-Weekly Compared to Liraglutide Once-Daily; ISPOR 18th European Congress, Milan, Italy, 7-11 November 2015, Abstract # PDB28

Pelton SI, **Loughlin AM**, Marchant CD, Hsu KK, Silverio AL, Indirect Effects of PCV13 on Nasopharyngeal Colonization with Vaccine-type *Streptococcus pneumoniae* Achieved with 65% to 75% Vaccine Uptake. Infectious Disease Society of America, San Francisco, CA October 2012

Loughlin AM, Hsu K, Silverio AL, Marchant CD, Pelton SI. Impact of PCV13 Vaccine on Pneumococcal Carriage in Massachusetts Children, 8th International Symposium on Pneumococci and Pneumococcal Diseases, Iquacu Falls, Brazil March 2012.

Loughlin AM, Ostrovsky AO, Marchant CD, Pelton SI, Manasan R, Gaskins J, Black MA, *B. Pertussis* Transmission in Household and Duration of Protection of DTaP Immunizations, Twelfth Annual Conference on Vaccine Research, Baltimore, April 2009

Loughlin AM, Marchant CD, Adams W, Barnett E, Baxter R, Black S, Casey C, Dekker C, Edwards KM, Klein J, Klein NP, LaRussa P, Jakob K, Sparks R, A Panel Assessment of Causality Among Passively Reported Vaccine Adverse Events Twelfth Annual Conference on Vaccine Research, Baltimore, April 2009

Loughlin AM, and Marchant CD and the VAERS Case Review Team. *Appreciating the Limitations of VAERS: Assessment of Causality*. CISA Meeting, Atlanta GA, March 2008

Loughlin AM, Dougherty NN, Marchant CM, Pelton SI, Lett S, Friedman D, Han L, Nuorti P and the Massachusetts Active Pertussis Surveillance Team. *Active Pertussis Surveillance in the Tdap era*, Presented at the 8th International Symposium: Saga of the Genus *Bordetella* 1906-2006, Institut Pasteur, 7-10 Nov. 2006.

Loughlin A, Calderon P, Strathdee SA, Gardner L, Metsch L, Mahoney P, del Rio C, the ARTAS project team, *A Longitudinal Analysis of the Role of Drug Treatment as a Faciliator of Entry into HIV Medical Care*. 2005 National HIV Prevention Conference June 12-15, 2005 Atlanta, GA.

Loughlin AM and Strathdee SA. Accessibility of HCV care for infected drug users: Methadone maintenance treatment programs a potential HCV treatment venue, Abstract #46575. American Public Health Association Conference, November 2002.

Loughlin AM, Barrigan M, Gardner L, Anderson-Mahoney P, Metsch L and Strathdee SA. Barriers to Providers' prescribing HAART to medically eligible HIV+ drug users. 13th International Conference on the Reduction of Drug Related Harm, March 2002.

Duffus W, Barragan M, del Rio C, Krawczyk CS, Gardner LI, Anderson-Mahoney P, **Loughlin AM**, Dickinson G and Metsch L. Differences in the Clinical Practices of Physicians Who Are and Are Not Infectious Disease Board Eligible/Board Certified (BE/BC). 9th Conference on Retroviruses and Opportunistic Infections, Feb 2002.

Metsch L, Duffus W, Gardner LI, **Loughlin AM** and Anderson-Mahoney P. Delivery of HIV Transmission and Substance Abuse Counseling by HIV Medical Care Providers: Preliminary Results from a Multi- Site Provider Survey. 2001 National HIV Prevention Conference, August 2001.

Anderson-Mahoney P, Krawczyk CS, Green SB, **Loughlin AM** and Metsch L. Assessment Interventions to Improve Access and Use of HIV Care in Newly Diagnosed HIV-Infected Persons: Antiretroviral Treatment and Access Studies (ARTAS). 2001 National HIV Prevention Conference, August 2001.

Krawczyk CS, Del Rio C, Gardner LI, **Loughlin AM**, Anderson-Mahoney P and Metsch L. Antiretroviral Treatment Access Studies, 2000. Community Planning Leadership Summit, March 2001.

McGrath JW, Senvenwo R, Kabugo M, Namande-Kyambadde J, Mafigiri D, Chard S, **Loughlin A**, Mugenyi P, Svilar G and George K. Willingness to participate in AIDS vaccine trials among Ugandan military men. The Conference on AIDS Vaccine Development, 1996.

Mugenyi PN, Mugerwa RD, **Loughlin A**, Johnson JL, George K, Svilar G, Horn DL and Ellner J. HIV-1 seroprevalence and sero incidence in 3 Ugandan military cohorts over time. The Conference on AIDS Vaccine Development, 1996.

Mugenyi PN, Horn DL, **Loughlin A**, Johnson JL, McGrath JW, George K, Svilar G, Mugerwa RD and Ellner J. HIV-1 seroprevalence, seroincidence and risk behavior the Ugandan military. The IXth International Conference on AIDS, 1996.

Kityo C, Opit C, **Loughlin A**, George K, Businge J, Oluput G, Okiror J, Mugenyi P, Whalen C, Mugerwa RD and Ellner J. Prognostic factors for delay type hypersensitivity anergy in HIV-1 persons. IXth International Conference on AIDS, 1996.

McGrath JW, Chard S, Mafigiri D, Kabugo M, Senvenwo R, Namande-Kyambadde J, Mugenyi P, **Loughlin A**, George K, Johnson JL and Svilar G. Local perception of cure or prevention: implications for clinical trial design. The 3rd Conference on Retroviruses & Opportunistic Infection, 1996.

Okwera A, Vjecha M, Johnson JL, Whalen C, Nsubuga P, **Loughlin A**, Mugerwa RD and Ellner J. Preventive therapy for tuberculosis in HIV-infected Ugandans. The IXth International Conference on AIDS, 1996.

Okwera A, **Loughlin A**, Johnson JL, Whalen C, Mugerwa RD and Ellner J. Peripheral neuropathy in HIV-1 infected Ugandans in a placebo-controlled randomized MTB preventive therapy trial. The 3rd Conference on Retroviruses & Opportunistic Infection, 1996.

Nsubuga P, Vjecha M, Whalen C, Okwera A, Johnson JL, **Loughlin A**, Mugerwa R and Ellner J. Preventive therapy for Tuberculosis in HIV infected Ugandans. The IXth International Conference on AIDS and STDs in Africa, 1995.

Hom D, Mugerwa R, Johnson JL, Mugenyi P, **Loughlin A**, Kityo C and Ellner J. HIV-1 seroincidence in a Ugandan military cohort. The IXth International Conference on AIDS and STDs in Africa, 1995.

Mugenyi PN, Mugerwa R, **Loughlin A**, Johnson JL, Horn D, Bymhanga R, Katongola-Mbidde E and Ellner J. W.H.O. seroincidence study in preparation for HIV-1 vaccine trials in Uganda. The IXth International Conference on AIDS and STDs in Africa, Kampala Uganda, 1995.

Pekovic V, Vjecha M, Nakayiwa S, **Loughlin A**, Nsubuga P, Whalen C, Okwera A, Johnson JL, Mugerwa R and Ellner J. Adherence with preventive therapy for tuberculosis in HIV infected Ugandans. The IXth International Conference on AIDS and STDs in Africa, 1995.

Tumwesigye NM, Johnson JL, **Loughlin A**, Horn D, Mugerwa R and Ellner J. Comparison of demographic and health status between HIV-1 infected Ugandan with and without active pulmonary tuberculosis. The IXth International Conference on AIDS and STDs in Africa, 1995.

Johnson JL, Mugerwa R, **Loughlin A**, Mugenyi P, Svilar G, Kityo C, Horn D and Ellner J. HIV-1 vaccine acceptability issues in the Ugandan military. The IXth International Conference on AIDS and STDs in Africa, 1995.

Chard S, Kabugo M, Mafigiri D, Namande-Kyambadde JB, Senevwo R, **Loughlin A**, Mugenyi P and McGrath JW. Preparation of AIDS vaccine trials in the Ugandan military. The IXth International Conference on AIDS and STDs in Africa, 1995.

Kityo C, Opit C, Mugenyi PN, Mugerwa RD, **Loughlin A**, Whalen C and Ellner J. Estimating CD4 count from Haematological indices in HIV infected Ugandan adults. The IXth International Conference on AIDS and STDs in Africa, 1995.

Loughlin AM and Morris M. A case-control study of bladder cancer in three Massachusetts towns. American Public Health Association Conference, 1992.

Loughlin AM and Declercq E. The timing of cesarean births. American Public Health Association Conference, 1992.



TOWN OF WAKEFIELD

TOWN ADMINISTRATOR'S OFFICE

Application for Appointment / Re-Appointment to Town Board, Committee, or Commission

Please submit this application with a current resume to Sherri Dalton at sdalton@wakefield.ma.us.

Name: Mary L. Lareau Email: mlgrif74@aol.com

Address: 27 Vale Rd. Wakefield MA 01880

Daytime phone: 978-457-4984 Evening phone: 978-457-4984

How long have you lived in Wakefield: 16 years Current occupation: Registered Nurse

Board or commission in which you are interested: Board of Health

Please state why you are interested in serving on this board or commission:

Working as a health care professional in this area for almost 25 years has given me a unique perspective regarding local health issues. I would like to use my knowledge and experience to benefit our community.

In addition to the experience listed in your attached resume, what specific skills or expertise do you believe you can bring to this board or commission?

Are you currently serving on any other Town boards? ☐ Yes ☒ No

If yes, please specify: _____

Signature M Lareau MSN-RN, CEN Date 11/9/19



Mary Louise Lareau MSN,RN, CEN
27 Vale Rd.
Wakefield, MA 01880
Home:(781)621-8346
Cell:(978)457-4984
Work:(781)979-3033

Licensure

Registered Nurse, Massachusetts
License #RN260781

Initial Issue May, 2004 Valid through October, 2020

Employment Experience

01/05/2006-Present Staff Nurse/ Administrative Nursing Supervisor, Hallmark Health Melrose and Medford Campuses. Trained and worked in Emergency Departments, Intensive Care Units, Mother/Baby, Medical and Telemetry Units as well as as a night shift Supervisor overseeing all medical units on both campuses. On medical floors was responsible for providing direct nursing care, coordinating patients overall care And transitions to other units. Implementing critical and forward thinking skills Within the scope of my practice. Maintaining standards established by the American Association of Critical Care Nurses, the Board of Emergency Nursing and the American Nursing Association. As nursing supervisor was responsible for managing appropriate staffing for all units, assisting with transfers between units and possibly other facilities and providing educational support appropriate resources as needed for nursing staff. Was also responsible for ensuring appropriate standards of conduct were upheld and performing corrective action as deemed necessary. Additional tasks include charge nurse role and precepting nurses new to their role on the unit. Was responsible for establishing aseptic intravenous access. Additional training in behavioral health (inpatient and unstable) and rapid response team leader.

06/03/2004-12/24/2005

Staff Nurse , ICU, Medical and Psychiatric Units, Kindred Healthcare, Beverly, MA. Hired as a new graduate, attended a medical and intensive care orientation and worked full time as a night nurse on rotating units. Was responsible for the safe care of all patients, carrying out appropriate medical orders. In the ICU was responsible for patients on ventilators, complex cardiovascular medication infusions, maintenance of central lines and various other life sustaining lines/ tubes and overall patient safety and infection control.

Civilian Education

12/21/2014

Masters of Science in Nursing Education, Chamberlain College, Downers Grove, IL.

06/03/2011 Bachelors of Science in Nursing, University of Massachusetts, Boston Ma
(Summa Cum Laude)
05/27/2004 Associates Degree in Nursing Science, Danvers, MA

Board Certifications and Special Skills

Board Certified Emergency Nurse (exp. 5/20/2021)
Advanced Cardiac Life Support (exp. 04/12/2020)
Pediatric Advanced Life Support (exp. 09/21)
Basic Life Support Instructor (exp. 06/20/20)
Nonviolent Crisis Intervention (exp. 10/11/18)

07/12/2006 Perivascular Access Certification
11/18/2010 FEMA (Incident Command System IS-00100.HCb)
03/25/2012 National Institute of Health, Institutional Review Board Certified
04/26/2014 Office Of Chief Medical Examiner, Victim Identification Program/Fatality
Family Assistance Program

Professional Organization Membership

05/05/2009 Emergency Nursing Association

Additional Certifications

Athletics and Fitness Association of America Primary Group Exercise Instructor (exp. 08/07/2020)
Zumba Fitness ® Instructor-certified in Gold ® , Toning ®., Aqua ®, , Basic ®, Strong ®
United States Water Fitness Association; Master Water Fitness Instructor (exp 10/15/22)
Certified Barre Basics (™) 03/28/15
National Council for Certified Personal Trainers (05/29/2013)



TOWN OF WAKEFIELD

TOWN ADMINISTRATOR'S OFFICE

Application for Appointment / Re-Appointment to Town Board, Committee, or Commission

Please submit this application with a current resume to Sherri Dalton at sdalton@wakefield.ma.us.

Name: _____ Email: _____

Address: _____

Daytime phone: _____ Evening phone: _____

How long have you lived in Wakefield: _____ Current occupation: _____

Board or commission in which you are interested: _____

Please state why you are interested in serving on this board or commission:

In addition to the experience listed in your attached resume, what specific skills or expertise do you believe you can bring to this board or commission?

Are you currently serving on any other Town boards? Yes No

If yes, please specify: _____

Signature

Date



RESUME

KATHERINE P. MESSENGER

40 Church Street
Wakefield, MA 01880
mobile phone: (617) 549-4974
Email: kmessenger47@gmail.com

EDUCATION:

B.A., Smith College, Northampton, MA
Major: Economics

M.C.P. (Master in City Planning), Massachusetts
Institute of Technology, Cambridge, MA
Area of Concentration: Health Policy and Planning

PROFESSIONAL EXPERIENCE:

September, 2018 - present	Bureau of Family Health and Nutrition, Massachusetts Department of Public Health Episodic fiscal and budget assistance (as retiree)
August, 1979 - August, 2018	Bureau of Family Health and Nutrition, Massachusetts Department of Public Health
May, 2018 - August, 2018	Budget and Fiscal Grants Manager
January, 2016 - April, 2018	Acting Administration and Finance Director
July, 1991 - December, 2015	Senior Budget Planner
June, 1989 - June, 1991	Senior Policy Analyst Policy Office
January, 1987 - June, 1989	Acting Director Maternal and Child Health Services
January, 1983 - January, 1987	Unit Director Preschool and School Health Services Acting Unit Director Perinatal Services (1 year)
August, 1979 - December, 1982	Unit Director Services for School-age Children
September, 1975 - July, 1979	Lecturer in Child Health Harvard School of Public Health

May, 1976 - February, 1980	Assistant Project Director Community Child Health Studies Harvard School of Public Health
Sept. 1972 - February, 1976	Staff Associate Carnegie Council on Children New Haven, Connecticut
December, 1971 - August, 1972	Senior Research Assistant Huron Institute, Cambridge, MA
Summer, 1971	Research Assistant Regenstrief Institute and Department of Community Health Sciences, Indiana University Medical Center Indianapolis, Indiana

OTHER PROFESSIONAL ACTIVITIES:

1985 - 1989	Co-Principal Investigator Maternal and Child Health Improvement Project Grant MCJ-253726, Family Day Care Health Improvement.
June, 1980 - January, 1994	Department of Public Health Representative on Central Interdepartmental Team (Office for Children)
Spring, 1977	Seminar co-leader, Harvard Graduate School of Education "Child Health, the Schools and the Community".
1971 - 1972	Teaching Fellow, Massachusetts Institute of Technology, "Health Planning and the Family".
November, 1977 - August, 1979	Member, Board of Directors Massachusetts Committee on Children and Youth, Boston, MA

PUBLICATIONS:

White, S.H., Day, M.D., Freeman, P.K., Hartman, S.A., and Messenger, K.P.,
Federal Programs for Disadvantaged Children: Review and
Recommendations, 3 vols., DHEW Publ. No. (OS) 74-100. The Huron
Institute, 1974.

Messenger, Katherine P. "Child Health Care Policy Issues" in Ross
Laboratories/Ambulatory Pediatrics Association. Child Advocacy in

Pediatrics Practice. Ross Round Table on Critical Approaches to Common Pediatric Problems. Columbus, Ohio: Ross Laboratories, 1978.

Messenger, K.P., Nader, P.R., et al. "School Health vs. Health in the Schools: Integrating medical and educational models." Chapter 3 in: Nader, P.R. Options for School Health: Meeting Community Needs. Germantown, M.D.:Aspen Systems Corp., 1978.

Messenger, K.P., "Medicine: A Promise in search of a national commitment." In: Gliedman, J. and Roth, W. The Unexpected Minority: Handicapped Children in America. A report for the Carnegie Council on Children. New York: Harcourt Brace Jovanovich, 1980.

Weitzman, M., Moomaw, M.S., & Messenger, K.P., An after-hours pediatric walk-in clinic for an entire urban community: Utilization and effectiveness of follow-up care. Pediatrics 65:964-970 (1980).

Messenger, K.P., et al. The Mott Children's Health Center: An indepth study. Harvard University: The Community Child Health Studies, 1981.

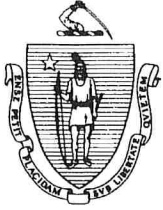
Guyer, B., Schor, L., Messenger, K.P., Prenney, B., and Evans, F. Needs Assessment Under the Maternal and Child Health Block Grant: Massachusetts. American Journal of Public Health 74:1014-1019 (1984).

Kendrick, A.S., Messenger, K.P., and Guyer, B., The Massachusetts Preschool Health Program: An initiative in collaboration. In: Kansas Department of Health and Environment. Health of Children in Day Care: Public Health Profiles. December, 1986.

Gallagher, S.S., Messenger, K.P., and Guyer, B. State and Local Responses to Children. Injuries: The Massachusetts Statewide Childhood Injury Prevention Program. Journal of Social Issues 43:149-162 (1987).

Kendrick, A.S., Messenger, K.P., Sr. Editors. Health in Day Care: A Manual for Day Care Providers in Massachusetts. Commonwealth of Massachusetts: Department of Public Health, 1988.

Kendrick, A.S., Kaufmann, R., and Messenger, K.P. Healthy Young Children: A Manual for Early Childhood Programs. Washington, D.C.: National Association for the Education of Young Children, 1988. [National version of Massachusetts Manual.]



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

AMENDMENT-Change of Manager

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)

03982-RS-1310

ENTITY/ LICENSEE NAME CMRG, LLC d/b/a/ Tonno Wakefield

ADDRESS 175 North Ave

CITY/TOWN Wakefield

STATE Ma

ZIP CODE 01880

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 type="checkbox"/> Transfer of License | <input 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 checked="" 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="checkbox"/> Change of DBA |

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

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



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

AMENDMENT-Change of Manager

☒ **Change of License Manager**

1. BUSINESS ENTITY INFORMATION

Entity Name	Municipality	ABCC License Number
CMRG, LLC d/b/a/ Tonno Wakefield	wakefield	03982-RS-1310

2. APPLICATION CONTACT

The application contact is the person who should be contacted with any questions regarding this application.

Name	Title	Email	Phone
David Petrilli	MANAGER LLC	David@Prezza.com	617-548-1288

3A. MANAGER INFORMATION

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

Proposed Manager Name	Neal A. Maver	Date of Birth	9/23/83	SSN	XXXXXX
Residential Address	54 Rocky Neck Ave Gloucester Ma 01930				
Email	Neal@tonnorestaurant.com	Phone	9784739843		
Please indicate how many hours per week you intend to be on the licensed premises	40	Last-Approved License Manager	Sean Costanzo		

3B. CITIZENSHIP/BACKGROUND INFORMATION

Are you a U.S. Citizen?* ☒ Yes ☐ No *Manager must be 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

3C. EMPLOYMENT INFORMATION

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

Start Date	End Date	Position	Employer	Supervisor Name
2016	present	Manager	Tonno Restaurants	Anthony Caturano
2010	2016	Kitchen Manager	Aquitaine Group	Jeff Gates

3D. 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 11/20/19

APPLICANT'S STATEMENT

I, David Petrilli the: ☐ sole proprietor; ☐ partner; ☐ corporate principal; ☒ LLC/LLP manager
Authorized Signatory


of CMRG, LLC d/b/a Tonn Wakefield
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: 11/20/19

Title:

LLC Manager

CORPORATE VOTE

The Board of Directors or LLC Managers of

CMRG, LLC d/b/a Tonno Wakefield

Entity Name

duly voted to apply to the Licensing Authority of

Wave find

City/Town

Commonwealth of Massachusetts Alcoholic Beverages Control Commission on

11/19/19

Date of Meeting

For the following transactions (Check all that apply):

☒ Change of Manager

☐ Other

"VOTED: To authorize

DAVIDO PETRILLI

Name of Person

to sign the application submitted and to execute on the Entity's behalf, any necessary papers and do all things required to have the application granted."

"VOTED: To appoint

NEAL A. MAVER

Name of Liquor License Manager

as its manager of record, and hereby grant him or her with full authority and control of the premises described in the license and authority and control of the conduct of all business therein as the licensee itself could in any way have and exercise if it were a natural person residing in the Commonwealth of Massachusetts.”

A true copy attest,

Ant Cat

Corporate Officer /LLC Manager Signature

Антону Сторано

(Print Name)

For Corporations ONLY

A true copy attest,

[Handwritten signature]

Corporation Clerk's Signature (MGR)

DAVID PETRILLO

(Print Name)



JEAN M. LORIZIO, ESQ.
CHAIRMAN

Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3
Chelsea, MA 02150

CORI REQUEST FORM

The Alcoholic Beverages Control Commission ("ABCC") has been certified by the Criminal History Systems Board to access conviction and pending Criminal Offender Record Information ("CORI"). 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>	03982-RS-1310	LICENSEE NAME:	CMRG, LLC d/b/a/ Tonno Wakefield	CITY/TOWN:	Wakefield
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APPLICANT INFORMATION

LAST NAME:	Maver	FIRST NAME:	Neal	MIDDLE NAME:	Andrew			
MAIDEN NAME OR ALIAS (IF APPLICABLE):			PLACE OF BIRTH:	Beverly				
DATE OF BIRTH:	XXXX	SSN:	XXXXXX	ID THEFT INDEX PIN (IF APPLICABLE):				
MOTHER'S MAIDEN NAME:	Brinckerhoff	DRIVER'S LICENSE #:	XXX4	STATE LIC. ISSUED:	Massachusetts			
GENDER:	MALE	HEIGHT:	6	1	WEIGHT:	210	EYE COLOR:	blue
CURRENT ADDRESS:	54 Rocky Neck Ave							
CITY/TOWN:	Gloucester	STATE:	Ma	ZIP:	01930			
FORMER ADDRESS:	28 Haskell St							
CITY/TOWN:	gloucester	STATE:	ma	ZIP:	01930			

PRINT AND SIGN

PRINTED NAME:	Neal A. Maver	APPLICANT/EMPLOYEE SIGNATURE:	
---------------	---------------	-------------------------------	--

NOTARY INFORMATION

On this	November 22, 2019	before me, the undersigned notary public, personally appeared	Neal Andrew Maver
(name of document signer), proved to me through satisfactory evidence of identification, which were	Mass. Driver's License		
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



PAUL J. YANAKAKIS
NOTARY PUBLIC
Commonwealth of Massachusetts
My Commission Expires
September 14, 2023

DIVISION USE ONLY

REQUESTED BY:	
SIGNATURE OF CORI-AUTHORIZED EMPLOYEE	

The DCJ Identify Theft Index PIN Number is to be completed by those applicants that have been issued an Identity Theft PIN Number by the DCJ. 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 DCJ via mail or by fax to (617) 660-4614.

Payment Confirmation

YOUR PAYMENT HAS PROCESSED AND THIS IS YOUR RECEIPT

Your account has been billed for the following transaction. You will receive a receipt via email and via text message.



Transaction Processed Successfully.

INVOICE #: 1fc255fb-f6f4-44c7-bb7a-0d77319b2ac8

Description	Applicant, License or Registration Number	Amount
FILING FEES-RETAIL	CMRG LLC d/b/a Tonno Wakefield	\$200.00
		\$200.00

Total Convenience Fee: \$4.70

Date Paid: 11/21/2019 2:09:09 PM EDT

Total Amount Paid: \$204.70

Payment On Behalf Of

License Number or Business Name:
CMRG, LLC d/b/a Tonno Wakefield

Fee Type:
FILING FEES-RETAIL

Billing Information

First Name:
David

Last Name:
Petrilli

Address:
29 David Drive

City:
Saugus

State:
MA

Zip Code:
01906

Email Address:
david@prezza.com



Return to:
Town Administrator's Office
Attn: Sherri Dalton
One Lafayette Street
Wakefield, MA 01880
sdalton@wakefield.ma.us

Town of Wakefield APPLICATION FOR LICENSE

Common Victualler, Entertainment, Automatic Amusement

New License ☐

Renewal ☒

Bamboo House, 21 Broadway

Wakefield, MA 01880

(name and street address of business)

Business & Owner

Bamboo House 21 Broadway

(name and mailing address)

781.224.0098

(phone number)

Chichen0000@yahoo.com

(email address)

License(s) Requested (check each one that applies)	Fee:	Total
Common Victualler <input checked="" type="checkbox"/> Number of Seats _____	\$25.00	\$ <u>25.00</u>
Entertainment <input checked="" type="checkbox"/> Number of Devices <u>3</u> <u>TV's</u> (List Devices for which license is requested)	\$50.00 per device	\$ <u>150.00</u>
Automatic Amusement (Video Machines) <input type="checkbox"/> Number of Devices _____	\$100.00 per device	\$ _____
(List Devices for which license is requested)		Total Due \$ <u>175.00</u>



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

X [Signature]

Signature of Applicant

11-29-19

Date



Return to:
Town Administrator's Office
Attn: Sherri Dalton
One Lafayette Street
Wakefield, MA 01880
sdalton@wakefield.ma.us

Town of Wakefield APPLICATION FOR LICENSE

Common Victualler, Entertainment, Automatic Amusement

New License ☐ Renewal ☒

Bellino's Restaurant, 146 Lowell St, Wakefield, MA 01880
(name and street address of business)

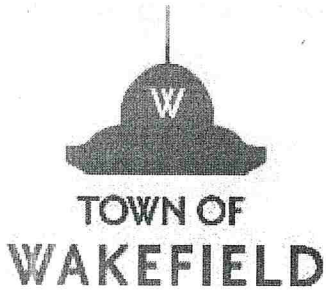
Business & Owner Bellino's Restaurant, 146 Lowell St, Wakefield
(name and mailing address)
781. 246. 7666 Shane_295@msn.com
(phone number) (email address)

License(s) Requested (check each one that applies)		Fee:	Total
Common Victualler	<input checked="" type="checkbox"/> Number of Seats <u>46</u>	\$25.00	\$ <u>25.00</u>
Entertainment	<input checked="" type="checkbox"/> Number of Devices <u>2</u> <u>TV's</u> (List Devices for which license is requested)	\$50.00 per device	\$ <u>100.00</u>
Automatic Amusement (Video Machines)	<input type="checkbox"/> Number of Devices _____ (List Devices for which license is requested)	\$100.00 per device	\$ _____
Total Due			\$ <u>125.00</u>

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

X [Signature]
Signature of Applicant

12-4-19
Date



Return to:
Town Administrator's Office
Attn: Sherri Dalton
One Lafayette Street
Wakefield, MA 01880
sdalton@wakefield.ma.us

Town of Wakefield APPLICATION FOR LICENSE

Common Victualler, Entertainment, Automatic Amusement

New License ☐

Renewal ☒

CHARM THAI BISTRO 412 MAIN ST, Wakefield, MA 01880
(name and street address of business)

Business & Owner THIDAPORN CHARNKASIKUPT 412 MAIN ST, WAKEFIELD, MA
(name and mailing address) 01880

(617) 952 3513
(phone number)

BIGYO BOSTON@GMAIL.COM
(email address)

License(s) Requested (check each one that applies)		Fee:	Total
Common Victualler	<input checked="" type="checkbox"/> Number of Seats <u>10</u>	\$25.00	\$ <u>25</u>
Entertainment	<input type="checkbox"/> Number of Devices _____	\$50.00 per device	\$ _____
(List Devices for which license is requested)			
Automatic Amusement (Video Machines)	<input type="checkbox"/> Number of Devices _____	\$100.00 per device	\$ _____
(List Devices for which license is requested)			
Total Due			\$ <u>25</u>

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

X Jim S.
Signature of Applicant

12/4/19
Date



Town of Wakefield APPLICATION FOR LICENSE

(617) 2309646

RETURN FORM TO:

Town Administrator's Office
Attn: Sherri Dalton
One Lafayette Street
Wakefield, MA 01880
sdalton@wakefield.ma.us

Common Victualler, Entertainment, Automatic Amusement

New License ☐

Renewal ☒

Leaf and Ginger

Wakefield, MA 01880

(name and street address of business)

Business & Owner Khalid Charfi

(name and mailing address)

(617) 2309646

(phone number)

khalidcharfi@gmail.com

(email address)

License(s) Requested (check each one that applies)

Common Victualler



Number of Seats

25

Fee:

\$25.00

Total

\$25.00

Entertainment



Number of Devices

1

\$50.00 per device

\$50.00

TV

(List Devices for which license is requested)

Automatic Amusement
(Video Machines)



Number of Devices

\$100.00 per device

\$_____

(List Devices for which license is requested)

Total Due \$75.00

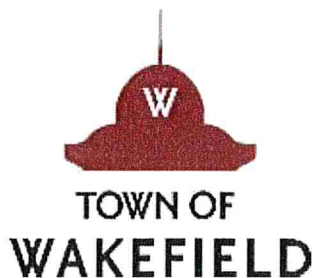
Application is made to the Town of Wakefield Licensing Authority in accordance with their Rules and Regulations made under authority of applicable statutes.

X

Signature of Applicant

Date

11/27/19



Return to:
Town Administrator's Office
Attn: Sherri Dalton
One Lafayette Street
Wakefield, MA 01880
sdalton@wakefield.ma.us

Town of Wakefield APPLICATION FOR LICENSE

Common Victualler, Entertainment, Automatic Amusement

New License ☐

Renewal ☒

Massimo Ristorante 19 Central St Wakefield, MA 01880
(name and street address of business)

Business & Owner

Nancy Turco 20 Friend St Revere MA 02511
(name and mailing address)

617 816 9507 MassimosRistorante@yahoo.com
(phone number) (email address)

License(s) Requested (check each one that applies)		Fee:	Total
Common Victualler	<input checked="" type="checkbox"/> Number of Seats <u>64</u>	\$25.00	\$ <u>25.00</u>
Entertainment	<input checked="" type="checkbox"/> Number of Devices <u>2</u> <u>TVS</u> (List Devices for which license is requested)	\$50.00 per device	\$ <u>100.00</u>
Automatic Amusement (Video Machines)	<input type="checkbox"/> Number of Devices _____ (List Devices for which license is requested)	\$100.00 per device	\$ _____
Total Due			\$ <u>125.00</u>

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

X

Nancy Turco
Signature of Applicant

11/13/19
Date



Town of Wakefield

APPLICATION FOR LICENSE

RETURN FORM TO:

Town Administrator's Office
Attn: Sherri Dalton
One Lafayette Street
Wakefield, MA 01880
sdalton@wakefield.ma.us

Common Victualler, Entertainment, Automatic Amusement

New License ☐

Renewal ☒

Morena's 23A Broadway St. Wakefield, MA 01880
(name and street address of business)

Business & Owner Stefano Barbiero
(name and mailing address)

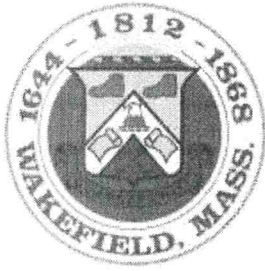
781-246-2919 barbiero1958@aol.com
(phone number) (email address)

License(s) Requested (check each one that applies)	Fee:	Total
Common Victualler <input checked="" type="checkbox"/> Number of Seats <u>34</u>	\$25.00	\$ <u>25.00</u>
Entertainment <input type="checkbox"/> Number of Devices _____	\$50.00 per device	\$ _____
(List Devices for which license is requested)		
Automatic Amusement (Video Machines) <input type="checkbox"/> Number of Devices _____	\$100.00 per device	\$ _____
(List Devices for which license is requested)		
Total Due		\$ <u>25.00</u>

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

X [Signature]
Signature of Applicant

11/27/19
Date



Town of Wakefield APPLICATION FOR LICENSE

RETURN FORM TO:

Town Administrator's Office
Attn: Sherri Dalton
One Lafayette Street
Wakefield, MA 01880
sdalton@wakefield.ma.us

Common Victualler, Entertainment, Automatic Amusement

New License ☐ Renewal ☒

My Brothers Place 356 Main St Wakefield, MA 01880
(name and street address of business)

Business & Owner My Brothers Place, Arman Arman 356 Main St
(name and mailing address)
781 245 9028 LFLKARMAW@YAHOO.COM
(phone number) (email address)

License(s) Requested (check each one that applies)		Fee:	Total
Common Victualler	<input checked="" type="checkbox"/> Number of Seats <u>9</u>	\$25.00	\$ <u>25.00</u>
Entertainment	<input type="checkbox"/> Number of Devices _____ (List Devices for which license is requested)	\$50.00 per device	\$ _____
Automatic Amusement (Video Machines)	<input type="checkbox"/> Number of Devices _____ (List Devices for which license is requested)	\$100.00 per device	\$ _____
		Total Due	\$ <u>25.00</u>

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

X [Signature]
Signature of Applicant

11-29-2019
Date



Return to:
Town Administrator's Office
Attn: Sherri Dalton
One Lafayette Street
Wakefield, MA 01880
sdalton@wakefield.ma.us

Town of Wakefield APPLICATION FOR LICENSE

Common Victualler, Entertainment, Automatic Amusement

New License ☐

Renewal ☒

FENG Asian Cuisine Wakefield, MA 01880
(name and street address of business)

Business & Owner WAN FENG, YZ 17 FOSSEN WAY Andover, MA 01810
(name and mailing address)

646-585-9536 Kevin.sato2@yahoo.com
(phone number) (email address)

License(s) Requested (check each one that applies)		Fee:	Total
Common Victualler	<input checked="" type="checkbox"/> Number of Seats <u>125</u>	\$25.00	\$ <u>25.00</u>
Entertainment	<input checked="" type="checkbox"/> Number of Devices <u>5</u>	\$50.00 per device	\$ <u>250.00</u>
<hr/> (List Devices for which license is requested)			
Automatic Amusement (Video Machines)	<input type="checkbox"/> Number of Devices <u> </u>	\$100.00 per device	\$ <u> </u>
<hr/> (List Devices for which license is requested)			
Total Due			\$ <u>275.00</u>

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

X [Signature]
Signature of Applicant

11-1-19
Date

10/15/2019



Town of Wakefield APPLICATION FOR LICENSE

RETURN FORM TO:

Town Administrator's Office
Attn: Sherri Dalton
One Lafayette Street
Wakefield, MA 01880
sdalton@wakefield.ma.us

Common Victualler, Entertainment, Automatic Amusement

New License ☐ Renewal ☒

PIECE'O PIZZA 340 MAIN STREET Wakefield, MA 01880
(name and street address of business)

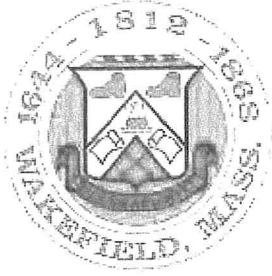
Business & Owner 340 MAIN RESTAURANT GROUP LLC 119 DRUM HILL RD #334 CHELMSFORD
(name and mailing address) MA 01824
JFRATI@CPA.COM
Info@POPWAKEFIELD.COM
(phone number) (email address)

License(s) Requested (check each one that applies)	Fee:	Total
Common Victualler <input checked="" type="checkbox"/> Number of Seats <u>25</u>	\$25.00	\$ <u>25</u>
Entertainment <input checked="" type="checkbox"/> Number of Devices <u>1</u> <u>T.V.</u> (List Devices for which license is requested)	\$50.00 per device	\$ <u>50</u>
Automatic Amusement (Video Machines) <input type="checkbox"/> Number of Devices _____ (List Devices for which license is requested)	\$100.00 per device	\$ _____
Total Due		\$ <u>75</u>

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

[Signature]
Signature of Applicant

11/27/19
Date



Town of Wakefield

APPLICATION FOR LICENSE

RETURN FORM TO:

Town Administrator's Office
Attn: Sherri Dalton
One Lafayette Street
Wakefield, MA 01880
sdalton@wakefield.ma.us

Common Victualler, Entertainment, Automatic Amusement

New License ☐

Renewal ☒

24 Vernon St. - Red Sugar

Wakefield, MA 01880

(name and street address of business)

Business & Owner Suchat Lerdduekamlam 36 Crescent St. Apt 21. Wakefield MA 01880
(name and mailing address)

617-6592534
(phone number)

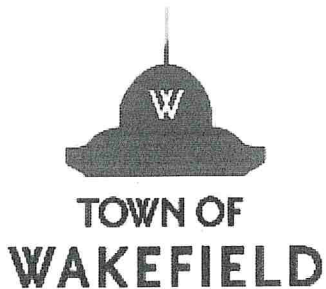
redsugarcake@gmail.com
(email address)

License(s) Requested (check each one that applies)		Fee:	Total
Common Victualler	<input checked="" type="checkbox"/> Number of Seats <u>16</u>	\$25.00	\$ <u>25</u>
Entertainment	<input type="checkbox"/> Number of Devices _____ (List Devices for which license is requested)	\$50.00 per device	\$ _____
Automatic Amusement (Video Machines)	<input type="checkbox"/> Number of Devices _____ (List Devices for which license is requested)	\$100.00 per device	\$ _____
Total Due			\$ <u>25.00</u>

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

X [Signature]
Signature of Applicant

12/2/19
Date



Return to:
Town Administrator's Office
Attn: Sherri Dalton
One Lafayette Street
Wakefield, MA 01880
sdalton@wakefield.ma.us

Town of Wakefield APPLICATION FOR LICENSE

Common Victualler, Entertainment, Automatic Amusement

New License ☐

Renewal ☒

Sonny Noto's 49 WATER ST WAKEFIELD Wakefield, MA 01880
(name and street address of business)

Business & Owner Salvatore Noto 8 Wyman Way LYNNFIELD
(name and mailing address)

781-246-4800
(phone number)

richer116@yahoo.com
(email address)

License(s) Requested (check each one that applies)		Fee:	Total
Common Victualler	<input checked="" type="checkbox"/> Number of Seats <u>40</u>	\$25.00	\$ <u>25</u>
Entertainment	<input checked="" type="checkbox"/> Number of Devices <u>1</u>	\$50.00 per device	\$ <u>50</u>
(List Devices for which license is requested)			
Automatic Amusement (Video Machines)	<input type="checkbox"/> Number of Devices _____	\$100.00 per device	\$ _____
(List Devices for which license is requested)			
Total Due			\$ <u>15.00</u>

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

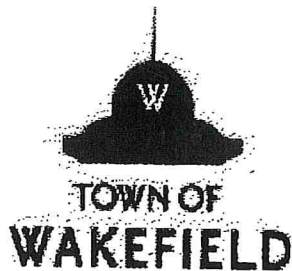
X Salvatore Noto
Signature of Applicant

11-21-19
Date

10/23/2019 08:19

From: 5097778099 Anderson Lampe, PS-Webfax

Page: 1/2



Return to:
 Town Administrator's Office
 Attn: Sherri Dalton
 One Lafayette Street
 Wakefield, MA 01880
 sdalton@wakefield.ma.us

Town of Wakefield APPLICATION FOR LICENSE

Common Victualler, Entertainment, Automatic Amusement

New License ☐Renewal ☒

Las chivas Inc 979 mainst Wakefield, MA 01880
 (name and street address of business)

Business & Owner Eric Brambila
 (name and mailing address)

781-587-3500
 (phone number)

Ebrambila65@outlook.com

License(s) Requested (check each one that applies)		Fee:	Total
Common Victualler	<input checked="" type="checkbox"/> Number of Seats <u>65</u>	\$25.00	\$ <u>25.00</u>
Entertainment	<input checked="" type="checkbox"/> Number of Devices <u>4</u>	\$50.00 per device	\$ <u>200.00</u>
(List Devices for which license is requested)			
Automatic Amusement (Video Machines)	<input type="checkbox"/> Number of Devices _____	\$100.00 per device	\$ _____
(List Devices for which license is requested)			
Total Due			\$ <u>225.00</u>

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

X Li Brambila
 Signature of Applicant

10-23-19
 Date

DUE NOV. 22nd



Town of Wakefield APPLICATION FOR LICENSE

RETURN FORM TO:

Town Administrator's Office
Attn: Sherri Dalton
One Lafayette Street
Wakefield, MA 01880
sdalton@wakefield.ma.us

Common Victualler, Entertainment, Automatic Amusement

New License ☐

Renewal ☒

The Remedy Exchange 41 Tuttle St. Wakefield, MA 01880
(name and street address of business)

Business & Owner Justina Langone 41 Tuttle St. Wakefield MA 01810
(name and mailing address)

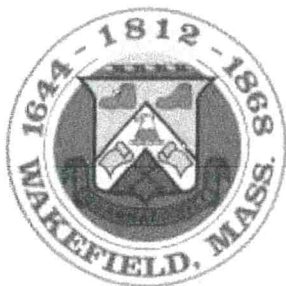
617 637 0847 the remedyexchange@gmail.com
(phone number) (email address)

License(s) Requested (check each one that applies)		Fee:	Total
Common Victualler	<input checked="" type="checkbox"/> Number of Seats <u>18</u>	\$25.00	\$ <u>25</u>
Entertainment	<input type="checkbox"/> Number of Devices _____ (List Devices for which license is requested)	\$50.00 per device	\$ _____
Automatic Amusement (Video Machines)	<input type="checkbox"/> Number of Devices _____ (List Devices for which license is requested)	\$100.00 per device	\$ _____
Total Due			\$ <u>25</u>

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

X Justina Langone
Signature of Applicant

11/21/19
Date



Town of Wakefield APPLICATION FOR LICENSE

RETURN FORM TO:

Town Administrator's Office
Attn: Sherri Dalton
One Lafayette Street
Wakefield, MA 01880
sdalton@wakefield.ma.us

Common Victualler, Entertainment, Automatic Amusement

New License ☐

Renewal ☒

ZuZu's Cafe

Wakefield, MA 01880

(name and street address of business)

Business & Owner

Dawn Beebe 316 Main Street

(name and mailing address)

781-245-3035

(phone number)

dawn@

(email address)

License(s) Requested (check each one that applies)

Common Victualler



Number of Seats

26

Fee:

\$25.00

Total

\$ 26

Entertainment



Number of Devices

\$50.00 per device

\$ _____

(List Devices for which license is requested)

Automatic Amusement
(Video Machines)



Number of Devices

\$100.00 per device

\$ _____

(List Devices for which license is requested)

Total Due \$ 26

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

X

Dawn Beebe
Signature of Applicant

11/27/19
Date



Jean M. Lorizio, Esq.
Commission Chairman


Commonwealth Of Massachusetts
Department Of The State Treasurer
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3
Chelsea, MA 02150-2358

2020
Retail License Renewal

License Number: 00031-RS-1310 Municipality: WAKEFIELD
License Name : R And M Restaurant Inc License Class: Annual
DBA : Artichokes Ristorante Trattoria License Type: Restaurant
Premise Address: 317 Main Street Wakefield, MA 01880 License Category: All Alcoholic Beverages
Manager: Ralph Lavita

I hereby certify and swear under penalties of perjury that:

1. I am authorized to sign this renewal pursuant to M.G.L. Chapter 138;
2. The renewed license is of the same class, type, category as listed above;
3. The licensee has complied with all laws of the Commonwealth relating to taxes; and
4. The premises are now open for business (if not, explain below).



Signature

Date

Additional Information:





Jean M. Lorizio, Esq.
Commission Chairman

Commonwealth Of Massachusetts
Department Of The State Treasurer
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3
Chelsea, MA 02150-2358

2020
Retail License Renewal

License Number: 00019-RS-1310

Municipality: WAKEFIELD

License Name : Chi Hua Corp Inc

License Class: Annual

DBA : Bamboo House

License Type: Restaurant

Premise Address: 21 Broadway Wakefield, MA 01880

License Category: All Alcoholic Beverages

Manager: I Chi Chen

I hereby certify and swear under penalties of perjury that:

1. I am authorized to sign this renewal pursuant to M.G.L. Chapter 138;
2. The renewed license is of the same class, type, category as listed above;
3. The licensee has complied with all laws of the Commonwealth relating to taxes; and
4. The premises are now open for business (if not, explain below).

Signature

11-29-19

Date

Additional Information:



Jean M. Lorizio, Esq.
Commission Chairman

**Commonwealth Of Massachusetts
Department Of The State Treasurer
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3
Chelsea, MA 02150-2358**

**2020
Retail License Renewal**

License Number: 00026-RS-1310 Municipality: WAKEFIELD
License Name : Jks Restaurants Inc License Class: Annual
DBA : Bellinos Italian Grill And Pizzeria License Type: Restaurant
Premise Address: 146 Lowell Street Wakefield, MA 01880 License Category: All Alcoholic Beverages
Manager: Chrysanthi Kapoukranidis

I hereby certify and swear under penalties of perjury that:

1. I am authorized to sign this renewal pursuant to M.G.L. Chapter 138;
2. The renewed license is of the same class, type, category as listed above;
3. The licensee has complied with all laws of the Commonwealth relating to taxes; and
4. The premises are now open for business (if not, explain below).

Signature

Date

Additional Information:





Jean M. Lorizio, Esq.
Commission Chairman

**Commonwealth Of Massachusetts
Department Of The State Treasurer
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3
Chelsea, MA 02150-2358**

**2020
Retail License Renewal**

License Number: 00029-RS-1310 Municipality: WAKEFIELD
License Name : Cafe Italia Inc License Class: Annual
DBA : Cafe Italia License Type: Restaurant
Premise Address: 21-23 Water Street Wakefield, MA 01880 License Category: All Alcoholic Beverages
Manager: Anthony Oliveira

I hereby certify and swear under penalties of perjury that:

1. I am authorized to sign this renewal pursuant to M.G.L. Chapter 138;
2. The renewed license is of the same class, type, category as listed above;
3. The licensee has complied with all laws of the Commonwealth relating to taxes; and
4. The premises are now open for business (if not, explain below).

Signature

Date

Additional Information:





Jean M. Lorizio, Esq.
Commission Chairman

**Commonwealth Of Massachusetts
Department Of The State Treasurer
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3
Chelsea, MA 02150-2358**

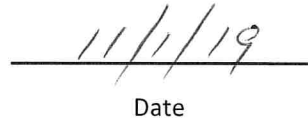
**2020
Retail License Renewal**

License Number:	00012-RS-1310	Municipality:	WAKEFIELD
License Name :	Bere Island Corp	License Class:	Annual
DBA :	Harringtons	License Type:	Restaurant
Premise Address:	17 19 Water Street Wakefield, MA 01880	License Category:	All Alcoholic Beverages
Manager:	J Brendan Oreilly		

I hereby certify and swear under penalties of perjury that:

1. I am authorized to sign this renewal pursuant to M.G.L. Chapter 138;
2. The renewed license is of the same class, type, category as listed above;
3. The licensee has complied with all laws of the Commonwealth relating to taxes; and
4. The premises are now open for business (if not, explain below).


Signature


Date

Additional Information:





Jean M. Lorizio, Esq.
Commission Chairman

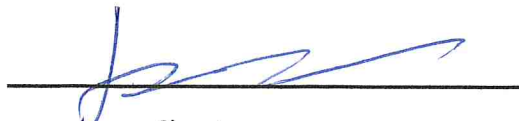
**Commonwealth Of Massachusetts
Department Of The State Treasurer
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3
Chelsea, MA 02150-2358**

**2020
Retail License Renewal**

License Number:	00037-RS-1310	Municipality:	WAKEFIELD
License Name :	Oyes Inc	License Class:	Annual
DBA :	Fengs	License Type:	Restaurant
Premise Address:	963 Main Street Wakefield, MA 01880	License Category:	All Alcoholic Beverages
Manager:	Jia Zheng Zheng		

I hereby certify and swear under penalties of perjury that:

1. I am authorized to sign this renewal pursuant to M.G.L. Chapter 138;
2. The renewed license is of the same class, type, category as listed above;
3. The licensee has complied with all laws of the Commonwealth relating to taxes; and
4. The premises are now open for business (if not, explain below).


Signature


Date

Additional Information:



10/23/2019 08:24

From: 5097778899 Anderson Lampe, PS Webfax

Page: 1/1



Jean M. Lorzio, Esq.
Commission Chairman

Commonwealth Of Massachusetts
Department Of The State Treasurer
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3
Chelsea, MA 02150-2358

2020
Retail License Renewal

License Number: 03975-RS-1310 Municipality: WAKEFIELD
License Name : Las Chivas, Inc. License Class: Annual
DBA : Tequilas License Type: Restaurant
Premise Address: 979 Main Street Wakefield, MA 01880 License Category: All Alcoholic Beverages
Manager: Alvaro Arechiga

I hereby certify and swear under penalties of perjury that:

1. I am authorized to sign this renewal pursuant to M.G.L. Chapter 138;
2. The renewed license is of the same class, type, category as listed above;
3. The licensee has complied with all laws of the Commonwealth relating to taxes; and
4. The premises are now open for business (if not, explain below).

Alvaro Arechiga

Signature

AA 10/23/2019

Date

Additional Information:





Jean M. Lorizio, Esq.
Commission Chairman

Commonwealth Of Massachusetts
Department Of The State Treasurer
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3
Chelsea, MA 02150-2358

2020
Retail License Renewal

License Number: 03982-RS-1310

Municipality: WAKEFIELD

License Name : CMRG, LLC

License Class: Annual

DBA : Tonno Wakefield

License Type: Restaurant

Premise Address: 175 North Avenue 103 Wakefield, MA
01880

License Category: All Alcoholic Beverages

Manager: ~~Sean M. Costanzo~~ NEAL MAVER

I hereby certify and swear under penalties of perjury that:

1. I am authorized to sign this renewal pursuant to M.G.L. Chapter 138;
2. The renewed license is of the same class, type, category as listed above;
3. The licensee has complied with all laws of the Commonwealth relating to taxes; and
4. The premises are now open for business (if not, explain below).

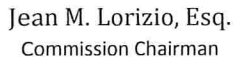
Signature

Date

Additional Information:

CHANGE OF MANAGER TO NEAL MAVER







Jean M. Lorizio, Esq.
Commission Chairman

**Commonwealth Of Massachusetts
Department Of The State Treasurer
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3
Chelsea, MA 02150-2358**

**2020
Retail License Renewal**

License Number: 00034-RS-1310 Municipality: WAKEFIELD
License Name : Sei Bar Wakefield Inc License Class: Annual
DBA : Sei Bar License Type: Restaurant
Premise Address: 109 Water Street Wakefield, MA License Category: All Alcoholic Beverages
Manager: Jen K Lin

I hereby certify and swear under penalties of perjury that:

1. I am authorized to sign this renewal pursuant to M.G.L. Chapter 138;
2. The renewed license is of the same class, type, category as listed above;
3. The licensee has complied with all laws of the Commonwealth relating to taxes; and
4. The premises are now open for business (if not, explain below).

Signature

11/20/2019

Date

Additional Information:





Jean M. Lorizio, Esq.
Commission Chairman

**Commonwealth Of Massachusetts
Department Of The State Treasurer
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3
Chelsea, MA 02150-2358**

**2020
Retail License Renewal**

\$ 3000

License Number: 03665-RS-1310

Municipality: WAKEFIELD

License Name : Meera LLC

License Class: Annual

DBA : Four Points Sheraton Wakefield

License Type: Hotel/Innkeeper

Premise Address: 1 Audubon Rd Wakefield, MA 01880

License Category: All Alcoholic Beverages

Manager: Michael Thomas Smith

I hereby certify and swear under penalties of perjury that:

1. I am authorized to sign this renewal pursuant to M.G.L. Chapter 138;
2. The renewed license is of the same class, type, category as listed above;
3. The licensee has complied with all laws of the Commonwealth relating to taxes; and
4. The premises are now open for business (if not, explain below).

Signature

11-05-19

Date

Additional Information:





Jean M. Lorizio, Esq.
Commission Chairman

**Commonwealth Of Massachusetts
Department Of The State Treasurer
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3
Chelsea, MA 02150-2358**

**2020
Retail License Renewal**

License Number: 00011-CL-1310

Municipality: WAKEFIELD

License Name : Crystal Community Club Inc

License Class: Annual

DBA :

License Type: Club

Premise Address: 77 Preston Street Wakefield, MA

License Category: All Alcoholic Beverages

Manager: Joseph H Della Russo

I hereby certify and swear under penalties of perjury that:

1. I am authorized to sign this renewal pursuant to M.G.L. Chapter 138;
2. The renewed license is of the same class, type, category as listed above;
3. The licensee has complied with all laws of the Commonwealth relating to taxes; and
4. The premises are now open for business (if not, explain below).

Kevin J. Lopez
Signature

11/6/2019
Date

Additional Information:





Jean M. Lorizio, Esq.
Commission Chairman

Commonwealth Of Massachusetts
Department Of The State Treasurer
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3
Chelsea, MA 02150-2358

2020
Retail License Renewal

License Number: 00032-RS-1310 Municipality: WAKEFIELD
License Name : Lucky Thirteen Restaurant Inc License Class: Annual
DBA : Sonny Notos Restaurant License Type: Restaurant
Premise Address: 49 Water Street Wakefield, MA 01880 License Category: Wines & Malt with Cordial/Liqueur
Manager: Salvatore Noto

I hereby certify and swear under penalties of perjury that:

1. I am authorized to sign this renewal pursuant to M.G.L. Chapter 138;
2. The renewed license is of the same class, type, category as listed above;
3. The licensee has complied with all laws of the Commonwealth relating to taxes; and
4. The premises are now open for business (if not, explain below).

Salvatore Noto

Signature

11-21-19

Date

Additional Information:



Jean M. Lorizio, Esq.
Commission Chairman

Commonwealth Of Massachusetts
Department Of The State Treasurer
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3
Chelsea, MA 02150-2358

2020
Retail License Renewal

License Number:	00038-RS-1310	Municipality:	WAKEFIELD
License Name :	Massimo Inc	License Class:	Annual
DBA :	Massimos Ristorante	License Type:	Restaurant
Premise Address:	19 Centre Street Wakefield, MA 01880	License Category:	Wines and Malt
Manager:	Nancy Turco		

I hereby certify and swear under penalties of perjury that:

1. I am authorized to sign this renewal pursuant to M.G.L. Chapter 138;
2. The renewed license is of the same class, type, category as listed above;
3. The licensee has complied with all laws of the Commonwealth relating to taxes; and
4. The premises are now open for business (if not, explain below).


Signature

11-13-19
Date

Additional Information:





Jean M. Lorizio, Esq.
Commission Chairman

Commonwealth Of Massachusetts
Department Of The State Treasurer
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3
Chelsea, MA 02150-2358

2020
Retail License Renewal

License Number: 00039-RS-1310

Municipality: WAKEFIELD

License Name : Cibo Cafe LLC

License Class: Annual

DBA :

License Type: Restaurant

Premise Address: 1179 Main Street Wakefield, MA 01880

License Category: Wines & Malt with Cordial/Liqueur

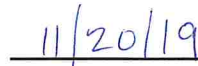
Manager: Olivia Torretta Santini

I hereby certify and swear under penalties of perjury that:

1. I am authorized to sign this renewal pursuant to M.G.L. Chapter 138;
2. The renewed license is of the same class, type, category as listed above;
3. The licensee has complied with all laws of the Commonwealth relating to taxes; and
4. The premises are now open for business (if not, explain below).



Signature



Date

Additional Information:



Jean M. Lorizio, Esq.
Commission Chairman

Commonwealth Of Massachusetts
Department Of The State Treasurer
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3
Chelsea, MA 02150-2358

2020
Retail License Renewal

License Number: 00013-PK-1310 Municipality: WAKEFIELD
License Name : D And M Liquor Corp License Class: Annual
DBA : S And M Liquors License Type: Package Store
Premise Address: 258 Water Street Wakefield, MA 01880 License Category: All Alcoholic Beverages
Manager: Kailash Patel

I hereby certify and swear under penalties of perjury that:

1. I am authorized to sign this renewal pursuant to M.G.L. Chapter 138;
2. The renewed license is of the same class, type, category as listed above;
3. The licensee has complied with all laws of the Commonwealth relating to taxes; and
4. The premises are now open for business (if not, explain below).

Signature

11/03/2019

Date

Additional Information:





Jean M. Lorizio, Esq.
Commission Chairman

Commonwealth Of Massachusetts
Department Of The State Treasurer
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3
Chelsea, MA 02150-2358

2020
Retail License Renewal

License Number: 89144-PK-1310

Municipality: WAKEFIELD

License Name : Prachi Corporation

License Class: Annual

DBA : McDonough'S Liquors

License Type: Package Store

Premise Address: 13 Water Street Wakefield, MA 01880

License Category: All Alcoholic Beverages

Manager: Narendrakumar Patel

I hereby certify and swear under penalties of perjury that:

1. I am authorized to sign this renewal pursuant to M.G.L. Chapter 138;
2. The renewed license is of the same class, type, category as listed above;
3. The licensee has complied with all laws of the Commonwealth relating to taxes; and
4. The premises are now open for business (if not, explain below).

Signature

Date

Additional Information:



Jean M. Lorizio, Esq.
Commission Chairman

Commonwealth Of Massachusetts
Department Of The State Treasurer
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3
Chelsea, MA 02150-2358

2020
Retail License Renewal

License Number: 89054-PK-1310

Municipality: WAKEFIELD

License Name : Campbell Beverage LLC

License Class: Annual

DBA : Caporale'S

License Type: Package Store

Premise Address: 29 Broadway Wakefield, MA 01880

License Category: All Alcoholic Beverages

Manager: Brian Mark Campbell

I hereby certify and swear under penalties of perjury that:

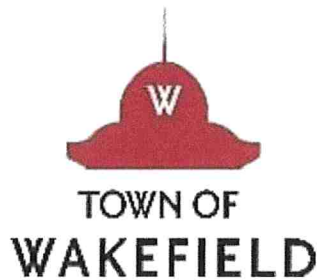
1. I am authorized to sign this renewal pursuant to M.G.L. Chapter 138;
2. The renewed license is of the same class, type, category as listed above;
3. The licensee has complied with all laws of the Commonwealth relating to taxes; and
4. The premises are now open for business (if not, explain below).

Signature

Date

Additional Information:





Return to:
Town Administrator's Office
Attn: Sherri Dalton
One Lafayette Street
Wakefield, MA 01880
sdalton@wakefield.ma.us

Town of Wakefield APPLICATION FOR LICENSE

Lodging House, Peddler, Second Hand Dealer

New License ☐ Renewal ☒
Wakefield HOUSE
48 WATER Street Wakefield, MA 01880
(name and street address of business)

Business & Owner CARITAS Communities Inc.
(name and mailing address)

(781) 843-1242 tnee@CARITASCOMMUNITIES.org
(phone number) (email address)

License(s) Requested (check each one that applies)	Fee:	Total
Lodging House/Innholder <input checked="" type="checkbox"/>	\$50.00	\$ 50. —
Peddler – Principal Holder <input type="checkbox"/>	\$50.00	\$ —
Peddler - Employees of the principal holder <input type="checkbox"/>	\$25.00 Per Employee	\$ —
Second Hand Dealer <input type="checkbox"/>	\$125.00	\$ —

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

x Bonnie Lee Son Caritas
Signature of Applicant

12/1/2019
Date



Return to:
Town Administrator's Office
Attn: Sherri Dalton
One Lafayette Street
Wakefield, MA 01880
sdalton@wakefield.ma.us

Town of Wakefield APPLICATION FOR LICENSE

Common Victualler, Entertainment, Automatic Amusement

New License ☐

Renewal ☒

Bamboo House, 21 Broadway

Wakefield, MA 01880

(name and street address of business)

Business & Owner

Bamboo House 21 Broadway

(name and mailing address)

781.224.0098

(phone number)

Chichen0000@yahoo.com

(email address)

License(s) Requested (check each one that applies)	Fee:	Total
Common Victualler <input checked="" type="checkbox"/> Number of Seats _____	\$25.00	\$ <u>25.00</u>
Entertainment <input checked="" type="checkbox"/> Number of Devices <u>3</u>	\$50.00 per device	\$ <u>150.00</u>
<u>TV's</u> (List Devices for which license is requested)		
Automatic Amusement (Video Machines) <input type="checkbox"/> Number of Devices _____	\$100.00 per device	\$ _____
 (List Devices for which license is requested)		
Total Due		\$ <u>175.00</u>



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

X [Signature]

Signature of Applicant

11-29-19

Date



Return to:
Town Administrator's Office
Attn: Sherri Dalton
One Lafayette Street
Wakefield, MA 01880
sdalton@wakefield.ma.us

Town of Wakefield APPLICATION FOR LICENSE

Common Victualler, Entertainment, Automatic Amusement

New License ☐ Renewal ☒

Bellino's Restaurant, 146 Lowell St, Wakefield, MA 01880
(name and street address of business)

Business & Owner Bellino's Restaurant, 146 Lowell St, Wakefield
(name and mailing address)
781. 246. 7666 Shane_295@msn.com
(phone number) (email address)

License(s) Requested (check each one that applies)		Fee:	Total
Common Victualler	<input checked="" type="checkbox"/> Number of Seats <u>46</u>	\$25.00	\$ <u>25.00</u>
Entertainment	<input checked="" type="checkbox"/> Number of Devices <u>2</u> <u>TV's</u> (List Devices for which license is requested)	\$50.00 per device	\$ <u>100.00</u>
Automatic Amusement (Video Machines)	<input type="checkbox"/> Number of Devices _____ (List Devices for which license is requested)	\$100.00 per device	\$ _____
Total Due			\$ <u>125.00</u>

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

X [Signature]
Signature of Applicant

12-4-19
Date



Town of Wakefield APPLICATION FOR LICENSE

(617) 2309646

RETURN FORM TO:

Town Administrator's Office
Attn: Sherri Dalton
One Lafayette Street
Wakefield, MA 01880
sdalton@wakefield.ma.us

Common Victualler, Entertainment, Automatic Amusement

New License ☐ Renewal ☒

Leaf and Ginger

Wakefield, MA 01880

(name and street address of business)

Business & Owner Khalid Charfi

(name and mailing address)

(617) 2309646

(phone number)

khalidcharfi@gmail.com

(email address)

License(s) Requested (check each one that applies)

Common Victualler



Number of Seats 25

Fee:

\$25.00

Total

\$25.00

Entertainment



Number of Devices 1

\$50.00 per device

\$50.00

TV

(List Devices for which license is requested)

Automatic Amusement
(Video Machines)



Number of Devices _____

\$100.00 per device \$_____

(List Devices for which license is requested)

Total Due \$75.00

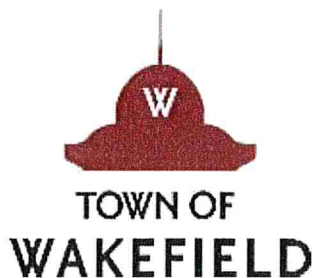
Application is made to the Town of Wakefield Licensing Authority in accordance with their Rules and Regulations made under authority of applicable statutes.

X

Signature of Applicant

Date

11/27/19



Return to:
Town Administrator's Office
Attn: Sherri Dalton
One Lafayette Street
Wakefield, MA 01880
sdalton@wakefield.ma.us

Town of Wakefield APPLICATION FOR LICENSE

Common Victualler, Entertainment, Automatic Amusement

New License ☐

Renewal ☒

Massimo Ristorante 19 Central St Wakefield, MA 01880
(name and street address of business)

Business & Owner

Nancy Turco 20 Friend St Revere MA 02511
(name and mailing address)

617 816 9507 MassimosRistorante@yahoo.com
(phone number) (email address)

License(s) Requested (check each one that applies)		Fee:	Total
Common Victualler	<input checked="" type="checkbox"/> Number of Seats <u>64</u>	\$25.00	\$ <u>25.00</u>
Entertainment	<input checked="" type="checkbox"/> Number of Devices <u>2</u> <u>TVS</u> (List Devices for which license is requested)	\$50.00 per device	\$ <u>100.00</u>
Automatic Amusement (Video Machines)	<input type="checkbox"/> Number of Devices _____ (List Devices for which license is requested)	\$100.00 per device	\$ _____
Total Due			\$ <u>125.00</u>

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

X

Nancy Turco
Signature of Applicant

11/13/19
Date



Return to:
Town Administrator's Office
Attn: Sherri Dalton
One Lafayette Street
Wakefield, MA 01880
sdalton@wakefield.ma.us

Town of Wakefield APPLICATION FOR LICENSE

Common Victualler, Entertainment, Automatic Amusement

New License ☐

Renewal ☒

FENG Asian Cuisine Wakefield, MA 01880
(name and street address of business)

Business & Owner WAN FENG, YZ 17 FOSSEN WAY Andover, MA 01810
(name and mailing address)

646-585-9536 Kevin.sato2@yahoo.com
(phone number) (email address)

License(s) Requested (check each one that applies)		Fee:	Total
Common Victualler	<input checked="" type="checkbox"/> Number of Seats <u>125</u>	\$25.00	\$ <u>25.00</u>
Entertainment	<input checked="" type="checkbox"/> Number of Devices <u>5</u>	\$50.00 per device	\$ <u>250.00</u>
<hr/> (List Devices for which license is requested)			
Automatic Amusement (Video Machines)	<input type="checkbox"/> Number of Devices <u> </u>	\$100.00 per device	\$ <u> </u>
<hr/> (List Devices for which license is requested)			
Total Due			\$ <u>275.00</u>

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

X [Signature]
Signature of Applicant

11-1-19
Date

10/15/2019



Town of Wakefield APPLICATION FOR LICENSE

RETURN FORM TO:

Town Administrator's Office
Attn: Sherri Dalton
One Lafayette Street
Wakefield, MA 01880
sdalton@wakefield.ma.us

Common Victualler, Entertainment, Automatic Amusement

New License ☐ Renewal ☒

PIECE'O PIZZA 340 MAIN STREET Wakefield, MA 01880
(name and street address of business)

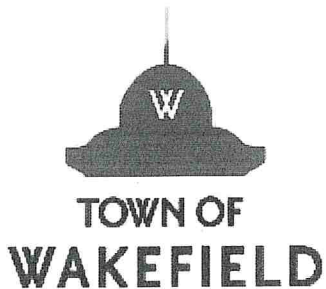
Business & Owner 340 MAIN RESTAURANT GROUP LLC 119 DRUM HILL RD #334 CHELMSFORD
(name and mailing address) MA 01824
JFRATI@CPA.COM
Info@POPWAKEFIELD.COM
(phone number) (email address)

License(s) Requested (check each one that applies)	Fee:	Total
Common Victualler <input checked="" type="checkbox"/> Number of Seats <u>25</u>	\$25.00	\$ <u>25</u>
Entertainment <input checked="" type="checkbox"/> Number of Devices <u>1</u> <u>T.V.</u> (List Devices for which license is requested)	\$50.00 per device	\$ <u>50</u>
Automatic Amusement (Video Machines) <input type="checkbox"/> Number of Devices _____ (List Devices for which license is requested)	\$100.00 per device	\$ _____
Total Due		\$ <u>75</u>

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

[Signature]
Signature of Applicant

11/27/19
Date



Return to:
Town Administrator's Office
Attn: Sherri Dalton
One Lafayette Street
Wakefield, MA 01880
sdalton@wakefield.ma.us

Town of Wakefield APPLICATION FOR LICENSE

Common Victualler, Entertainment, Automatic Amusement

New License ☐

Renewal ☒

Sonny Noto's 49 WATER ST WAKEFIELD Wakefield, MA 01880
(name and street address of business)

Business & Owner Salvatore Noto 8 Wyman Way LYNNFIELD
(name and mailing address)

781-246-4800
(phone number)

richer116@yahoo.com
(email address)

License(s) Requested (check each one that applies)		Fee:	Total
Common Victualler	<input checked="" type="checkbox"/> Number of Seats <u>40</u>	\$25.00	\$ <u>25</u>
Entertainment	<input checked="" type="checkbox"/> Number of Devices <u>1</u>	\$50.00 per device	\$ <u>50</u>
(List Devices for which license is requested)			
Automatic Amusement (Video Machines)	<input type="checkbox"/> Number of Devices _____	\$100.00 per device	\$ _____
(List Devices for which license is requested)			
Total Due			\$ <u>15.00</u>

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

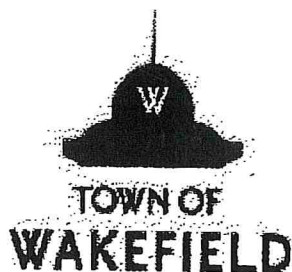
X Salvatore Noto
Signature of Applicant

11-21-19
Date

10/23/2019 08:19

From: 5097778099 Anderson Lampe, PS-Webfax

Page: 1/2



Return to:
 Town Administrator's Office
 Attn: Sherri Dalton
 One Lafayette Street
 Wakefield, MA 01880
 sdalton@wakefield.ma.us

Town of Wakefield

APPLICATION FOR LICENSE

Common Victualler, Entertainment, Automatic Amusement

New License ☐Renewal ☒

Las chivas inc 979 mainst Wakefield, MA 01880
 (name and street address of business)

Business & Owner Eric Brambila
 (name and mailing address)

781-587-3500
 (phone number)

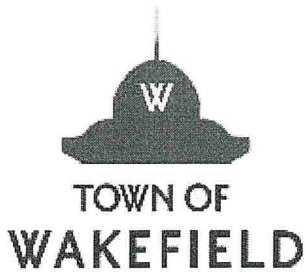
Ebrambila65@outlook.com

License(s) Requested (check each one that applies)		Fee:	Total
Common Victualler	<input checked="" type="checkbox"/>	Number of Seats <u>65</u>	\$25.00 \$ <u>25.00</u>
Entertainment	<input checked="" type="checkbox"/>	Number of Devices <u>4</u>	\$50.00 per device \$ <u>200.00</u>
(List Devices for which license is requested)			
Automatic Amusement (Video Machines)	<input type="checkbox"/>	Number of Devices _____	\$100.00 per device \$ _____
(List Devices for which license is requested)			
Total Due			\$ <u>225.00</u>

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

X Li Brambila
 Signature of Applicant

10-23-19
 Date



Return to:
Town Administrator's Office
Attn: Sherri Dalton
One Lafayette Street
Wakefield, MA 01880
sdalton@wakefield.ma.us

Town of Wakefield APPLICATION FOR LICENSE

Common Victualler, Entertainment, Automatic Amusement

New License ☐ Renewal ☒

Wakefield Bowladrome Wakefield, MA 01880
92 Water St (name and street address of business)

Business & Owner Salvatore Orifici 44F Salem St
(name and mailing address)

781-245-7062
(phone number)

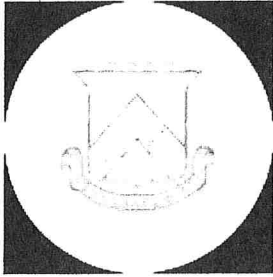
Sasha7561@yahoo.com
(email address)

License(s) Requested (check each one that applies)		Fee:	Total
Common Victualler	<input type="checkbox"/> Number of Seats _____	\$25.00	\$_____
Entertainment	<input type="checkbox"/> Number of Devices _____	\$50.00 per device	\$_____
(List Devices for which license is requested)			
Automatic Amusement (Video Machines)	<input checked="" type="checkbox"/> Number of Devices <u>4</u>	\$100.00 per device	\$ <u>400.00</u>
(List Devices for which license is requested)			
Total Due			\$ <u>400.00</u>

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

x Sally O'neel
Signature of Applicant

11/29/19
Date



Town of Wakefield

APPLICATION FOR LICENSE

DATE: 11-18-19

Fee: \$100.00

THE COMMONWEALTH OF MASSACHUSETTS

APPLICATION FOR A LICENSE TO BUY, SELL, EXCHANGE OR ASSEMBLE SECOND HAND MOTOR VEHICLES OR PARTS THEREOF

I, the undersigned, duly authorized by the concern herein mentioned, hereby apply for a **CLASS II** license, to Buy, Sell, Exchange or Assemble second hand motor vehicles or parts thereof, in accordance with the provisions of Chapter 140 of the General Laws.

1. What is the name of the concern? Branden Auto Sales

Business address of concern? 4 Middlesex St Wakefield MA
01880

2. Is the above concern an individual, co-partnership, an association or a corporation?

individual

3. If an individual, state full name, residential address and phone number and email address: Maria Demavra Denis 39 High St
Haverhill MA 01832

4. If a co-partnership, state full names, addresses and phone numbers and email addresses of the persons composing it: n/a

5. If an association or a corporation, state full names, addresses and phone numbers and email addresses of the principal officers.

President: NA

Secretary: _____

Treasurer: _____

6. Are you engaged principally in the business of buying, selling or exchanging motor vehicles? ☒ Yes ☐ No

If so, is your principal business the sale of new motor vehicles? ☐ Yes ☒ No

Is your principal business the buying and selling of second hand motor vehicles? ☒ Yes ☐ No

Is your principal business that of a motor vehicle junk dealer? ☐ Yes ☒ No

7. Give a complete description of all the premises to be used for the purpose of carrying on the business:

Buy and sell used Autos

8. Are you a recognized agent of a motor vehicle manufacture? ☐ Yes ☒ No

If so, state name of manufacture: _____

9. Have you a signed contract as required by Section 58, Class 1? ☒ Yes ☐ No

10. Have you ever applied for a license to deal in second hand motor vehicles or parts thereof: ☒ Yes ☐ No

If so, in what city/town: WAKESFIELD MA

Did you receive a license? ☒ Yes ☐ No For what year? 2019

11. Has any license issued to you in Massachusetts or any other state to deal in motor vehicles or parts thereof ever been suspended or revoked? ☐ Yes ☒ No

12. Has the applicant ever been convicted of or has charges pending that involved force, the threat of force, controlled substances, a sex-related offense, or any other crime that would bear upon his/her suitability? ☐ Yes ☒ No?

MARIA I DEMOURA DONALD
Signature (duly authorized to represent the concern herein mentioned)

Maria I Demoura Donald
Print Name

MARIA I DEMOURA DONALD
Residence
39 High HAVERHILL 01832 MA

RETURN TO:
SHERRI DALTON
TOWN ADMINISTRATOR'S OFFICE
ONE LAFAYETTE STREET, WAKEFIELD, MA 01880
sdalton@wakefield.ma.us

IMPORTANT

EVERY QUESTION MUST BE ANSWERED WITH FULL INFORMATION, AND FALSE STATEMENTS HEREIN MAY RESULT IN THE REJECTION OF YOUR APPLICATION OR THE SUBSEQUENT REVOCATION OF YOUR LICENSE IF ISSUED.

Note: If the applicant has held a license in the year prior to this application, he/she must file a duplicate of the application with the registrar. (See Sec. 59)



Town of Wakefield

APPLICATION FOR LICENSE

DATE: 10/28/19

Fee: \$100.00

THE COMMONWEALTH OF MASSACHUSETTS

APPLICATION FOR A LICENSE TO BUY, SELL, EXCHANGE OR ASSEMBLE SECOND HAND MOTOR VEHICLES OR PARTS THEREOF

I, the undersigned, duly authorized by the concern herein mentioned, hereby apply for a **CLASS II** license, to Buy, Sell, Exchange or Assemble second hand motor vehicles or parts thereof, in accordance with the provisions of Chapter 140 of the General Laws.

1. What is the name of the concern? Capitol Const Egt Sales

Business address of concern? 51A New Salem St. Wakefield

2. Is the above concern an individual, co-partnership, an association or a corporation?

yes

3. If an individual, state full name, residential address and phone number and email address: Mark Benedetto, 4 Azarian Ct Wakefield, Ma.

781-245-2833 bbenedetto@comcast.net

4. If a co-partnership, state full names, addresses and phone numbers and email addresses of the persons composing it: _____

5. If an association or a corporation, state full names, addresses and phone numbers and email addresses of the principal officers.

President: _____

Secretary: _____

Treasurer: _____

6. Are you engaged principally in the business of buying, selling or exchanging motor vehicles? ☒ Yes ☐ No

If so, is your principal business the sale of new motor vehicles? ☐ Yes ☒ No

Is your principal business the buying and selling of second hand motor vehicles? ☒ Yes ☐ No

Is your principal business that of a motor vehicle junk dealer? ☐ Yes ☒ No

7. Give a complete description of all the premises to be used for the purpose of carrying on the business:

5 Acres Zoned Heavy Industrial

8. Are you a recognized agent of a motor vehicle manufacture? ☐ Yes ☒ No

If so, state name of manufacture: _____

9. Have you a signed contract as required by Section 58, Class 1? ☐ Yes ☒ No

10. Have you ever applied for a license to deal in second hand motor vehicles or parts thereof: ☒ Yes ☒ No MB

If so, in what city/town: Wakefield

Did you receive a license? ☒ Yes ☐ No For what year? 2018

11. Has any license issued to you in Massachusetts or any other state to deal in motor vehicles or parts thereof ever been suspended or revoked? ☐ Yes ☒ No

12. Has the applicant ever been convicted of or has charges pending that involved force, the threat of force, controlled substances, a sex-related offense, or any other crime that would bear upon his/her suitability? ☐ Yes ☒ No?

Mark Benedetto
Signature (duly authorized to represent the concern herein mentioned)

Mark Benedetto
Print Name

4 Azarian Ct, Wakefield
Residence

RETURN TO:
SHERRI DALTON
TOWN ADMINISTRATOR'S OFFICE
ONE LAFAYETTE STREET, WAKEFIELD, MA 01880
sdalton@wakefield.ma.us

IMPORTANT

EVERY QUESTION MUST BE ANSWERED WITH FULL INFORMATION, AND FALSE STATEMENTS HEREIN MAY RESULT IN THE REJECTION OF YOUR APPLICATION OR THE SUBSEQUENT REVOCATION OF YOUR LICENSE IF ISSUED.

Note: If the applicant has held a license in the year prior to this application, he/she must file a duplicate of the application with the registrar. (See Sec. 59)



Town of Wakefield

APPLICATION FOR LICENSE

DATE: 10/28/19

Fee: \$100.00

THE COMMONWEALTH OF MASSACHUSETTS

APPLICATION FOR A LICENSE TO BUY, SELL, EXCHANGE OR ASSEMBLE SECOND HAND MOTOR VEHICLES OR PARTS THEREOF

I, the undersigned, duly authorized by the concern herein mentioned, hereby apply for a **CLASS II** license, to Buy, Sell, Exchange or Assemble second hand motor vehicles or parts thereof, in accordance with the provisions of Chapter 140 of the General Laws.

1. What is the name of the concern? Custom Transportation Inc.
Business address of concern? 145 Foundry St. Wakefield, MA

2. Is the above concern an individual, co-partnership, an association or a corporation?

Corporation

3. If an individual, state full name, residential address and phone number and email address: n/a

4. If a co-partnership, state full names, addresses and phone numbers and email addresses of the persons composing it: n/a

5. If an association or a corporation, state full names, addresses and phone numbers and email addresses of the principal officers.

President: Don Moore 25 Catalpast. Wakefield, MA
Secretary: 781-245-6108
Treasurer: don@customtrans.com

6. Are you engaged principally in the business of buying, selling or exchanging motor vehicles? ☒ Yes ☐ No

If so, is your principal business the sale of new motor vehicles? ☐ Yes ☒ No

Is your principal business the buying and selling of second hand motor vehicles? ☒ Yes ☐ No

Is your principal business that of a motor vehicle junk dealer? ☐ Yes ☒ No

7. Give a complete description of all the premises to be used for the purpose of carrying on the business:

5000 sq ft. cinder block building, 3 overhead
doors, 800 sq ft office on approximately
12,000 sq ft. fenced in lot.

8. Are you a recognized agent of a motor vehicle manufacture? ☐ Yes ☒ No

If so, state name of manufacture: _____

9. Have you a signed contract as required by Section 58, Class 1? ☐ Yes ☒ No

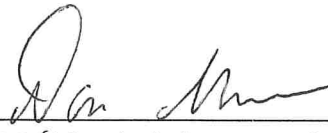
10. Have you ever applied for a license to deal in second hand motor vehicles or parts thereof? ☒ Yes ☐ No

If so, in what city/town: Wakefield, MA

Did you receive a license? ☒ Yes ☐ No For what year? 2019

11. Has any license issued to you in Massachusetts or any other state to deal in motor vehicles or parts thereof ever been suspended or revoked? ☐ Yes ☒ No

12. Has the applicant ever been convicted of or has charges pending that involved force, the threat of force, controlled substances, a sex-related offense, or any other crime that would bear upon his/her suitability? ☐ Yes ☒ No?


Signature (duly authorized to represent the concern herein mentioned)

Don Moore
Print Name

25 Catalpa St. Wakefield, MA
Residence 01880

RETURN TO:
SHERRI DALTON
TOWN ADMINISTRATOR'S OFFICE
ONE LAFAYETTE STREET, WAKEFIELD, MA 01880
sdalton@wakefield.ma.us

IMPORTANT

EVERY QUESTION MUST BE ANSWERED WITH FULL INFORMATION, AND FALSE STATEMENTS HEREIN MAY RESULT IN THE REJECTION OF YOUR APPLICATION OR THE SUBSEQUENT REVOCATION OF YOUR LICENSE IF ISSUED.

Note: If the applicant has held a license in the year prior to this application, he/she must file a duplicate of the application with the registrar. (See Sec. 59)



Town of Wakefield

APPLICATION FOR LICENSE

DATE: 11/15/19

Fee: \$100.00

THE COMMONWEALTH OF MASSACHUSETTS

APPLICATION FOR A LICENSE TO BUY, SELL, EXCHANGE OR ASSEMBLE SECOND HAND MOTOR VEHICLES OR PARTS THEREOF

I, the undersigned, duly authorized by the concern herein mentioned, hereby apply for a **CLASS II** license, to Buy, Sell, Exchange or Assemble second hand motor vehicles or parts thereof, in accordance with the provisions of Chapter 140 of the General Laws.

1. What is the name of the concern? Liberty Chevrolet Inc

Business address of concern? 90 Bay State Rd Wakefield MA 01880

2. Is the above concern an individual, co-partnership, an association or a corporation?

Corporation

3. If an individual, state full name, residential address and phone number and email address: N/A

4. If a co-partnership, state full names, addresses and phone numbers and email addresses of the persons composing it: N/A

5. If an association or a corporation, state full names, addresses and phone numbers and email addresses of the principal officers.

President: Charles E. Kamps Jr 6680 SE Harbor Circle Stuart FL 34986 781-287-7213

Secretary: Sally P Manning 9 Cobblestone Circle N. Andover MA 01845 781-287-7213

Treasurer: Sally P Manning 9 Cobblestone Circle N. Andover MA 01845 781-287-7213

6. Are you engaged principally in the business of buying, selling or exchanging motor vehicles? ☒ Yes ☐ No

If so, is your principal business the sale of new motor vehicles? ☒ Yes ☐ No

Is your principal business the buying and selling of second hand motor vehicles?

☐ Yes ☒ No

Is your principal business that of a motor vehicle junk dealer? ☒ Yes ☐ No

7. Give a complete description of all the premises to be used for the purpose of carrying on the business:

90 Bay State Rd

8. Are you a recognized agent of a motor vehicle manufacture? ☒ Yes ☐ No

If so, state name of manufacture: Chevrolet Motor Division

9. Have you a signed contract as required by Section 58, Class 1? ☒ Yes ☐ No

10. Have you ever applied for a license to deal in second hand motor vehicles or parts thereof: ☒ Yes ☐ No

If so, in what city/town: Worcester

Did you receive a license? ☒ Yes ☐ No For what year? 2018

11. Has any license issued to you in Massachusetts or any other state to deal in motor vehicles or parts thereof ever been suspended or revoked? ☒ Yes ☐ No

12. Has the applicant ever been convicted of or has charges pending that involved force, the threat of force, controlled substances, a sex-related offense, or any other crime that would bear upon his/her suitability? ☐ Yes ☒ No?

Signature (duly authorized to represent the concern herein mentioned)

Sally P. Manning

Print Name

9 Cobblestone Circle W. Andover MA 01845

Residence

**RETURN TO:
SHERRI DALTON
TOWN ADMINISTRATOR'S OFFICE
ONE LAFAYETTE STREET, WAKEFIELD, MA 01880
sdalton@wakefield.ma.us**

IMPORTANT

EVERY QUESTION MUST BE ANSWERED WITH FULL INFORMATION, AND FALSE STATEMENTS HEREIN MAY RESULT IN THE REJECTION OF YOUR APPLICATION OR THE SUBSEQUENT REVOCATION OF YOUR LICENSE IF ISSUED.

Note: If the applicant has held a license in the year prior to this application, he/she must file a duplicate of the application with the registrar. (See Sec. 59)



Town of Wakefield

APPLICATION FOR LICENSE

DATE: 11/15/19

Fee: \$100.00

THE COMMONWEALTH OF MASSACHUSETTS

APPLICATION FOR A LICENSE TO BUY, SELL, EXCHANGE OR ASSEMBLE SECOND HAND MOTOR VEHICLES OR PARTS THEREOF

I, the undersigned, duly authorized by the concern herein mentioned, hereby apply for a **CLASS II** license, to Buy, Sell, Exchange or Assemble second hand motor vehicles or parts thereof, in accordance with the provisions of Chapter 140 of the General Laws.

1. What is the name of the concern? Liberty Motors Inc

Business address of concern? 81 Bay State Rd Wakefield MA 01880

2. Is the above concern an individual, co-partnership, an association or a corporation?

Corporation

3. If an individual, state full name, residential address and phone number and email address: N/A

4. If a co-partnership, state full names, addresses and phone numbers and email addresses of the persons composing it: N/A

5. If an association or a corporation, state full names, addresses and phone numbers and email addresses of the principal officers.

President: Charles E Knops 6620 SE Harbor Circle Stuart FL 34996 781-287-7213
Secretary: Sebastian P Manning 9 Cobblestone Circle N. Andover MA 01845 781-287-7213
Treasurer: Sebastian P Manning 9 Cobblestone Circle N. Andover MA 01845 781-287-7213

6. Are you engaged principally in the business of buying, selling or exchanging motor vehicles? ☒ Yes ☐ No

If so, is your principal business the sale of new motor vehicles? ☒ Yes ☐ No

Is your principal business the buying and selling of second hand motor vehicles?
☒ Yes ☐ No

Is your principal business that of a motor vehicle junk dealer? ☐ Yes ☒ No

7. Give a complete description of all the premises to be used for the purpose of carrying on the business:

81 Bay State Rd

8. Are you a recognized agent of a motor vehicle manufacture? ☒ Yes ☐ No

If so, state name of manufacture: Mazda

9. Have you a signed contract as required by Section 58, Class 1? ☒ Yes ☐ No

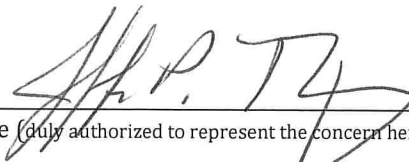
10. Have you ever applied for a license to deal in second hand motor vehicles or parts thereof: ☒ Yes ☐ No

If so, in what city/town: Worcester

Did you receive a license? ☒ Yes ☐ No For what year? 2018

11. Has any license issued to you in Massachusetts or any other state to deal in motor vehicles or parts thereof ever been suspended or revoked? ☐ Yes ☒ No

12. Has the applicant ever been convicted of or has charges pending that involved force, the threat of force, controlled substances, a sex-related offense, or any other crime that would bear upon his/her suitability? ☒ Yes ☐ No?


Signature (only authorized to represent the concern herein mentioned)

Sherry P. Manning
Print Name

9 Cobblestone Circle W. Andover MA 01845
Residence

RETURN TO:
SHERRI DALTON
TOWN ADMINISTRATOR'S OFFICE
ONE LAFAYETTE STREET, WAKEFIELD, MA 01880
sdalton@wakefield.ma.us

IMPORTANT

EVERY QUESTION MUST BE ANSWERED WITH FULL INFORMATION, AND FALSE STATEMENTS HEREIN MAY RESULT IN THE REJECTION OF YOUR APPLICATION OR THE SUBSEQUENT REVOCATION OF YOUR LICENSE IF ISSUED.

Note: If the applicant has held a license in the year prior to this application, he/she must file a duplicate of the application with the registrar. (See Sec. 59)



Town of Wakefield

APPLICATION FOR LICENSE

DATE: 10/22/19

Fee: \$100.00

THE COMMONWEALTH OF MASSACHUSETTS

APPLICATION FOR A LICENSE TO BUY, SELL, EXCHANGE OR ASSEMBLE SECOND HAND MOTOR VEHICLES OR PARTS THEREOF

I, the undersigned, duly authorized by the concern herein mentioned, hereby apply for a **CLASS II** license, to Buy, Sell, Exchange or Assemble second hand motor vehicles or parts thereof, in accordance with the provisions of Chapter 140 of the General Laws.

1. What is the name of the concern? New England Detroit Diesel-Allison, Inc.
DBA- VintAge Automotive
Business address of concern? 90 Bay State Rd, Wakefield, MA 01880

2. Is the above concern an individual, co-partnership, an association or a corporation?

Corporation

3. If an individual, state full name, residential address and phone number and email address: N/A

4. If a co-partnership, state full names, addresses and phone numbers and email addresses of the persons composing it: _____

N/A

5. If an association or a corporation, state full names, addresses and phone numbers and email addresses of the principal officers.

President: Jeffrey P. Manning, 9 Cobblestone Circle, N. Andover, MA 01845
Secretary: Same as Above (781-287-7211)
Treasurer: Same as Above

6. Are you engaged principally in the business of buying, selling or exchanging motor vehicles? ☒ Yes ☐ No

If so, is your principal business the sale of new motor vehicles? ☐ Yes ☒ No

Is your principal business the buying and selling of second hand motor vehicles? ☒ Yes ☐ No

Is your principal business that of a motor vehicle junk dealer? ☐ Yes ☒ No

7. Give a complete description of all the premises to be used for the purpose of carrying on the business:

A portion of the front of the Building

8. Are you a recognized agent of a motor vehicle manufacture? ☐ Yes ☒ No

If so, state name of manufacture: _____

9. Have you a signed contract as required by Section 58, Class 1? ☐ Yes ☒ No

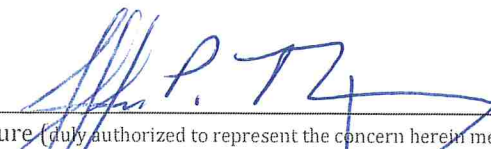
10. Have you ever applied for a license to deal in second hand motor vehicles or parts thereof: ☒ Yes ☐ No

If so, in what city/town: Wakefield, MA

Did you receive a license? ☒ Yes ☐ No For what year? 2019
Expires 1/1/20

11. Has any license issued to you in Massachusetts or any other state to deal in motor vehicles or parts thereof ever been suspended or revoked? ☐ Yes ☒ No

12. Has the applicant ever been convicted of or has charges pending that involved force, the threat of force, controlled substances, a sex-related offense, or any other crime that would bear upon his/her suitability? ☐ Yes ☒ No?


Signature (duly authorized to represent the concern herein mentioned)

Jeffrey P. Manning
Print Name

9 Cobblestone Circle
Residence

North Andover, MA 01845

RETURN TO:
SHERRI DALTON
TOWN ADMINISTRATOR'S OFFICE
ONE LAFAYETTE STREET, WAKEFIELD, MA 01880
sdalton@wakefield.ma.us

IMPORTANT

EVERY QUESTION MUST BE ANSWERED WITH FULL INFORMATION, AND FALSE STATEMENTS HEREIN MAY RESULT IN THE REJECTION OF YOUR APPLICATION OR THE SUBSEQUENT REVOCATION OF YOUR LICENSE IF ISSUED.

Note: If the applicant has held a license in the year prior to this application, he/she must file a duplicate of the application with the registrar. (See Sec. 59)



Town of Wakefield

APPLICATION FOR LICENSE

DATE: 11/15/19

Fee: \$100.00

THE COMMONWEALTH OF MASSACHUSETTS

APPLICATION FOR A LICENSE TO BUY, SELL, EXCHANGE OR ASSEMBLE SECOND HAND MOTOR VEHICLES OR PARTS THEREOF

I, the undersigned, duly authorized by the concern herein mentioned, hereby apply for a **CLASS I** license, to Buy, Sell, Exchange or Assemble second hand motor vehicles or parts thereof, in accordance with the provisions of Chapter 140 of the General Laws.

1. What is the name of the concern? Liberty Chevrolet Inc

Business address of concern? 90 Bay State Rd Wakefield MA 01880

2. Please state if the above concern is an individual, co-partnership, an association or a corporation? Corporation

3. If an individual, state full name, residential address and phone number and email address: N/A

4. If a co-partnership, state full names, addresses and phone numbers and email addresses of the persons composing it: N/A

5. If an association or a corporation, state full names, addresses and phone numbers and email addresses of the principal officers.

President: Charles E. Kimp8 6680 SE Harbor Circle Stuart FL 34956 781-287-7213

Secretary: Sebbrey P Manning 9 Cobblestone Circle N. Andover MA

Treasurer: Sebbrey P Manning 9 Cobblestone Circle N. Andover MA

6. Are you engaged principally in the business of buying, selling or exchanging motor vehicles? ☒ Yes ☐ No

If so, is your principal business the sale of new motor vehicles? ☒ Yes ☐ No

Is your principal business the buying and selling of second hand motor vehicles?
☒ Yes ☐ No

Is your principal business that of a motor vehicle junk dealer? ☐ Yes ☒ No

7. Give a complete description of all the premises to be used for the purpose of carrying on the business:

90 Bay State Rd

8. Are you a recognized agent of a motor vehicle manufacture? ☒ Yes ☐ No

If so, state name of manufacture: Chevrolet Motor Division

9. Have you a signed contract as required by Section 58, Class 1? ☒ Yes ☐ No

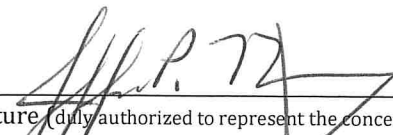
10. Have you ever applied for a license to deal in second hand motor vehicles or parts thereof: ☒ Yes ☐ No

If so, in what city/town: Wenhamfield

Did you receive a license? ☒ Yes ☐ No For what year? 2018

11. Has any license issued to you in Massachusetts or any other state to deal in motor vehicles or parts thereof ever been suspended or revoked? ☐ Yes ☒ No

12. Has the applicant ever been convicted of or has charges pending that involved force, the threat of force, controlled substances, a sex-related offense, or any other crime that would bear upon his/her suitability? ☐ Yes ☒ No?


Signature (duly authorized to represent the concern herein mentioned)

Sherry P. Manning
Print Name

9 Cobblestone Circle W. Andover MA 01845
Residence

RETURN TO:
SHERRI DALTON
TOWN ADMINISTRATOR'S OFFICE
ONE LAFAYETTE STREET, WAKEFIELD, MA 01880
sdalton@wakefield.ma.us

IMPORTANT

EVERY QUESTION MUST BE ANSWERED WITH FULL INFORMATION, AND FALSE STATEMENTS HEREIN MAY RESULT IN THE REJECTION OF YOUR APPLICATION OR THE SUBSEQUENT REVOCATION OF YOUR LICENSE IF ISSUED.

Note: If the applicant has held a license in the year prior to this application, he/she must file a duplicate of the application with the registrar. (See Sec. 59)



Town of Wakefield

APPLICATION FOR LICENSE

DATE: 11/15/19

Fee: \$100.00

THE COMMONWEALTH OF MASSACHUSETTS

APPLICATION FOR A LICENSE TO BUY, SELL, EXCHANGE OR ASSEMBLE SECOND HAND MOTOR VEHICLES OR PARTS THEREOF

I, the undersigned, duly authorized by the concern herein mentioned, hereby apply for a **CLASS I** license, to Buy, Sell, Exchange or Assemble second hand motor vehicles or parts thereof, in accordance with the provisions of Chapter 140 of the General Laws.

1. What is the name of the concern? Liberty Isuzu Truck

Business address of concern? 90 Bay State Rd Wakefield MA 01880

2. Please state if the above concern is an individual, co-partnership, an association or a corporation? Corporation

3. If an individual, state full name, residential address and phone number and email address: N/A

4. If a co-partnership, state full names, addresses and phone numbers and email addresses of the persons composing it: N/A

5. If an association or a corporation, state full names, addresses and phone numbers and email addresses of the principal officers.

President: Charles E. Knops 6680 SE Harbor Circle Stuart FL 34986 781-287-7213
Secretary: Seagrave P. Manning 9 Cabbleslane Circle W. Andover MA 01845 781-287-7213
Treasurer: Seagrave P. Manning 9 Cabbleslane Circle W. Andover MA 01845 781-287-7213

6. Are you engaged principally in the business of buying, selling or exchanging motor vehicles? ☒ Yes ☐ No

If so, is your principal business the sale of new motor vehicles? ☒ Yes ☐ No

Is your principal business the buying and selling of second hand motor vehicles? ☒ Yes ☐ No

Is your principal business that of a motor vehicle junk dealer? ☐ Yes ☒ No

7. Give a complete description of all the premises to be used for the purpose of carrying on the business:

90 Bay State Rd

8. Are you a recognized agent of a motor vehicle manufacture? ☒ Yes ☐ No

If so, state name of manufacture: Isuzu Motor

9. Have you a signed contract as required by Section 58, Class 1? ☒ Yes ☐ No

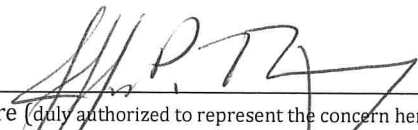
10. Have you ever applied for a license to deal in second hand motor vehicles or parts thereof: ☒ Yes ☐ No

If so, in what city/town: Worcester

Did you receive a license? ☒ Yes ☐ No For what year? 2018

11. Has any license issued to you in Massachusetts or any other state to deal in motor vehicles or parts thereof ever been suspended or revoked? ☐ Yes ☒ No

12. Has the applicant ever been convicted of or has charges pending that involved force, the threat of force, controlled substances, a sex-related offense, or any other crime that would bear upon his/her suitability? ☒ Yes ☐ No?



Signature (duly authorized to represent the concern herein mentioned)

Gregory P. Manning

Print Name

9 Cobblestone Circle W. Andover MA 01845

Residence

**RETURN TO:
SHERRI DALTON
TOWN ADMINISTRATOR'S OFFICE
ONE LAFAYETTE STREET, WAKEFIELD, MA 01880
sdalton@wakefield.ma.us**

IMPORTANT

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Note: If the applicant has held a license in the year prior to this application, he/she must file a duplicate of the application with the registrar. (See Sec. 59)



Town of Wakefield

APPLICATION FOR LICENSE

DATE: 11/15/19

Fee: \$100.00

THE COMMONWEALTH OF MASSACHUSETTS

APPLICATION FOR A LICENSE TO BUY, SELL, EXCHANGE OR ASSEMBLE SECOND HAND MOTOR VEHICLES OR PARTS THEREOF

I, the undersigned, duly authorized by the concern herein mentioned, hereby apply for a **CLASS I** license, to Buy, Sell, Exchange or Assemble second hand motor vehicles or parts thereof, in accordance with the provisions of Chapter 140 of the General Laws.

1. What is the name of the concern? mazda liberty Motors Inc

Business address of concern? 81 Bay State Rd Wakefield MA 01880

2. Please state if the above concern is an individual, co-partnership, an association or a corporation? Corporation

3. If an individual, state full name, residential address and phone number and email address: N/A

4. If a co-partnership, state full names, addresses and phone numbers and email addresses of the persons composing it: N/A

5. If an association or a corporation, state full names, addresses and phone numbers and email addresses of the principal officers.

President: Charles E. Knopf 6680 SE Harbor Circle Stuart FL 34986 781-287-7213
Secretary: Seabrey P Manning 9 Cobblestone Circle N. Andover MA 01845 781-287-7213
Treasurer: Seabrey P Manning 9 Cobblestone Circle N. Andover MA 01845 781-287-7213

6. Are you engaged principally in the business of buying, selling or exchanging motor vehicles? ☒ Yes ☐ No

If so, is your principal business the sale of new motor vehicles? ☒ Yes ☐ No

Is your principal business the buying and selling of second hand motor vehicles? ☒ Yes ☐ No

Is your principal business that of a motor vehicle junk dealer? ☒ Yes ☐ No

7. Give a complete description of all the premises to be used for the purpose of carrying on the business:

31 Bay State Rd

8. Are you a recognized agent of a motor vehicle manufacture? ☒ Yes ☐ No

If so, state name of manufacture: mazda

9. Have you a signed contract as required by Section 58, Class 1? ☒ Yes ☐ No

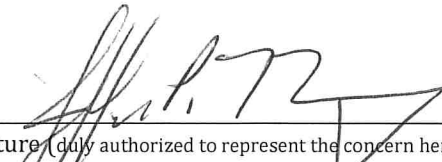
10. Have you ever applied for a license to deal in second hand motor vehicles or parts thereof: ☒ Yes ☐ No

If so, in what city/town: Worcester

Did you receive a license? ☒ Yes ☐ No For what year? 2018

11. Has any license issued to you in Massachusetts or any other state to deal in motor vehicles or parts thereof ever been suspended or revoked? ☐ Yes ☒ No

12. Has the applicant ever been convicted of or has charges pending that involved force, the threat of force, controlled substances, a sex-related offense, or any other crime that would bear upon his/her suitability? ☐ Yes ☒ No?



Signature (duly authorized to represent the concern herein mentioned)

Sherri P. Manning

Print Name

9 Cobblestone Circle W. Andover MA 01845

Residence

**RETURN TO:
SHERRI DALTON
TOWN ADMINISTRATOR'S OFFICE
ONE LAFAYETTE STREET, WAKEFIELD, MA 01880
sdalton@wakefield.ma.us**

IMPORTANT

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Note: If the applicant has held a license in the year prior to this application, he/she must file a duplicate of the application with the registrar. (See Sec. 59)

DEMAKIS LAW OFFICES, P. C.

GREGORY C. DEMAKIS
THOMAS C. DEMAKIS

SANDOR RABKIN
JOHN M. MOORADIAN

56 CENTRAL AVENUE
LYNN, MASSACHUSETTS 01901

TEL. (781) 595-3311
FAX (781) 592-4990
www.demakislaw.com

December 3, 2019

Sherri Dalton
Board of Selectmen
Town of Wakefield
1 Lafayette Street
Wakefield, MA 01880

VIA E-Mail

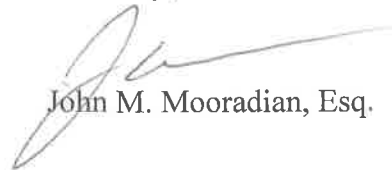
RE: Stock Transfer & Change of Officer/Director License Amendment/D&M Liquor Corp. d/b/a
S&M Liquors, 258 Water Street, Wakefield

Dear Ms. Dalton,

Per our conversation, I represent D&M Liquor Corp. d/b/a S&M Liquors and I will be filing a stock transfer liquor license amendment. Please allow this letter to serve as a request to be placed on the agenda for a public hearing on January 13, 2020. I will file the formal license application amendment within the next week.

If you have any questions, please do not hesitate to contact me at the above number or at jmooradian@demakislaw.com.

Sincerely,



John M. Mooradian, Esq.