

TOWN OF FALMOUTH, MAINE
RENEWAL APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE
July 1 through June 30

Business or Trade Name: <u>AMERICAN LEGION POST # 164</u>	
Business Address: <u>65 DEPOT ROAD, FALMOUTH, ME 04105</u>	
Business Location (Street Address): <u>65 DEPOT ROAD FALMOUTH</u>	
Name of Owner of Business: _____	
Address of Owner of Business: _____	
Manager at Establishment: <u>NELSON HAYNES</u> Manager's Phone: <u>781-4709</u>	
Contact Person: _____	Phone # _____
Business Phone: _____	Email address: _____
Brief Description of Business: <u>MEETING PLACE FOR</u> <u>AMERICAN LEGION POST</u>	
Have you received State approval? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach a copy)	
Check All That Apply:	
<input checked="" type="checkbox"/> Year Round <input type="checkbox"/> Seasonal (less than 6 months per year) <input type="checkbox"/> Catering <input type="checkbox"/> In-home	

FEES:

Check the proper category for the license requested:

- | | |
|--|--------------------------|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 _____ |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 _____ |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 _____ |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 _____ |

TOWN OF FALMOUTH, MAINE
RENEWAL APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE
July 1 through June 30

Business or Trade Name: Bernie's Foreside/ Mister Basil

Business Address: 204 US Route One Falmouth

Business Location (Street Address): (same)

Name of Owner of Business: Adam + Jennifer Shapiro

Address of Owner of Business: 7 Knight Hill Rd, Falmouth

Manager at Establishment: Adam Shapiro Manager's Phone: 207-415-6200

Contact Person: Jennifer Shapiro Phone # 838-5947

Business Phone: 781-7817 Email address: jennifer.r.shapiro@gmail.com

Brief Description of Business: restaurant/ basil shop

Have you received State approval? Yes No
(Attach a copy)

Check All That Apply:

Year Round Seasonal (less than 6 months per year) Catering In-home

FEES:

Check the proper category for the license requested:

- (a) Restaurant or victualer NOT serving malt beverages on the premises and seating capacity of less than 50. \$25.00 _____
- (b) Same as (a) except where the total seating capacity is more than 50. \$50.00 _____
- (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. \$25.00 _____
- (d) Same as (c) except where the total seating capacity is more than 50. \$50.00 _____
- (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. \$50.00 _____
- (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. \$25.00 _____

TOWN OF FALMOUTH, MAINE
RENEWAL APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE
July 1 through June 30

Business or Trade Name: Circle K 7061

Business Address: 65 Grey Road

Business Location (Street Address): 65 Grey Road

Name of Owner of Business: Macis Convenience Stores LLC

Address of Owner of Business: PO Box 347, Columbus IN 47202

Manager at Establishment: Marney Yencuszawski Manager's Phone: —

Contact Person: Carole Owings Phone # 812-379-9227 X1347

Business Phone: 207-878-5505 Email address: cowings@circlek.com

Brief Description of Business: Convenience store, gasoline sales

Have you received State approval? Yes No
 (Attach a copy)

Check All That Apply:

(Year Round () Seasonal (less than 6 months per year) () Catering () In-home)

FEES:

Check the proper category for the license requested:

- (a) Restaurant or victualer NOT serving malt beverages on the premises and seating capacity of less than 50. \$25.00 _____
- (b) Same as (a) except where the total seating capacity is more than 50. \$50.00 _____
- (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. \$25.00 _____
- (d) Same as (c) except where the total seating capacity is more than 50. \$50.00 _____
- (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. \$50.00 _____
- (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. \$25.00

TOWN OF FALMOUTH, MAINE
RENEWAL APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE
July 1 through June 30

Business or Trade Name: <u>Dockside Grill</u>	
Business Address: <u>215 Foreside Road Falmouth ME</u>	
Business Location (Street Address): <u>215 Foreside Road Falmouth ME</u>	
Name of Owner of Business: <u>215 Foreside^{Road} LLC</u>	
Address of Owner of Business: <u>215 Foreside Road Falmouth ME</u>	
Manager at Establishment: <u>Andrea Casanueva</u> Manager's Phone: <u>207 747 5274</u>	
Contact Person: <u>Andrea Casanueva</u> Phone # <u>207 747 5274</u>	
Business Phone: <u>207 747 5274</u> Email address: <u>andrea@thedocksidegrill.com</u>	
Brief Description of Business: <u>Full service restaurant serving lunch, dinner & sunday brunch</u>	
Have you received State approval? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Attach a copy)	
Check All That Apply:	
<input checked="" type="checkbox"/> Year Round <input type="checkbox"/> Seasonal (less than 6 months per year) <input type="checkbox"/> Catering <input type="checkbox"/> In-home	

FEES:

Check the proper category for the license requested:

- | | |
|--|------------------------|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 _____ |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 _____ |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 <u>X</u> _____ |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 _____ |

TOWN OF FALMOUTH, MAINE
RENEWAL APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE
July 1 through June 30

Business or Trade Name: <u>Dockside Provisions</u>			
Business Address: <u>215 Foreside Rd, Falmouth, ME 04105</u>			
Business Location (Street Address): <u>SAA</u>			
Name of Owner of Business: <u>John Marr</u>			
Address of Owner of Business: <u>5 Orchard St Falmouth 04105</u>			
Manager at Establishment: <u>Brent Sullivan</u>	Manager's Phone: <u>207-781-5110</u>		
Contact Person: <u>Gayle Garber</u>	Phone # <u>207-781-5110</u>		
Business Phone: <u>207-781-5110</u>	Email address: <u>ACCOUNTING@handyboat.com</u>		
Brief Description of Business: <u>Small Dockside store w/ clothing, Sunaries, misc boat supplies B&W. -></u>			
Have you received State approval? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Attach a copy)			
Check All That Apply:			
<input type="checkbox"/> Year Round	<input checked="" type="checkbox"/> Seasonal (less than 6 months per year)	<input type="checkbox"/> Catering	<input type="checkbox"/> In-home

FEES:

Check the proper category for the license requested:

- | | |
|--|---|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 _____ |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 _____ |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 _____ |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 <input checked="" type="checkbox"/> |

TOWN OF FALMOUTH, MAINE
RENEWAL APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE
July 1 through June 30

Business or Trade Name: <u>Saturn Associates dba Dunkin Donuts</u>	
Business Address: <u>219 US RT1, Falmouth, ME 04105</u>	
Business Location (Street Address): <u>219 US RT1, Falmouth ME 04105</u>	
Name of Owner of Business: <u>Edward Wolak</u>	
Address of Owner of Business: <u>65 Gray Rd. Falmouth, ME 04105</u>	
Manager at Establishment: <u>Albert Hutchins</u>	Manager's Phone: <u>207-781-2634</u>
Contact Person: <u>Dave Brooks</u>	Phone #: <u>207-650-8839</u>
Business Phone: <u>207-797-7600</u>	Email address: <u>fran.brown@maine.rr.com</u>
Brief Description of Business: <u>Coffee, Donuts</u>	
Have you received State approval? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Attach a copy)	
Check All That Apply:	
<input checked="" type="checkbox"/> Year Round <input type="checkbox"/> Seasonal (less than 6 months per year) <input type="checkbox"/> Catering <input type="checkbox"/> In-home	

FEES:

Check the proper category for the license requested:

- | | |
|--|---|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 <input checked="" type="checkbox"/> |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 <input type="checkbox"/> |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 <input type="checkbox"/> |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 <input type="checkbox"/> |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 <input type="checkbox"/> |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 <input type="checkbox"/> |

TOWN OF FALMOUTH, MAINE
RENEWAL APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE
July 1 through June 30

Business or Trade Name: <u>Saturn Associates, dba Dunkin Donuts</u>	
Business Address: <u>65 Gray Rd, Falmouth, ME 04105</u>	
Business Location (Street Address): <u>65 Gray Rd, Falmouth, ME 04105</u>	
Name of Owner of Business: <u>Edward Wolak</u>	
Address of Owner of Business: <u>65 Gray Rd, Falmouth ME 04105</u>	
Manager at Establishment: <u>Andrea Thyer</u>	Manager's Phone: <u>207-797-3303</u>
Contact Person: <u>Dave Brooks</u>	Phone # <u>207-650-8839</u>
Business Phone: <u>207-797-7600</u>	Email address: <u>franbrown@maine.rr.com</u>
Brief Description of Business: <u>Coffee, Donuts</u>	
Have you received State approval? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Attach a copy)	
Check All That Apply:	
<input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> Seasonal (less than 6 months per year)
<input type="checkbox"/> Catering	<input type="checkbox"/> In-home

FEES:

Check the proper category for the license requested:

- | | |
|--|---|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 <input checked="" type="checkbox"/> |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 <input type="checkbox"/> |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 <input type="checkbox"/> |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 <input type="checkbox"/> |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 <input type="checkbox"/> |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 <input type="checkbox"/> |

TOWN OF FALMOUTH, MAINE
RENEWAL APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE
July 1 through June 30

Business or Trade Name: European Bakery Inc.
Business Address: 395 US Rte 1 Falmouth ME 04105
Business Location (Street Address): same
Name of Owner of Business: Helen + Emil Budri
Address of Owner of Business: 11 Country Lane Falmouth ME 04105
Manager at Establishment: Emil Manager's Phone: 781-3541
Contact Person: Emil Phone # 781 3541
Business Phone: 781 3541 Email address: hbudri63@gmail.com
Brief Description of Business: Retail Bakery

Have you received State approval? Yes No
(Attach a copy)

Check All That Apply:

Year Round () Seasonal (less than 6 months per year) () Catering () In-home

FEES:

Check the proper category for the license requested:

- (a) Restaurant or victualer NOT serving malt beverages on the premises and seating capacity of less than 50. \$25.00 _____
- (b) Same as (a) except where the total seating capacity is more than 50. \$50.00 _____
- (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. \$25.00 _____
- (d) Same as (c) except where the total seating capacity is more than 50. \$50.00 _____
- (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. \$50.00 _____
- (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. \$25.00 25.-

TOWN OF FALMOUTH, MAINE
RENEWAL APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE
July 1 through June 30

Business or Trade Name: The Episcopal Church of Saint Mary
Business Address: 43 Foreside Rd., Falmouth, ME
Business Location (Street Address): same
Name of Owner of Business: _____
Address of Owner of Business: _____
Manager at Establishment: Rev. Nathan Ferrell **Manager's Phone:** 781-3366
Contact Person: Beth Shaw **Phone #** 781-3366
Business Phone: 781-3366 **Email address:** smary@smary-org
Brief Description of Business: Episcopal Church - Religious

Have you received State approval? **Yes** **No**
(Attach a copy)

Check All That Apply:

Year Round **Seasonal (less than 6 months per year)** **Catering** **In-home**

FEES:

Check the proper category for the license requested:

- (a) Restaurant or victualer NOT serving malt beverages on the premises and seating capacity of less than 50. \$25.00 _____
- (b) Same as (a) except where the total seating capacity is more than 50. \$50.00 _____
- (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. \$25.00 _____
- (d) Same as (c) except where the total seating capacity is more than 50. \$50.00 _____
- (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. \$50.00 _____
- (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. \$25.00 _____

*WAWW
see pg 2*

TOWN OF FALMOUTH, MAINE
RENEWAL APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE
July 1 through June 30

Business or Trade Name: Falmouth By The Sea

Business Address: 191 Foreside Road Falmouth, ME 04105

Business Location (Street Address): 191 Foreside Rd Falmouth ME 04105

Name of Owner of Business: First Atlantic HealthCare

Address of Owner of Business: _____

Manager at Establishment: Leslie Currier **Manager's Phone:** 781-4714 ^{ext 246}

Contact Person: Leslie Currier **Phone #** same

Business Phone: same **Email address:** _____

Brief Description of Business: skilled nursing & assisted living facility

Have you received State approval? Yes No
(Attach a copy)

Check All That Apply:

Year Round Seasonal (less than 6 months per year) Catering In-home

FEES:

Check the proper category for the license requested:

- | | |
|--|-----------------------------------|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 _____ |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 <u>X</u> <i>erroneous</i> |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 _____ |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 _____ |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 _____ |

TOWN OF FALMOUTH, MAINE
RENEWAL APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE
July 1 through June 30

Business or Trade Name: <u>Falmouth car wash #01003</u>	
Business Address: <u>265 US Route 1</u>	
Business Location (Street Address): <u>265 US Route 1</u>	
Name of Owner of Business: <u>Nounia Energy Retail Maine, Inc.</u>	
Address of Owner of Business: <u>326 Clark Street Worcester, MA 01606</u>	
Manager at Establishment: <u>Rick Plaisted</u>	Manager's Phone: <u>403 767 0236</u>
Contact Person: <u>Rick Plaisted</u>	Phone # <u>403 767 0236</u>
Business Phone: <u>207-781-5019</u>	Email address: <u>permits@nouriaenergy.com</u>
Brief Description of Business: <u>gas station / walk-in kiosk, self-serve / full serve car wash, vending</u>	
Have you received State approval? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Attach a copy)	
Check All That Apply:	
<input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> Seasonal (less than 6 months per year)
<input type="checkbox"/> Catering	<input type="checkbox"/> In-home

FEES:

Check the proper category for the license requested:

- | | |
|--|------------------|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 <u>X</u> |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 _____ |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 _____ |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 _____ |

TOWN OF FALMOUTH, MAINE
RENEWAL APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE
July 1 through June 30

Business or Trade Name: <u>FALMOUTH CONGREGATIONAL Church U.C.C.</u>			
Business Address: <u>267 FALMOUTH Rd. FALMOUTH, ME 04105</u>			
Business Location (Street Address): <u>267 FALMOUTH Rd. FALMOUTH, ME</u>			
Name of Owner of Business: _____			
Address of Owner of Business: <u>267 FALMOUTH Rd. FALMOUTH, ME</u>			
Manager at Establishment: <u>JACK DAVIS</u>	Manager's Phone: _____		
Contact Person: <u>Gini MEDFORD</u>	Phone # <u>207-781-3413</u>		
Business Phone: <u>207-781-3413</u>	Email address: <u>fcc desk@MAINE.TR.R.COM</u>		
Brief Description of Business: <u>Church</u>			
Have you received State approval? _____ Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> <i>NAT REQUIRED BY THE STATE</i>			
(Attach a copy)			
Check All That Apply:			
<input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> Seasonal (less than 6 months per year)	<input type="checkbox"/> Catering	<input type="checkbox"/> In-home

FEES:

Check the proper category for the license requested:

- | | |
|--|---------------|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 _____ |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 _____ |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 _____ |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 _____ |

POOL

TOWN OF FALMOUTH, MAINE
RENEWAL APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE
July 1 through June 30

Business or Trade Name: Falmouth Country Club

Business Address: 387 Whiskey Rd, Bath, ME 04530

Business Location (Street Address): 1 Congressional Dr, Falmouth, ME 04105

Name of Owner of Business: Laurel Harris + Nancy Harris

Address of Owner of Business: 387 Whiskey Rd, Bath, ME 04530

Manager at Establishment: Jason Harris **Manager's Phone:** 207-878-2864

Contact Person: Laurel Harris **Phone #** 207-442-8725

Business Phone: 207-878-2864 **Email address:** laurel@harrisgolfonline.com

Brief Description of Business: Private Golf Club, Pool snack bar

Have you received State approval? Yes No
(Attach a copy)

Check All That Apply:
 Year Round Seasonal (less than 6 months per year) Catering In-home

FEES:

Check the proper category for the license requested:

- (a) Restaurant or victualer NOT serving malt beverages on the premises and seating capacity of less than 50. \$25.00 _____
- (b) Same as (a) except where the total seating capacity is more than 50. \$50.00 _____
- (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. \$25.00 _____
- (d) Same as (c) except where the total seating capacity is more than 50. \$50.00 _____
- (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. \$50.00 X
- (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. \$25.00 _____

Restaurant

TOWN OF FALMOUTH, MAINE
RENEWAL APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE
July 1 through June 30

Business or Trade Name: Falmouth Country Club

Business Address: 387 Whiskey Road, Bath, ME 04530

Business Location (Street Address): 1 Congressional Dr. Falmouth, ME

Name of Owner of Business: Laurel + Nancy Harris

Address of Owner of Business: 387 Whiskey Rd Bath ME 04530

Manager at Establishment: Jason Harris Manager's Phone: 207-878-2804

Contact Person: Laurel Harris Phone # 207-442-8725

Business Phone: 207-878-2804 Email address: laurel@harrisgolfonline.com

Brief Description of Business: Golf Course - Restaurant

Have you received State approval? Yes No
(Attach a copy)

Check All That Apply:
() Year Round () Seasonal (less than 6 months per year) () Catering () In-home

FEES:

Check the proper category for the license requested:

- (a) Restaurant or victualer NOT serving malt beverages on the premises and seating capacity of less than 50. \$25.00 _____
- (b) Same as (a) except where the total seating capacity is more than 50. \$50.00 _____
- (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. \$25.00 _____
- (d) Same as (c) except where the total seating capacity is more than 50. \$50.00 _____
- (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. \$50.00 X
- (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. \$25.00 _____

TOWN OF FALMOUTH, MAINE
RENEWAL APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE
July 1 through June 30

Business or Trade Name: <u>Falmouth Hi Mart #01004</u>	
Business Address: <u>264 US Route 1</u>	
Business Location (Street Address): <u>264 US Route 1</u>	
Name of Owner of Business: <u>Nouria Energy Retail Maine, Inc.</u>	
Address of Owner of Business: <u>326 Clark Street Worcester, MA 01606</u>	
Manager at Establishment: <u>Rick Plaisted</u>	Manager's Phone: <u>6037670236</u>
Contact Person: <u>Rick Plaisted</u>	Phone # <u>6037670236</u>
Business Phone: <u>2077814433</u>	Email address: <u>permits@nouriaenergy.com</u>
Brief Description of Business: <u>gas station / convenience store w/a coffee bar</u>	
Have you received State approval? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Attach a copy)	
Check All That Apply:	
<input checked="" type="checkbox"/> Year Round () Seasonal (less than 6 months per year) () Catering () In-home	

FEES:

Check the proper category for the license requested:

- | | |
|--|------------------|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 <u>X</u> |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 _____ |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 _____ |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 _____ |

TOWN OF FALMOUTH, MAINE
RENEWAL APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE
July 1 through June 30

Business or Trade Name: Falmouth House of Pizza

Business Address: 251 US ROUTE 1 # 11

Business Location (Street Address): Falmouth shopping Center

Name of Owner of Business: Sotirios Sotropoulos

Address of Owner of Business: 44 Stapleford Dr. Falmouth, ME

Manager at Establishment: George Sotropoulos Manager's Phone: 207-400-4199

Contact Person: Nick Sotropoulos Phone # _____

Business Phone: 781-5251 Email address: Gsotirooulos@hotmail.com

Brief Description of Business: PIZZERIA RESTAURANT

Have you received State approval? Yes No
 (Attach a copy)

Check All That Apply:

Year Round () Seasonal (less than 6 months per year) () Catering () In-home

FEES:

Check the proper category for the license requested:

- | | |
|--|------------------------|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 _____ |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 _____ |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 <u>✓</u> _____ |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 _____ |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 _____ |

TOWN OF FALMOUTH, MAINE
RENEWAL APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE
July 1 through June 30

Business or Trade Name: <u>Falmouth Little League</u>			
Business Address: <u>c/o Kevin G. Grimes 18 Rockaway Road Falmouth</u>			
Business Location (Street Address): <u>Depot Street - Legion Field Complex</u>			
Name of Owner of Business: <u>Falmouth Little League</u>			
Address of Owner of Business: <u>c/o Kevin Grimes, Peridot 18 Rockaway Rd Falmouth</u>			
Manager at Establishment: <u>Kevin Grimes</u>	Manager's Phone: <u>468-5230</u>		
Contact Person: <u>Kevin Grimes</u>	Phone # <u>468-5230</u>		
Business Phone: <u>468-5230</u>	Email address: <u>kqglaw@reddang.net</u>		
Brief Description of Business: <u>snack shack at Legion Field</u> <u>selling candy, snacks, soda & ice hot dogs</u>			
Have you received State approval? <input type="checkbox"/> Yes <input type="checkbox"/> No (Attach a copy)			
Check All That Apply:			
<input type="checkbox"/> Year Round	<input checked="" type="checkbox"/> Seasonal (less than 6 months per year)	<input type="checkbox"/> Catering	<input type="checkbox"/> In-home

FEES:

Check the proper category for the license requested:

- | | |
|--|------------------|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 <u>2</u> |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 _____ |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 _____ |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 _____ |

TOWN OF FALMOUTH, MAINE
RENEWAL APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE
July 1 through June 30

Business or Trade Name: Falmouth Schools Food Service

Business Address: 74 Woodville Road, Falmouth, Maine 04105

Business Location (Street Address): 52 & 58 & 74 Woodville Road, Falmouth, ME 04105

Name of Owner of Business: Falmouth School Department

Address of Owner of Business: 51 Woodville Road, Falmouth, ME 04105

Manager at Establishment: Kerri Demers, Louise Tamaro, Tracey Thibodeau
Manager's Phone: _____

Contact Person: Martha Poliquin Phone 207-781-7429, ext 5700

Business Phone: 207-71-7429 Email address: mpoliquin@falmouthschools.org

Brief Description of Business: Public school nutrition program

Have you received State approval? Yes No

(Attach a copy)

Check All That Apply:

Year Round Seasonal (less than 6 months per year) Catering In-home

FEES:

Check the proper category for the license requested:

- | | |
|--|---------------|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 _____ |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 _____ |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 _____ |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 _____ |

TOWN OF FALMOUTH, MAINE
RENEWAL APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE
July 1 through June 30

Business or Trade Name: Family Ice Center
 Business Address: PO Box 6127 Falmouth, ME 04105
 Business Location (Street Address): 20 Hot Trick Drive
 Name of Owner of Business: Board of Directors
 Address of Owner of Business: —
 Manager at Establishment: Josh Brainerd Manager's Phone: 781-4200
 Contact Person: Luane Howard Phone # 781-4200
 Business Phone: 781-4200 Email address: luane@familyice.org
 Brief Description of Business: non profit ice arena

Have you received State approval? Yes No
 (Attach a copy)

Check All That Apply:

() Year Round () Seasonal (less than 6 months per year) () Catering () In-home

We made all necessary changes + updates for inspector to sign off

FEES:

Check the proper category for the license requested:

- | | |
|--|--------------------------------|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 <u> </u> |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 <u> </u> |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 <u> </u> |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 <u> </u> |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 <u> </u> |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 <u> </u> |

TOWN OF FALMOUTH, MAINE
RENEWAL APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE
July 1 through June 30

Business or Trade Name: <u>FORESIDE COMMUNITY CHURCH</u>	
Business Address: <u>340 FORESIDE ROAD</u>	
Business Location (Street Address): _____	
Name of Owner of Business: _____	
Address of Owner of Business: _____	
Manager at Establishment: <u>CHRISTINA SUKAPZ-LIBBY</u>	Manager's Phone: <u>781-5880</u>
Contact Person: <u>SAM</u>	Phone # _____
Business Phone: _____	Email address: <u>C5LIBBY@FORESIDE CHURCH.ORG</u>
Brief Description of Business: <u>CHURCH</u>	

Have you received State approval? _____ Yes _____ No	
(Attach a copy)	
Check All That Apply:	
<input type="checkbox"/> Year Round <input type="checkbox"/> Seasonal (less than 6 months per year) <input type="checkbox"/> Catering <input type="checkbox"/> In-home	

FEES:

Check the proper category for the license requested:

- | | |
|--|------------------|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 <u>✓</u> |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 _____ |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 _____ |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 _____ |

TOWN OF FALMOUTH, MAINE
RENEWAL APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE
July 1 through June 30

Business or Trade Name: <u>Foreside Tavern</u>	
Business Address: <u>270 US Rte #1</u>	
Business Location (Street Address): <u>"</u>	
Name of Owner of Business: <u>Anne Verrill</u>	
Address of Owner of Business: <u>158 Woodville Rd.</u>	
Manager at Establishment: <u>Kae Collins/Anne Verrill</u> Manager's Phone: <u>781-4255</u>	
Contact Person: <u>Anne Verrill</u> Phone # <u>781-4255</u>	
Business Phone: <u>781-4255</u> Email address: <u>averrill@theforesidedavern.com</u>	
Brief Description of Business: <u>Restaurant</u>	
Have you received State approval? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Attach a copy)	
Check All That Apply:	
<input checked="" type="checkbox"/> Year Round <input type="checkbox"/> Seasonal (less than 6 months per year) <input type="checkbox"/> Catering <input type="checkbox"/> In-home	

FEES:

Check the proper category for the license requested:

- | | |
|--|---|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 _____ |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 _____ |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 <input checked="" type="checkbox"/> _____ |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 _____ |

TOWN OF FALMOUTH, MAINE
RENEWAL APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE
July 1 through June 30

Business or Trade Name: Grab a Byte Cafe
Business Address: 370 US Route 1
Business Location (Street Address): _____
Name of Owner of Business: Tyler Technologies
Address of Owner of Business: 1 Tyler Drive Yarmouth ME
Manager at Establishment: Ray Ross Manager's Phone: 518-4125
Contact Person: same Phone #: same
Business Phone: _____ Email address: Ray.Ross@tylertech.com
Brief Description of Business: Cafe for employees

Have you received State approval? Yes No
(Attach a copy)

Check All That Apply:

Year Round Seasonal (less than 6 months per year) Catering In-home

FEES:

Check the proper category for the license requested:

- | | |
|--|------------------------|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 _____ |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 <u>X</u> _____ |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 _____ |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 _____ |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 _____ |

T 0037299
For the next 2 pages

TOWN OF FALMOUTH, MAINE
RENEWAL APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE
July 1 through June 30

Business or Trade Name: HANNAFORD Food & DRUG #8332

Business Address: 65 GRAY ROAD, FALMOUTH, ME 04105

Business Location (Street Address): _____

Name of Owner of Business: HANNAFORD PROS. Co., LLC

Address of Owner of Business: 145 PLEASANT HILL Rd, Scarborough, ME 04574

Manager at Establishment: Doug Mercier **Manager's Phone:** 878-0050

Contact Person: JANE GOULET **Phone #** 885-3321

Business Phone: 878-0500 **Email address:** JANE.GOULET@delhaize.com

Brief Description of Business: RETAIL GROCERY STORE SELLING GROCERIES + misc. items TO THE PUBLIC + ALSO HAS A PHARMACY.

Have you received State approval? Yes No
(Attach a copy)

Check All That Apply:
 Year Round () Seasonal (less than 6 months per year) () Catering () In-home

FEES:

Check the proper category for the license requested:

- (a) Restaurant or victualer NOT serving malt beverages on the premises and seating capacity of less than 50. \$25.00 _____
- (b) Same as (a) except where the total seating capacity is more than 50. \$50.00 _____
- (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. \$25.00 _____
- (d) Same as (c) except where the total seating capacity is more than 50. \$50.00 _____
- (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. \$50.00 _____
- (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. \$25.00 _____

TOWN OF FALMOUTH, MAINE
RENEWAL APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE
July 1 through June 30

Business or Trade Name: HARMON'S LUNCH

Business Address: 144 Gray Rd.

Business Location (Street Address): Same

Name of Owner of Business: Perce Wokmen

Address of Owner of Business: 200 Brook St., Westbrook

Manager at Establishment: Same Manager's Phone: 857-1043

Contact Person: Same Phone # _____

Business Phone: 797-9057 Email address: _____

Brief Description of Business: Hamburger RESTAURANT

Have you received State approval? Yes No
 (Attach a copy)

Check All That Apply:

Year Round () Seasonal (less than 6 months per year) () Catering () In-home

FEES:

Check the proper category for the license requested:

- | | |
|--|---|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 <input checked="" type="checkbox"/> |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 _____ |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 _____ |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 _____ |

TOWN OF FALMOUTH, MAINE
RENEWAL APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE
July 1 through June 30

Business or Trade Name: Parish of the Holy Eucharist - Holy Martyrs Church
Business Address: 266 Foreside Rd Falmouth ME
Business Location (Street Address): same
Name of Owner of Business: Parish of the Holy Eucharist
Address of Owner of Business: same
Manager at Establishment: FR. Daniel Greenleaf **Manager's Phone:** 847-6890
Contact Person: FR. Daniel Greenleaf **Phone #** 847-6890
Business Phone: same **Email address:** daniel.greenleaf@portlanddiocese.org
Brief Description of Business: Catholic Church

Have you received State approval? Yes No
(Attach a copy)

Check All That Apply:

Year Round Seasonal (less than 6 months per year) Catering In-home

FEES:

Check the proper category for the license requested:

- (a) Restaurant or victualer NOT serving malt beverages on the premises and seating capacity of less than 50. \$25.00 _____
- (b) Same as (a) except where the total seating capacity is more than 50. \$50.00 _____
- (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. \$25.00 _____
- (d) Same as (c) except where the total seating capacity is more than 50. \$50.00 _____
- (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. \$50.00 _____
- (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. \$25.00 _____

TOWN OF FALMOUTH, MAINE
RENEWAL APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE
July 1 through June 30

Business or Trade Name: <u>Hugs Italian Restaurant</u>	
Business Address: <u>204 US Rt 1 Falmouth Me 04105</u>	
Business Location (Street Address): <u>204 US Rt 1 Falmouth Me 04105</u>	
Name of Owner of Business: <u>Beth McKenney</u>	
Address of Owner of Business: <u>20 Alpine Drive Falmouth Me 04105</u>	
Manager at Establishment: _____	Manager's Phone: _____
Contact Person: <u>Beth McKenney</u>	Phone # <u>2074914242</u>
Business Phone: <u>2077813342</u>	Email address: <u>hugsitalian@hotmail.com</u>
Brief Description of Business: <u>Casual fine dining Dinner only</u>	
Have you received State approval? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Attach a copy)	
Check All That Apply:	
<input checked="" type="checkbox"/> Year Round <input type="checkbox"/> Seasonal (less than 6 months per year) <input type="checkbox"/> Catering <input type="checkbox"/> In-home	

FEES:

Check the proper category for the license requested:

- | | |
|--|------------------|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 _____ |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 _____ |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 <u>X</u> |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 _____ |

TOWN OF FALMOUTH, MAINE
RENEWAL APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE
July 1 through June 30

Business or Trade Name: Leavitt & Sons

Business Address: 37 Depot

Business Location (Street Address): same

Name of Owner of Business: Peter Leavitt

Address of Owner of Business: 74 Undersand Rd Falmouth

Manager at Establishment: _____ **Manager's Phone:** _____

Contact Person: Peter Leavitt **Phone #** 838-0792

Business Phone: 701-3753 **Email address:** _____

Brief Description of Business: Deli

Have you received State approval? **Yes** _____ **No** _____
(Attach a copy)

Check All That Apply:

Year Round () Seasonal (less than 6 months per year) () Catering () In-home

FEES:

Check the proper category for the license requested:

- | | |
|--|----------------------|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 <u> X </u> |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 _____ |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 _____ |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 <u> X </u> |

TOWN OF FALMOUTH, MAINE
RENEWAL APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE
July 1 through June 30

Business or Trade Name: Liz's Kitchen (Liz's Personal Chef Service, LLC)

Business Address: 12 Grist Mill Rd, Falmouth, ME 04105

Business Location (Street Address): same

Name of Owner of Business: Elizabeth Warfel

Address of Owner of Business: same as above

Manager at Establishment: Elizabeth Warfel **Manager's Phone:** 319-3889

Contact Person: Elizabeth Warfel **Phone #** 319-3889

Business Phone: 319-3889 **Email address:** Liz@LizsKitchenME.com

Brief Description of Business: I prepare + deliver meals on a weekly basis to customers in the Greater Portland area

Have you received State approval? Yes No
(Attach a copy)

Check All That Apply:

Year Round () Seasonal (less than 6 months per year) () Catering () In-home

FEES:

Check the proper category for the license requested:

- | | |
|--|------------------|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 <u>X</u> |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 _____ |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 _____ |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 _____ |