

Town of Falmouth

Application for a New Food Service Establishment Without Alcoholic Beverages

Please check one: (Corporation/ LLC/ Non-profit org.) (Sole Proprietor) (Partnership)

Business Name (d/b/a): Milly's Skillet
Phone: (207) 340-0026
Location Address: Smith Farm
Mailing Address: Rte 100 Falmouth, ME
Contact Person: Molly Ritzo **Phone:** (207) 340-0026
Contact Email: mollyritz@yahoo.com
Manager of Establishment: _____ **Phone:** _____
Owner of Premises (landlord): Harbor View Properties
Address of Premises Owner: _____

Is any principal officer under the age of 18? _____ Yes No
Have applicant, partners, associates, or corporate officers ever been *arrested, indicted, or convicted* for any violation of law? _____ If yes, please explain:

SOLE PROPRIETOR / PARTNERSHIP INFORMATION: (if corporation, leave blank)

Name of Owner(s): _____ DOB _____ Residence Address _____
Name of Owner(s): _____ DOB _____ Residence Address _____
Name of Owner(s): _____ DOB _____ Residence Address _____

CORPORATE / LLC / NON-PROFIT ORGANIZATION APPLICANTS: (if sole proprietor, leave blank)

Corporation Name: Milly's Skillet
Corporation Mailing Address: 3 Wilton Ln Cape Elizabeth, ME 04107
Contact Person: Molly Ritzo **Phone:** (207) 340-0026

PRINCIPAL OFFICERS: (if more space is needed, please attach a separate page)

Name _____ Title _____ DOB _____ Residence Address _____
Name _____ Title _____ DOB _____ Residence Address _____
Name _____ Title _____ DOB _____ Residence Address _____
Name _____ Title _____ DOB _____ Residence Address _____
Name _____ Title _____ DOB _____ Residence Address _____

Type of Food Served:
soup / salads, sandwiches

Hours and Days of operation: Tues thru Saturday 8 am - 6 pm

Will you have outside dining? Yes No . If yes, please indicate location on diagram.

What is your targeted opening date? : Labor Day Weekend or Sept 11

Applicant, by signature below, agrees to abide by all laws, orders, ordinances, rules and regulations governing the above licensee and further agrees that any misstatement of material fact may result in refusal of license or revocation if one has been granted. Applicant agrees that all taxes and accounts pertaining to the premises will be paid prior to issuance of the license. It is understood that this and any application(s) shall become public record and the applicant(s) hereby waive(s) any rights to privacy with respect thereto.

I/We, hereby authorize the release of any criminal history record information to the Town of Falmouth, Clerk's Office or licensing authority. I/We, hereby waive any rights to privacy with respect thereto.

Signature Molly Rip Title owner
Date 5/29/15

Check the proper category for the license requested:

- (a) Restaurant or victualer seating capacity is less than 50. \$25.00 _____
- (b) Restaurant or victualer seating capacity is more than 50. \$50.00 _____
- (c) 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 _____
- (d) Same as (f) except where the total area of the establishment is more than 10,000 square feet. \$50.00 _____
- (e) Establishments operated by non-profit organizations. \$25.00 _____
- (f) Cart or Mobile Establishment \$25.00

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

ADMINISTRATION:

Approval granted by the Town Council of Falmouth, Maine at their meeting held on _____
_____ at the Falmouth Town Hall.

7/1/15

To the Town of Falmouth,

I am interested in opening a food truck at the Smith Farm on Rte 100. I will be serving a small breakfast offering, sandwiches, soups, salads, and dinners to go. I will be using locally grown produce and meats whenever possible and small local businesses such as Mainly Grains Bakery in South Portland, Free Range fish, and Battershaw farms.

Please come and check us out!
The Maine Mountain Trader

Sincerely,
Molly Ritzo
Molly Ritzo