

NOT YOUR AVERAGE JOE'S

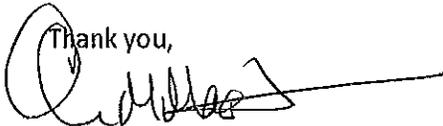
May 7, 2015

Board of Selectman
Town of Arlington
730 Mass Avenue
Arlington, MA 02476

Dear Board,

Enclosed please find the ABCC application to for the change in manager for Not Your Average Joe's located at 645 Mass. Ave. Please let me know if you need any additional information to process this request. I can be reached at cmacdonald@nyajoes.com or 774.213.2949.

Thank you,



Christine MacDonald

20 GRAND AVE SUITE 300
MILTON MASSACHUSETTS
774 213 2949

WWW.NYAJ.COM



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

Print Form

RETAIL ALCOHOLIC BEVERAGES LICENSE APPLICATION
 MONETARY TRANSMITTAL FORM

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

ECRT CODE: RETA

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

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

CHECK NUMBER

IF USED EPAY, CONFIRMATION NUMBER

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

LICENSEE NAME

ADDRESS

CITY/TOWN STATE ZIP CODE

TRANSACTION TYPE (Please check all relevant transactions):

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

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

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



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

PETITION FOR CHANGE OF LICENSE

003000025
 ABCC License Number

Arlington
 City/Town

The licensee Not Your Average Joe's respectfully petitions the Licensing Authorities to approve the following transactions:

- Change of Manager
- Pledge of License/Stock
- Change of Corporate Name/DBA
- Change of License Type (\$12 ONLY, e.g. "club" to "restaurant")
- Alteration of Premises
- Cordial & Liqueurs
- Change of Location

Change of Manager

Last-Approved Manager: Peter Lowne

Requested New Manager: David Chambers

Pledge of License /Stock

Loan Principal Amount: \$ Interest Rate:

Payment Term: Lender:

Change of Corporate Name/DBA

Last-Approved Corporate Name/DBA:

Requested New Corporate Name/DBA:

Change of License Type

Last-Approved License Type:

Requested New License Type:

Alteration of Premises: (must fill out attached financial information form)

Description of Alteration:

Change of Location: (must fill out attached financial information form)

Last-Approved Location:

Requested New Location:

Signature of Licensee

[Signature]
 (If a Corporation/LLC, by its authorized representative)

Date Signed



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 239 Causeway Street
 Boston, MA 02114
www.mass.gov/abcc

PERSONAL INFORMATION FORM

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

1. LICENSEE INFORMATION:

A. Legal Name of Licensee	Not Your Average Joe's Inc	B. Business Name (dba)	Not Your Average Joe's	
C. Address	645 Mass Avenue		D. ABCC License Number (If existing licensee)	003000025
E. City/Town	Arlington	State	MA	Zip Code 02476
F. Phone Number of Premise	781.643.1666		G. EIN of License	04-3461276

2. PERSONAL INFORMATION:

A. Individual Name	David Chambers	B. Home Phone Number	774.424.0414	
C. Address	143 Water Street			
D. City/Town	Framingham	State	MA	Zip Code 01701
E. Social Security Number	[REDACTED]	F. Date of Birth	[REDACTED]	
G. Place of Employment	Not Your Average Joe's, 2 Granite Avenue, Suite 300, Milton, MA 02186			

3. BACKGROUND INFORMATION:

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

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

4. FINANCIAL INTEREST:

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

NONE

IMPORTANT ATTACHMENTS (8): For all cash contributions, attach last (3) months of bank statements for the source(s) of this cash.
 *If additional space is needed, please use the last page

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

Signature	<i>David Chambers</i>	Date	4/7/15
Title	General Manager	(If Corporation/LLC Representative)	



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

STEVEN GROSSMAN
TREASURER AND RECEIVER GENERAL

CORI REQUEST FORM

KIM S. GAINSBORO, ESQ.
CHAIRMAN

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

ABCC LICENSE INFORMATION

ABCC NUMBER: <small>(IF EXISTING LICENSE)</small>	3000025	LICENSEE NAME:	Not Your Average Joe's	CITY/TOWN:	Arlington
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APPLICANT INFORMATION

LAST NAME:	Chambers	FIRST NAME:	David	MIDDLE NAME:	Allen			
MAIDEN NAME OR ALIAS (IF APPLICABLE):		PLACE OF BIRTH:	Prescott, AZ					
DATE OF BIRTH:	[REDACTED]	SSN:	[REDACTED]	ID THEFT INDEX PIN (IF APPLICABLE):				
MOTHER'S MAIDEN NAME:	Meyer	DRIVER'S LICENSE #:	[REDACTED]	STATE LIC. ISSUED:	Massachusetts			
GENDER:	MALE	HEIGHT:	5	9	WEIGHT:	240	EYE COLOR:	Blue
CURRENT ADDRESS:	143 Water Street							
CITY/TOWN:	Framlingham	STATE:	MA	ZIP:	01701			
FORMER ADDRESS:	14 Derby Road							
CITY/TOWN:	Watertown	STATE:	MA	ZIP:	02472			

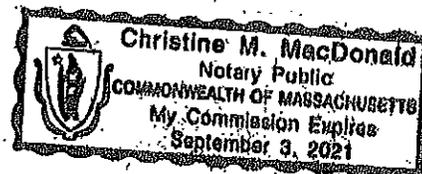
PRINT AND SIGN

PRINTED NAME:	David Chambers	APPLICANT/EMPLOYEE SIGNATURE:	<i>David Chambers</i>
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NOTARY INFORMATION

On this 4.7.15 before me, the undersigned notary public, personally appeared David Chambers
(name of document signer), proved to me through satisfactory evidence of identification, which were personal knowledge
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.

[Signature]
NOTARY



DIVISION USE ONLY

REQUESTED BY:	[REDACTED]
SIGNATURE OF CORI-AUTHORIZED EMPLOYEE	

The DCJ Identify Theft Index PIN Number is to be completed by those applicants that have been issued an Identify 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.



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Alcoholic Beverages Control Commission
239 Causeway Street
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www.mass.gov/abcc

MANAGER APPLICATION

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

1. LICENSEE INFORMATION:

Legal Name of Licensee: Business Name (dba):

Address:

City/Town: State: Zip Code:

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

2. MANAGER INFORMATION:

A. Name: B. Cell Phone Number:

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

3. CITIZENSHIP INFORMATION:

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

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

4. BACKGROUND INFORMATION:

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

If yes, please describe:

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

If yes, please describe:

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

If yes, please describe:

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

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

Signature Date

RESUME OF QUALIFICATIONS

David A. Chambers

April 08, 2015

143 Water St. ❖ Framingham, Massachusetts 01701 ❖ cell (774) 424-0414

Email: acdchambers@verizon.net

PROFESSIONAL EXPERIENCE

NOT YOUR AVERAGE JOE'S, Arlington, MA

10/14-Current

GENERAL MANAGER

- Responsible for all aspects of the restaurant's operations, including sales building, improved customer relations/experience and execution of consistency in all areas of service, both in house, and through social media vehicles.
- Directly responsible for coaching and development of staff through monitoring and reinforcement of procedural expectations

UNITED PARCEL SERVICE, Ashland, MA

11/12 – 10/14

PRE-LOAD SUPERVISOR

- Responsible for Sort Operations including the unloading, sorting and reloading all incoming freight onto package cars for days delivery, ensuring all packages are on correct vehicles for established routes.
- Ensure staff is trained and educated regarding safety and its' application in the workplace, and following the correct procedures during the sort process.
- Conduct audits in all package cars, making sure packages are on correct vehicles and loaded for maximum efficiency allowing drivers to deliver in a safe productive manner.

DCICS, Framingham, MA

01/11-10/14

OWNER / OPERATOR

- Responsible for pick-up and delivery of various products from a multitude of vendors through-out New England, providing professional and courteous customer service.
- Structure routes in an economical, efficient manner controlling overhead and expenditures.

LEGAL SEA FOODS, Boston, MA

01/07-11/10

GENERAL MANAGER

- Responsible for all aspects of restaurant operations, including sales building and execution of company standards.
- Directly responsible for on-site management's coaching and development.
- Responsible for all facility improvements, maintaining budgets, financial planning and customer relations.
- Consistently maintained above-par financial health of the restaurant while achieving growth of year on year sales in all quarters.

NOT YOUR AVERAGE JOE'S, Watertown, MA

10/03-01/07

GENERAL MANAGER

- Responsible for regional training of new management recruits involved in all areas of the restaurants.
- Responsible for all aspects of the restaurant's operations, including sales building, improved customer relations/experience and execution of consistency in all areas of service.
- Directly responsible for on-site management's coaching and development.

McCORMICK & SCHMICKS, Boston, MA
RESTAURANT MANAGER

06/02-10/03

- Responsible for recruiting, hiring, training and scheduling the service staff.
- Responsible for ordering, inventory, and controlling beverage cost.
- Responsible for managing day-to-day operations as set forth by corporate standard policies.

CHEVYS' FRESH MEX, Saugus, MA
GENERAL MANAGER

02/01-06/02

- Responsible for all aspects of the restaurants operations, including sales building and policy execution.
- Directly responsible for management coaching and development.
- Analyze and create a complete budget and operational plan for the fiscal year in order to maintain consistency and foster sales growth.

DECLERCK ENTERPRISES, (d.b.a.) CHEVYS' & TACO BELL, Yreka, CA
DIRECTOR OF OPERATIONS

8/00-2/01

- Directly responsible for the operations of two concepts including seven restaurants in two states.
- Set up and monitored regional systems for the General Managers to improve standards and maintain consistency.

UNITED PARCEL SERVICE, Fort Collins, CO
PACKAGE DRIVER

3/95- 7/00

- Deliver business and residential packages throughout area.
- Sort and arrange stops in an organized and efficient manner to ensure a safe productive workday.

COLUMBIA BASIN PIZZA HUT, INC., Yakima, WA
AREA DIRECTOR OF OPERATIONS

5/91 - 7/94

- Directly responsible for management development and full scale operations for five restaurants.
- Planned, developed, and monitored operations including all financial aspects such as profitability, sales, building, and reporting.
- Prepared yearly budgets and analyzed P&L statements in each unit. Held the General Managers accountable for facts at periodic business review meetings.
- Core instructor for regional management training for all entry-level management.
- Interviewed and recruited management associates.

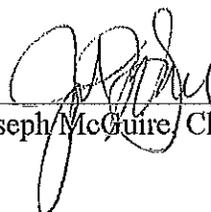
- REFERENCES FURNISHED UPON REQUEST

NOT YOUR AVERAGE JOE'S, INC.
CLERK'S CERTIFICATE

I, **Joseph McGuire, Clerk of Not Your Average Joe's, Inc.**, a Delaware corporation authorized to do business in the Commonwealth of Massachusetts (the "Corporation") having a usual place of business in Middleboro, Massachusetts, hereby certify that I have custody of its corporate record, and that the following is a true copy of a vote passed by the Board of Directors with a resolution that was adopted as follows:

RESOLVED: That the manager of the Arlington, MA restaurant for the purpose of the Company's liquor license is changed from Peter Lowre to David Chambers.

IN WITNESS WHEREOF, I hereunto subscribe my name as Clerk this 29th day of April, 2015.



Joseph McGuire, Clerk