APPLICATION BY A FARMER WINERY FOR LICENSE TO SELL AT A FARMER'S MARKET (CH.138, §15F)

YEAR 20

19 -

1. Licensee Info	rmation:	ABCC License Nur	D=VV=1 IC	-000115			
Name of Applicant	t: Pony Shack Cider. Inc	(If Existing Licens	ee)				
Mailing Address:	22 Littlefield Road	Business Name (d/b/a if different) :					
Manager of Record	t-Nathan I McKinley	City/Town: Box	kborough	State MA	Zip 01719		
Manager of Record: Nathan J McKinley Phone Number of Premises: 781-367-4060							
Other Phone:	Email: nat	te@ponyshackcider.c	om Website:	www.ponyshac	kcider.com		
Contact Person concerning this application (attorney if applicable):							
Name:	Nathan McKinley	City/Town:	Boxborough	State MA	Zip 01719		
Address:	22 Littlefield Road	Email:	nat	te@ponyshackcide	er.com		
Contact Number :	781-367-4060	Fax Number:					
Please attach document from Department of Agricultural Resources certifying that this is an agricultural event. Date(s) of Event: June 12, 2019 - Oct 30, 2019 Wednesdays B. Contact person for applicant during event:							
Name: Nathan McKinley							
Phone number of contact: 781-367-4060							
C. Description of the premises within the Farmer's Market:							
Address of Premises for the Sale of Wine: Russell Common Parking Lot							
City/Town: Arlington State MA Zip 02474 Phone Number of Premises: 781-646-4645							
Describe Area to be Licensed: The Arlington summer farmers market will be held at the Russell Common Parking lot in Arlington. Wine sales will be held in a vendor space within the park.							

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Name	License Type		License Address				
ony Shack Cider, Inc.	22 Littlefic	22 Littlefield Rd Boxborough MA 01719					
=		£	2 2				
	:						
	charge, samples of wine to prospective co		Yes 🛛 No 🗌				
. If yes, please provide names an	d addresses of all agents, representatives and	i solicitors:					
Name	Address		ABCC License Number				
Nathan McKinley	188 Picnic Street Boxvorough MA 0	1719	FW-LIC-000115				
721							
	,						
 Proof of Age for Sale to Considers lease identify all methods by which 	sumers: nyou will obtain proof of age before providing sa	amples or making	g any sales of wine to consumers :				
Check valid state issued identific	cation card, military card, or passport for pro	oof of age.	6				
i.			# · · · · · · · · · · · · · · · · · · ·				
			85				
	1						
5. Transportation and Deliver							
lease identify in detail all persons o o the Farmer's Market in Massachus	r businesses that are licensed under M.G.L. c. 13 etts.	8, §22 that will be	e making any delivery of wine on your				
O the Farmer's ivialised in iviassaction							

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6. Safety and Tax Registration: Has the Farmer's Market registered with the Food and Drug Administration? Yes No Registration Date:							
7. Disclosure of License Disciplinary Action: Have any of the your licenses to sell alcoholic beverages ever been suspended, revoked or cancelled? Yes No 🗵							
Have any of the your licenses to sell alcoholic beverages ever been suspended, revoked or cancelled? Yes No No							
Date License Reason why license was Suspended, Revoked or Cancelled							
	kes required under law. I lurt mination of the application a	nder the penalties of perjury that, I have filed all state tax returns her understand that each representation in this application is nd state under penalty of perjury that all statements and					
Signature	Muchin J.	nokus					
Title	President						
Date	5/10/19						

THE COMMONWEALTH OF MASSACHUSETTS

EXECUTIVE OFFICE OF ENERGY AND ENVIRONMENTAL AFFAIRS



Department of Agricultural Resources

251 Causeway Street, Suite 500, Boston, MA 02114 617-626-1700 fax: 617-626-1850 www.mass.gov/agr



CHARLES D. BAKER Governor KARYN E. POLITO Lt. Governor KATHLEEN A. THEOHARIDES Secretary

JOHN LEBEAUX Commissioner

May 15, 2019

Nathan McKinley Pony Shack Cider 22 Littlefield Rd. Boxborough, MA 01719

Re:

Arlington Farmers' Market

Dear Nathan McKinley:

Please be advised that your application for certification of the Arlington Farmers' Market, on Wednesday from June 12, 2019 to October 30, 2019, and from 2:00 pm to 6:30 pm, as an agricultural event pursuant to M.G.L. c. 138, Section 15F has been approved.

Please remember that, upon certification of an agricultural event by MDAR, the farm-winery must submit a copy of the approved application to the local licensing authority along with the application for obtaining a special license from the city or town in which the event will be held. Upon issuance of a special license, the winery should confirm that a copy of the special license was sent by the local licensing authority to the Alcoholic Beverages Control Commission (ABCC) at least seven (7) days prior to the event.

Sincerely,

John Lebeaux, Commissioner

THE COMMONWEALTH OF MASSACHUSETTS

EXECUTIVE OFFICE OF ENERGY AND ENVIRONMENTAL AFFAIRS



Department of Agricultural Resources 251 Causeway Street, Suite 500, Boston, MA 02114

617-626-1700 fax: 617-626-1850 www.mass.gov/agr



Application for Certification of an Agricultural Event for the Sale of Wine Pursuant to M.G.L. c. 138, Section 15F

*To be completed by the licensed farm-winery and returned to: By Mail: Agricultural Event Certification Program, 251 Causeway Street, Suite 500, Boston, MA 02114 with the subject line "Agricultural Event Certification" By Email:

(A separate application must be completed for each event)

		-			-				_		
In order for your application to be considered complete, you must include the following documents. Incomplete applications will not be accepted.											
ν			application with	h far	m-wine	ery licens	se nur	nber			
v	List of vend	dors wi	th brief descript	tions	of pro	ducts <u>fo</u>	r curre	ent year/sea	ason .		
	Event oper	ationa	guidelines or re	ules	for cur	rent yea	r/seas	<u>son</u>			"
	Resume of event manager or description of experience							* *			
Plan depicting the premises and specific location where the license will be exercised. See Template 1.											
1	Approval le	etter fr	om event mana	gem	ent incl	luding th	ne nan	ne of the lice	ensed	far	m-winery and the
_	day(s), mo	nth an	d year of event.	See	Templ	ate 2.					
1. Applicant In	formation										
Name of Licens	sed Farm-Wi	nery	Pony Shack	(Ci	der, I	nc.					
Farm-Winery License Number FW-LIC-000115 State of Issue MA											
Contact Person Nathan J McKinley											
Address	The state of the s										
City	Boxborou	Boxborough State MA Zip 01719									
Phone Number 781-367-4060 Email nate@ponyshackcider.com											
Correspondence preference Regular Mail Note: Approval/denial letters will be sent regular mail.											
Do you intend to sell, sample, or both? Check all that apply.											
Sell Sample											
2. Event Information											
Name of Agricultural Event Arlington Farmers Market											
Type of Event Agricultural Fair (as defined by MDAR policy)				Farmers Market (as Other defined by MDAR policy)							
If you selected "Other Agricultural Event", how does this event promote local agriculture?											
Event Address Russell Common Parking Lot, Mystic Street											
City	Arlington			S	tate	MA		Zi	р	02474	
Event Phone Number 781-646-4645 Event Website www.farmersmarketarlington.com											

3. Event Description								
What are the date(s) and time(s) of the event?								
Start date 06 /12 /2019 End date 10 /30 /19 Time 2:00pm-6:30pm								
Month Day Year Month Day Year								
If this is a weekly event, on what day of the week does the event occur? Wednesday								
If the event is an agricultural fair, does the event include competitive agriculture? Yes No N/A								
Is the event sponsored or run by an Yes No								
agricultural/horticultural society, grange, agricultural commission or association whose primary purpose is								
the promotion of agriculture and its allied industries?								
4. Event Management								
Name of Event Manager Patsy Kraemer								
Email Address patsykraemer@gmail.com Phone Number 781-646-4645								
Is this person the on-site manager? Yes No								
If no, identify on-site manager (include contact information):	\dashv							
If there are multiple managers, list them and include contact information:								
Attach on-site manager(s) resume(s) or list any credentials or training of the on-site manager(s):	\dashv							
Relevant credentials include, but are not limited to, experience as a market manager, attendance at any market manager	-							
workshops, and experience with other agricultural events. Please see the attached resume.								
a a								

5. General						
Attach or provide in the space below a plan depicting the premises and the specific location where the license						
will be exercised. See template for necessary elements to include.						
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T .	×					
	20					
Machan / make	5-8-19					
Signature of Applicant	Date					
	And Antoninos					
Nathan J McKinley	President					
Name (please print)	Title (please print)					
FW-LIC-000115	MA					
Farm-Winery License Number	State					
raini-veniciy meenee realized						
FOR DEPARTMENT USE ONL	v					
I ON DEL ANTIGENT GOS ONS						
APPROVAL						
The event listed above is an approved agricultural event by the Massachusetts Department of Agricultural						
Resources under M.G.L. C138, Sec. 15F.						
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	711 15 2010					
	May 15, 2019					
() Signature	Date					
DENIAL						
	Massachusetta Department of					
The event listed above is <u>not approved</u> as an agricultural event by the Massachusetts Department of Agricultural Resources for the following reason(s):						
Agricultural Resources for the following reason(s).	is a					
None to the contract of the co						
a a						
Signature	Data					



Alcoholic Beverages Control Commission Commonwealth of Massachusetts Office of the State Treasurer

FARMER-WINERY LICENSE

M.G.L. c. 138, § 19B

keep and expose for sale and to sell wine containing not more than twenty-four percent alcohol by weight: This Farmer-Winery License authorizes the following licensee to produce, rectify, blend, or fortify,

Pony Shack Cider, Inc.

Boxborough, MA 01719 22 Littlefield Road

Approved by the Alcoholic Beverages Control Commission on December 12, 2018

Hum M. Fringin Jean Lorizio, Chairman

Elinaveth a Tachway Elizabeth Lashway, Commissioner

Tathler Mc Mally Commissioner

FW-LIC-000115

License Number: Record Number:

2018-000072-FW-REN

More Than 5K but Less Than 20K Gallons

THIS LICENSE WILL EXPIRE DECEMBER 31, 2019 UNLESS REVOKED OR CANCELLED DURING THIS PERIOD

THIS LICENSE SHALL BE DISPLAYED ON THE PREMISES IN A CONSPICUOUS PLACE WHERE IT CAN BE EASILY READ

CERTIFIED

PS eTIPS Off Premise 3.0

Issued: 12/11/2016

Expires: 12/11/2019

ID#: 4417087

Boxborough, MA 01719-1105 Nathan McKinley 188 Picnic St

For service visit us online at www.gettips.com