

OFFICE OF THE SELECT BOARD

730 Massachusetts Avenue

Town of Arlington

Massachusetts 02476-4908

(781) 316-3020

(781) 316-3029 fax

\$60.00 Filing Fee

Inspections Dept. at 51 Grove St. must review completed application before returning to this office.

APPLICATION

To the Licensing Authorities of the Town of Arlington

The Undersigned hereby makes application for a

- ☒ **COMMON VICTUALLER LICENSE (Eat In)**
☐ **FOOD VENDOR LICENSE (Take Out Only)**

Location 456A MASS AVE, ARLINGTON, MA 02474

Name of Applicant SHANSHAN YUE

Corporate Name (if applicable) CHEEPER LLC

D/B/A BUBBLE NATION

Date 10/13/2018

I/We hereby agree to conform in all respects to the conditions governing such License as printed in the By-Laws of the Town, and such other rules and regulations as the Selectmen may establish. With the signing of this application, the applicant acknowledges that:

- A. It is understood that the Board is not required to grant the license.
- B. no work is to commence at the premises of the proposed location which is the subject matter of this application until the license is approved by the Select Board, and, furthermore, any work done is done at the applicant's risk, and
- C. in the event of a proposed sale of a business requiring a Common Victualler License, an application for a transfer of said license will be deemed to be an application for a new license (subject to the rules and regulations herein contained), and the owner of such business shall be required to file with the Select Board a thirty day notice of his intention to sell same before such application will be acted upon by the Select Board.
- D. That the license is subject to revocation if the holder of the license does not comply with Town By-Laws or the Rules and Regulations of the Board.

Signature Name Shanshan Yue

Signature Name [Signature]

Phone (Home) 781-491-6048 (Business) 781-491-6048

Note: (A) If a corporation, state full names and addresses of principal officers.
(B) If a co-partnership, information must be provided on each partner; if a corporation, information must be provided on corporate officer making application.

Name Shanshan Yue Name _____
Address _____ Address NA.
City Burlington Zip 01803 City _____ Zip _____

DESCRIPTION OF APPLICANT

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Born in the U.S., Yes _____ No ☒ Born in the U.S., Yes _____ No _____
Born Where China Born Where _____
Date of Naturalization _____ Date of Naturalization NA.
Male or Female Female Male or Female _____
Date of birth _____ Date of birth _____
Photo 1 inch by 1 inch



The Establishment shall operate as:

Sole Ownership / Partnership / Total Number of Partners
Corporation Based in LLC.

(Once approved, please go to Clerk's Office for Business Certificate)

Corporate Information Required:

President Shanshan Yue. Burlington, MA 01803
Secretary _____
Treasurer _____
Name Address Zip

INFORMATION RELATIVE TO APPLICATION

Breakfast

Yes ___ No ☒

Lunch

Yes ___ No ☒

Dinner

Yes ___ No ☒

Do you own the property? Yes ___ No ☒ Tenant At Will ___ Lease 3 (years)

Hours of Operation:

Day M-S Hours 9 AM-9 PM (10 HOURS)

Day / Hours /

Day / Hours /

Floor Space 639 Sq. Ft. Seating Capacity (if any) 6-7

Parking Capacity (if any) / spaces Number of Employees 2

List Cooking Facilities (and implements)

NO COOKING FACILITIES. Beverage and pastries (outside source) Only.

Will a food scale be in use for sale of items to the public? Yes ___ No ☒

Will catering services be provided by you? Yes ___ No ☒

Eight copies of the following items must be submitted with the application:

1. Layout Plan of Facility & Fixtures Date Received _____
2. Site Plan (obtained at Bldg. Dept., 51 Grove St.) Date Received _____
3. Outside Facade and Sign Plan (dimensions, color) Date Received _____
- ✓ 4. Menu Date Received _____
5. Maintenance Program Date Received _____

If the facilities are not yet completed, provide estimated cost of work to be done \$ _____

FOR OFFICE USE ONLY

Scheduled Hearing when Application will be presented to Board of Selectmen for approval:

Date _____ Time _____

Board Action: Approved Yes ___ No ___

APPLICANT'S RESUME

Food Business Experience of Applicant

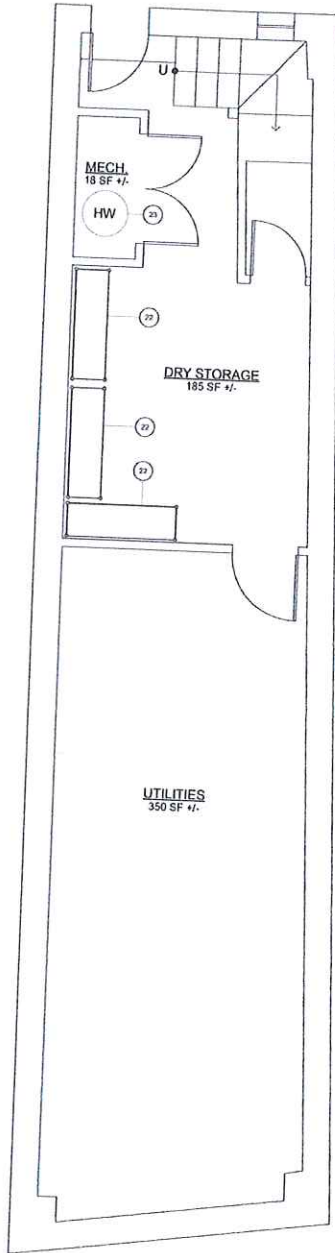
From N/A to _____
Employee _____ D/B/A _____
Sole Owner _____ Location _____
Partnership _____ Type Food _____
Corporation _____ Number of Employees _____

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Employee _____ D/B/A _____
Sole Owner _____ Location _____
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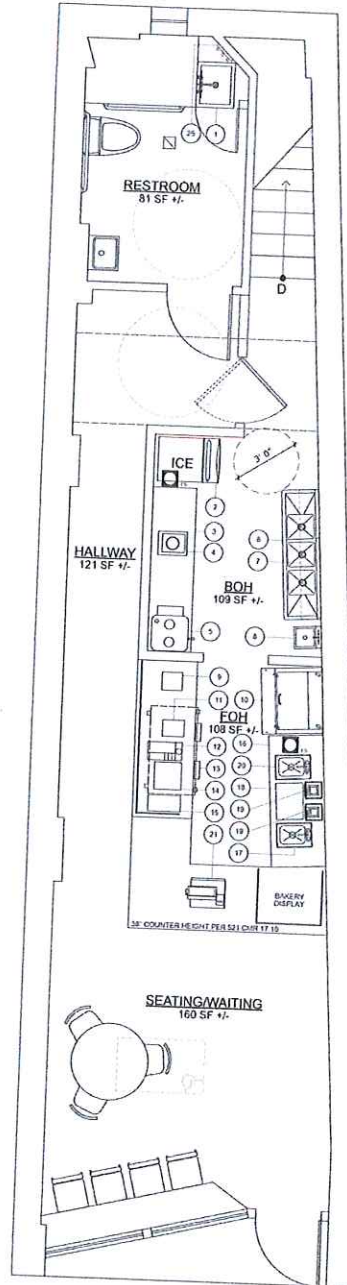
List any other information that you feel will assist in the review of this application.

Bubble Nation is our first business. My husband and I (owners of Bubble Nation) got this concept ⁱⁿ since 2016. We have been building this brand and developing the concept with passion and confidence. We are specialized in Computer Science and Marketing. We believe that we could bring the wonderful beverage to Arlington, this beautiful community.

Layout Plan of Facility & Fixtures



1 FLOOR PLAN - BASEMENT
Scale: 1/4" = 1'

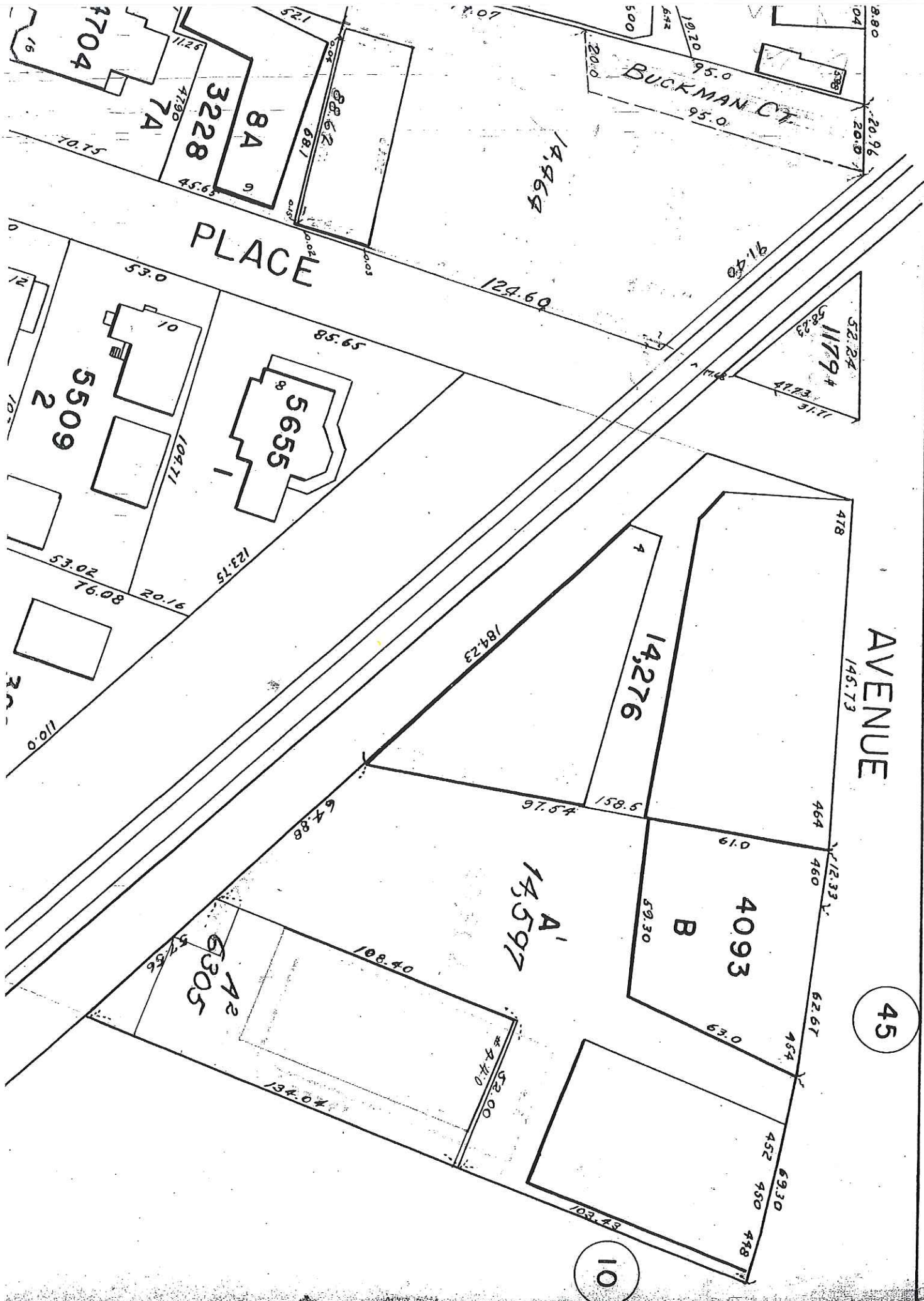


2 FLOOR PLAN - LEVEL 1
Scale: 1/4" = 1'

EQUIPMENT KEY

SEE EQUIPMENT SCHEDULE FOR DETAILS

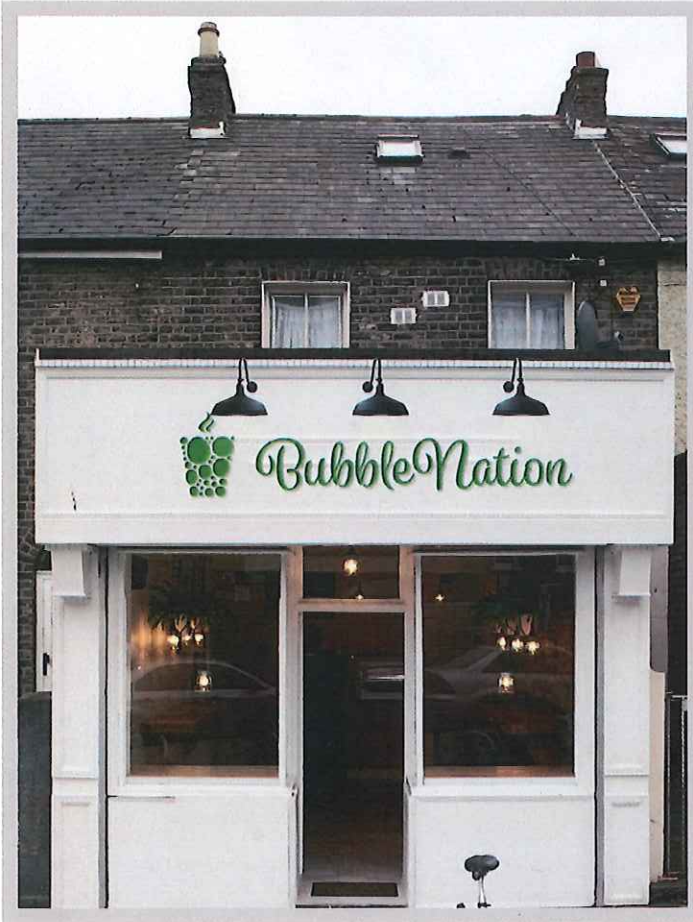
- 1 MOP SINK
- 2 ICE MAKER WITH STORAGE BIN
- 3 90" STAINLESS STEEL WORK TABLE
- 4 INDUCTION COOK TOP
- 5 TEA URN/HOT WATER DISPENSER
- 6 THREE COMPARTMENT SINK WITH DRAINBOARDS
- 7 CLEANED DISH SHELVE
- 8 HANDSINK WITH SPLASHGUARDS
- 9 COUNTERTOP MIXER
- 10 36" REFRIGERATED FOOD PREP TABLE
- 11 COFFEE GRINDER
- 12 STEAMER
- 13 48" UNDERCOUNTER REFRIGERATOR
- 14 ESPRESSO MACHINE
- 15 COFFEE BREWER/WARMER
- 16 72" STAINLESS STEEL WORK TABLE
- 17 DROP IN HAND SINK WITH SPLASH GUARDS
- 18 DROP IN INSULATED ICE BIN WITH COVER
- 19 COMMERCIAL BLENDER
- 20 DROP IN DUMP SINK (10x14x8 BOWL)
- 21 POS/CASH REGISTER
- 22 DRY STORAGE SHELVE
- 23 50 GAL WATER HEATER
- 24 MOP HANGER



Outside Facade and Sign Plan

Front Sign:

Dimension: 7 foot x 2.5 foot
Type: Raised letters
Color: Green
Example:



Sign on the Wall:

Dimension: 2.5 foot x 2.5 foot
Type: Wood Sign with Logo
Color: Green
Example:



Outside Facade and Sign Plan

Front sign:

Dimension: 120cm x 40cm

Type: Metal Storefront Sign Board

Color: Green

Side Sign:

Dimension: 50cm x 50cm

Type: Plywood Storefront Sign

Color: Green

Bubble Nation

456A Mass Ave, Arlington, MA 02474

781-491-6048

MENU

Milk Tea

- The Signature (Classic milk tea)
- The Bubble Nation (Classic milk tea with pearl, pudding and red bean)
- Milk Tea with Red Bean & Pudding
- Milk Tea with Pearls
- Milk Tea with Taro
- Milk Tea with Herbal Jelly
- Milk Tea with Coffee Jelly
- Milk Tea with Brown Sugar
- Matcha Milk Tea & Red Bean
- Jasmine Milk Tea
- Jasmine with Red Bean & Pudding
- Jasmine with Pearls
- Jasmine with Taro
- Jasmine with Herbal Jelly

Shakes

- Red Bean Yogurt Shake
- Strawberry Yogurt Shake

- Mango Yogurt Shake
- Blueberry Yogurt Shake
- Chocolate Yogurt Shake

Slush

- Red Bean Slush
- Strawberry Slush
- Mango Slush
- Blueberry Slush
- Pineapple Passion Fruit Slush
- Lemon Clementine Slush

Milk Splash

- Red Bean & Pudding Milk Splash
- Brown Sugar Milk Splash with Pearls
- Milk Splash with Taro

Milk Foam

- Milk Foam Oolong Tea
- Milk Foam Earl Grey tea
- Milk Foam Jasmine Tea

MENU

- Milk Foam Black Tea
- Milk Foam Cassia Buds Oolong Tea
- Milk Foam Peach Oolong Tea
- Milk Foam Cookies & Milk Tea
- Milk Foam Matcha Milk Tea

Brewed Tea

- Oolong Tea
- Peach Oolong Tea
- Jasmine Green Tea
- Matcha Green Tea
- Black Tea
- Earl Grey

Soda Sparkling

- Pineapple Passion Fruit Sparkling
- Lemon Clementine Sparkling
- Green Apple Sparkling
- Rose Sparkling
- Blueberry Sparkling
- Peach Sparkling

Coffee

- Americano
- Brown Sugar Latte
- Vanilla Latte
- Cappuccino
- Mocha

Pastries

- French Macaroon
- Fruit Tarts
- Mini Cakes
- Eclairs & Cream Puffs

BEFORE PLACING YOUR ORDER,
PLEASE INFORM US IF A PERSON IN
YOUR PARTY HAS A FOOD ALLERGY

Maintenance Program

Preventative Maintenance

Item	Frequency	Vendor
Clean Fridge Coil	4X Year	In-house Staff
Change A/C and Filter	4X Year	A/C, Heating
Check Fridge Door Gaskets and Hardware	4X Year	In-house Staff
De-scale and sanitizer Ice Machine and Bin	12X Year	In-house Staff
Flush Hot Water Heater	2X Year	Plumbing Service
Change Water Filter	4X Year	In-house Staff
Clean POS	2X Year	In-house Staff
Plump Gease Trap	4X Year	In-house Staff
Pest Control	6X Year	Security Pest Control Inc

Daily Cleaning

Item	Frequency	Vendor
Floor	2X Day	In-house Staff
Wall Near Prep Table	2X Day	In-house Staff
Waste Bins	3X Day	In-house Staff
Cooktop	1X Day	In-house Staff
Hand Sinks	1X Day	In-house Staff
Sinks	1X Day	In-house Staff
Doors and Handle	1X Day	In-house Staff
Food Display Case	1X Day	In-house Staff
Fridge	1X Day	In-house Staff
All Other Equipments (Coffee Maker, Tea Dispenser, Grinder, Mixer)	1X Day	In-house Staff
Bathroom	3X Day	In-house Staff
Window	1X Day	In-house Staff