



Town of Arlington Select Board

Meeting Agenda

May 6, 2019

7:00 PM

Select Board Chambers, 2nd Floor, Town Hall

1. Approval of Sale of \$200,000 Sewer Bond to the Massachusetts Water Resources Authority
Phyllis Marshall, Treasurer & Collector of Taxes

CONSENT AGENDA

2. Minutes of Meetings: April 8, 2019; April 17, 2019; April 22, 2019; April 29, 2019
3. For Approval: Memorial Day Ceremony, May 27
Jeffrey A. Chunglo, Director of Veterans' Services
4. For Approval: Change of Officers - All Alcohol Club License
Winchester Country Club, 468 Mystic Street, Paul Lazar
5. For Approval: Change of Hours - Food Vendor
Arlington Convenience, 245 Massachusetts Avenue, Davinder Sharma
6. Request: Special (One Day) Beer & Wine License, 5/10/19 @ Robbins Memorial Town Hall for
Boys & Girls Club Annual Celebration Dinner
Derek Curran, Arlington Boys & Girls Club
7. Request: Special (One Day) Beer & Wine License, 5/18/19 @ Robbins Memorial Town Hall /
Robbins Town Garden for Garden Party for Restoration of Reflecting Pool
Patsy Kraemer, Arlington Garden Club
8. Request: Special (One Day) Beer & Wine License, 6/1/19 @ Whittemore Robbins House for a
Private Event
Andrea Bloch
9. Request: Annual Greek Festival, May 30, 2019 - June 2, 2019
S.Nicholas Kriketos, Parish Council, St. Athanasius the Great, 4 Appleton Street
 - a) 4-Day Special (One Day) Beer & Wine License
 - b) 'One Way' designation of Appleton Place (from Mass. Ave. to Burton St.)
 - c) Acton Place - street closing
10. Request: Farmers' Market Winery Application - Sale of Wine
Coastal Vineyards, David W. Neilson
61 Pardon Hill Road, South Dartmouth, MA 02748

TRAFFIC RULES & ORDERS / OTHER BUSINESS

11. Sponsorship of COA Info Session on Senior Tax Relief
Joseph A. Curro, Jr., Select Board
12. Discussion: Goal Setting Meeting Date

CORRESPONDENCE RECEIVED

13. Invitation to Participate in Memorial Day Ceremony
Jeffrey A. Chunglo, Director of Veterans' Services
14. Arlington Needs a Candy Shop
Reid Elverson, Bishop School Student
15. Request for Signage and Pavement Markings on Chestnut Terrace and Chestnut Street
Gisela Pikarsky, President Mystic Tower Condominium Trust

Next Scheduled Meeting of Select Board May 20, 2019



Town of Arlington, Massachusetts

Approval of Sale of \$200,000 Sewer Bond to the Massachusetts Water Resources Authority

Summary:

Phyllis Marshall, Treasurer & Collector of Taxes

ATTACHMENTS:

Type	File Name	Description
▢ Reference Material	\$200_000_Sewer_Bond_Sale_Memo_to_Select_Board._5.2.19.pdf	Reference




Office of the Treasurer & Collector of Taxes

***Town of Arlington, Massachusetts
730 Massachusetts Avenue
Arlington, MA 02476***

***Telephone Number: 781-316-3031
Facsimile Telephone: 781-316-3039***

**Phyllis L. Marshall
Treasurer & Collector of Taxes**

Memorandum

Date: May 2, 2019
To: Diane M. Mahon, Select Board Chair
From: Phyllis L. Marshall, Treasurer – Collector 
Subject: Approval of \$200,000 Sewer Bond to the Massachusetts Water Resources Authority

In accordance with the Town Meeting Authorization of Article 32 on April 23, 2018 for Appropriation/Financing of Construction or Reconstruction of Sewers and Sewerage Facilities, please see the attached financial assistance award in the amount of \$800,000 in a combination of grant funds and interest free loan. The Financial Assistance Agreement and Loan Agreement between the Town and the Massachusetts Water Resources Authority (MWRA) provides for an interest-free Sewer Bond in the amount of \$200,000 and Grant funds in the amount of \$600,000 for the project submitted to the MWRA.

I respectfully request your favorable consideration and vote of the Select Board for sale of \$200,000 Sewer Bond will close on May 20, 2019.

Attachments

Cc: Adam Chapdelaine, Town Manager
Michael Rademacher, Director of Public Works
Wayne Chouinard, Town Engineer
Charlene Doucette, Locke Lord LLP

VOTE OF THE SELECT BOARD

I, the Clerk of the Select Board of the Town of Arlington, Massachusetts, certify that at a meeting of the board held May 6, 2019, of which meeting all members of the board were duly notified and at which a quorum was present, the following votes were unanimously passed, all of which appear upon the official record of the board in my custody:

Voted: that the sale of the \$200,000 Sewer Bond of the Town dated May 20, 2019, to Massachusetts Water Resources Authority (the "Authority") is hereby approved and the Town Treasurer or other appropriate Town official is authorized to execute on behalf of the Town a Loan Agreement and a Financial Assistance Agreement with the Authority with respect to the bond. The bond shall be payable without interest on May 15 of the years and in the principal amounts as follows:

<u>Year</u>	<u>Installment</u>	<u>Year</u>	<u>Installment</u>
2020	\$20,000	2025	\$20,000
2021	20,000	2026	20,000
2022	20,000	2027	20,000
2023	20,000	2028	20,000
2024	20,000	2029	20,000

Further Voted: that each member of the Select Board, the Town Clerk and the Town Treasurer be and hereby are, authorized to take any and all such actions, and execute and deliver such certificates, receipts or other documents as may be determined by them, or any of them, to be necessary or convenient to carry into effect the provisions of the foregoing vote.

I further certify that the votes were taken at a meeting open to the public, that no vote was taken by secret ballot, that a notice stating the place, date, time and agenda for the meeting (which agenda included the adoption of the above votes) was filed with the Town Clerk and a copy thereof posted in a manner conspicuously visible to the public at all hours in or on the municipal building that the office of the Town Clerk is located or, if applicable, in accordance with an alternative method of notice prescribed or approved by the Attorney General as set forth in 940 CMR 29.03(2)(b), at least 48 hours, not including Saturdays, Sundays and legal holidays, prior to the time of the meeting and remained so posted at the time of the meeting, that no deliberations or decision in connection with the sale of the bond were taken in executive session, all in accordance with G.L. c.30A, §§18-25 as amended.

Dated: May 6, 2019

Clerk of the Select Board



OFFICE OF THE TOWN CLERK
TOWN OF ARLINGTON
730 MASSACHUSETTS AVENUE
ARLINGTON, MA 02476

TOWN HALL
OFFICE HOURS
MONDAY, TUESDAY & WEDNESDAY
8 A.M. TO 4 P.M.
THURSDAY - 8 A.M. TO 7 P.M.
FRIDAY - 8 A.M. TO 12:00 P.M.

STEPHANIE L. LUCARELLI
TOWN CLERK

TELEPHONE

(781) 316-3070

ARTICLE 32

**APPROPRIATION/FINANCING OF CONSTRUCTION OR
RECONSTRUCTION OF SEWERS AND SEWERAGE
FACILITIES**

VOTED:

**DECLARED 2/3RD (QUORUM PRESENT - MORE THAN
85 TMM PRESENT AND VOTING)**

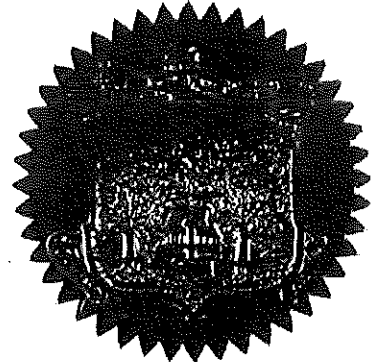
That the sum of \$800,000 be and hereby is appropriated for the purpose of financing the construction or reconstruction of sewers and sewerage facilities, inflow/infiltration reduction or system rehabilitation, including costs incidental and related thereto; that to raise this appropriation the Treasurer, with the approval of the Board of Selectmen, is authorized to borrow \$800,000 under and pursuant to Chapter 44, Section 7, of the General Laws, as amended, or any other enabling authority and to issue bonds or notes of the Town therefor; and that the Board of Selectmen and the Town Manager be and hereby are authorized to enter into any agreements they determine to be necessary in connection with the project and its financing and are further authorized to accept and expend in addition to the foregoing appropriation any grants that may become available from the Massachusetts Water Resources Authority or other sources.

A True copy of the vote under
Article 32 of the Warrant for the
Annual Town Meeting of the Town
of Arlington at the session held on
April 23, 2018.

ATTEST:

Stephanie L. Lucarelli

Town Clerk



LOAN AGREEMENT

LOAN AGREEMENT, dated the 20th day of May 2019 between the Massachusetts Water Resources Authority, a body politic and corporate, a public instrumentality and an independent public authority of The Commonwealth of Massachusetts (the "Authority") established by the Massachusetts Water Resources Authority Act, Chapter 372 of the Acts of 1984 of the Commonwealth of Massachusetts ("Commonwealth"), as amended (the "Act"), having its principal place of business in Boston, Massachusetts, and the Town of Arlington, MA (the "Government Unit").

WITNESSETH:

WHEREAS, the Authority has established a program of loans and grants (the "I/I Local Financial Assistance Program") to assist Local Bodies, as defined in the Act, in establishing programs for the reduction and control of infiltration and inflow ("I/I") into local sewer systems (the "Local I/I Programs") which will have a beneficial impact on the Authority's cost of maintaining and improving the Authority's sewer system; and

WHEREAS, the Government Unit has requested a loan from the Authority in the amount of \$200,000 (hereinafter referred to as the "Loan") for the purposes of funding its Local I/I Program and, to evidence the indebtedness to be incurred thereby, has duly authorized the issuance of its bonds in the principal amount of the Loan (the "Municipal Bonds"), which Municipal Bonds are to be issued to and held by the Authority in accordance with this Loan Agreement; and

WHEREAS, simultaneously with the making of the Loan, the Authority is making a grant in the amount of \$600,000 to the Government Unit (the "Grant"), which Grant will also be used by the Government Unit to fund its Local I/I Program; and

WHEREAS, the Authority may finance the Loan and the Grant from the proceeds of an issue of its tax-exempt revenue bonds which proceeds are subject to certain limitations as to investment and application;

NOW THEREFORE, the parties hereto agree as follows:

1. The Loan, the Grant and the Municipal Bonds. The Authority hereby agrees to make the Loan and the Grant and the Government Unit hereby agrees to accept the Loan and the Grant and, with respect to the Loan, to evidence its obligation to repay the Loan by issuing to the Authority the Municipal Bonds in the principal amount of the Loan, and substantially in the form attached hereto as Exhibit A. Neither the Loan nor the Municipal Bonds shall bear interest.

2. Representations and Warranties. The Government Unit represents and warrants as follows: (a) it has duly adopted all necessary votes and resolutions and has taken all proceedings required by law to enable it to enter into this Loan Agreement and issue its Municipal Bonds to the Authority to evidence its obligation to pay the Loan; (b) the Municipal Bonds have been duly authorized, executed and delivered by the Government Unit and constitute valid and binding obligations of the Government Unit, enforceable in accordance with their terms, except as such enforceability may be limited by bankruptcy, insolvency, moratorium, reorganization or other laws affecting creditors' rights heretofore or hereafter enacted and general equity principles; (c) the Municipal Bonds constitute general obligations of the Government Unit to which its full faith and credit is pledged; (d) all permits and approvals necessary to construct the project being financed by the Grant and the Loan (the "Project"), given the current status of the Project, have been obtained and remain in full force and effect; and (e) no litigation before or by any court, public board or body is pending or threatened against the Government Unit seeking to restrain or enjoin the issuance of the Municipal Bonds or the construction of the Project.

3. Covenants. The Government Unit agrees that until the Loan shall be paid in full, and the proceeds of the Loan and the Grant, together with the earnings thereon, shall be expended in full, it shall perform the following covenants: (a) it shall make the payments with respect to the principal of the Municipal Bonds in ten equal annual installments, all at the time and in the amounts set forth in the Municipal Bonds; (b) it shall notify the Authority in writing, from time to time, of the name of the official of the Government Unit to whom invoices for the payment of principal should be addressed if different from the address set forth in paragraph 8; and (c) it shall furnish the Authority annually such information regarding the Government Unit's Local I/I Program and the implementation thereof, including project status and expenditure reports and evidence of compliance with any applicable permits and any other financial or project information as the Authority may reasonably request.

4. Opinion of Bond Counsel. Attached hereto as Exhibit B is an opinion of bond counsel to the Government Unit to the effect that (i) the Municipal Bonds have been duly authorized, executed and delivered by the Government Unit and constitute valid and binding general obligations of the Government Unit, enforceable in accordance with their terms, except as such enforceability may be limited by bankruptcy, insolvency, and moratorium, reorganization or other laws affecting creditors' rights heretofore or hereafter enacted and to general equity principles, and (ii) the Municipal Bonds constitute general obligations to which the Government Unit's full faith and credit is pledged.

5. Application of Grant and Loan Moneys. (a) The Government Unit shall deposit the proceeds of the Loan and the Grant (collectively, the "Proceeds") in a single account (the "Account") separated from its other moneys. Such Account shall be invested with Massachusetts Municipal Depository Trust or in such other manner as may be approved by the Authority from time to time in the Authority's reasonable discretion. Earnings on the Account shall be retained in such Account. The Government Unit shall arrange for copies of all investment reports with respect to the Account to be furnished in timely fashion to the Authority.

(b) The Proceeds, together with the earnings thereon, shall be applied to the costs of the Government Unit's Local I/I Program.

(c) The Government Unit acknowledges that the Authority has financed the Loan and the Grant with the issue of the Authority's tax-exempt revenue bonds (the "Authority Bonds"). The Government Unit agrees to take such steps as are reasonably requested by the Authority in order to preserve the tax-exempt status of the Authority Bonds including, but not limited to, the following: (i) to pay to the Authority such amount, not exceeding the Government Unit's investment earnings on the Proceeds, as may be required to satisfy the Authority's obligation to pay rebate to the United States pursuant to Section 148 of the Internal Revenue Code of 1986, as amended (the "Code"); (ii) to the extent feasible, to limit the investment of the Proceeds, together with any earnings thereon, to such interest rate or to such investments as the Authority may specify from time to time in writing; and (iii) to repay to the Authority the Proceeds upon its written request, together with any earnings thereon, in exchange for other moneys which are not subject to investment restrictions or which are subject to lesser restrictions.

(d) The Government Unit shall repay to the Authority the unexpended balance in any account established pursuant to Section 5(a) hereof on or before May 21, 2021 or thereafter shall invest such unexpended balance in accordance with the directions of the Authority in order to assure compliance with the applicable provisions of the Code.

6. Prepayment of Loan. The Authority shall have the right to cancel all or any part of its obligations hereunder and the Government Unit shall be obligated to repay all of the Proceeds previously disbursed to it which remain unexpended, together with any earnings on the Proceeds, upon the Authority's request if: (a) any representation made by the Government Unit to the Authority in connection with its application for Authority assistance shall be incorrect or incomplete in any material respect; or (b) the Government Unit is in (i) default of any of its obligations hereunder to make payment on the Municipal Bonds as and when the same shall become due and payable, or (ii) in default of any other covenant or agreement on its part contained herein, and such default shall continue for thirty (30) days after written notice from the Authority specifying the default and requesting that the same be remedied.

If the Authority demands repayment of the Proceeds and the earnings thereon pursuant to Section 6(a) or if repayment is made pursuant to Section 5(d), the moneys returned to the Authority shall be attributed first to the Proceeds. Seventy-five percent of the Proceeds shall be treated as a return of the Grant. Twenty-five percent of the Proceeds and any earnings on the Proceeds shall be applied to a prepayment of the Loan. If the Authority demands repayment of the Proceeds and the earnings thereon pursuant to Section 6(b), the moneys returned to the Authority shall be attributed first to earnings on the Proceeds and then to a return of the Grant. Any Proceeds after such allocation shall be applied to a prepayment of the Municipal Bonds.

In addition to the foregoing provisions, the Government Unit may prepay the Loan upon thirty (30) days written notice to the Authority. Except as expressly provided herein, all prepayments shall be without penalty.

11. No Waiver. No waiver by either party of any term or conditions of this Loan Agreement shall be deemed or construed as a waiver of any other terms or conditions, nor shall a waiver of any breach be deemed to constitute a waiver of any subsequent breach, whether of the same or of a different section, subsection, paragraph, clause, phrase, or other provision of this Loan Agreement.

12. Integration. This Loan Agreement merges and supersedes all prior negotiations, representations, and agreements between the parties hereto relating to the subject matter hereof and constitutes the entire agreement between parties hereto in respect hereof.

IN WITNESS WHEREOF, the parties hereto have executed this agreement the day and year first above written.

(SEAL)
Attest:

MASSACHUSETTS WATER RESOURCES AUTHORITY

Rose Marie Convery
Assistant Secretary

By _____
Matthew R. Horan, Treasurer

(SEAL)
Attest:

The Town of Arlington, Massachusetts

Stephanie L. Lucarelli
Town Clerk

BY: _____
Adam W. Chapdelaine, Town Manager

PLEASE SIGN / SEAL /
ATTEST ALL & LOAN
AGREEMENTS.

THANKS

FINANCIAL ASSISTANCE AGREEMENT

BY AND BETWEEN

THE AUTHORITY

AND

TOWN OF ARLINGTON, MASSACHUSETTS

This Financial Assistance Agreement is made by and between the Massachusetts Water Resources Authority, a body politic and corporate and public instrumentality, existing under Chapter 372 of the Acts of 1984, with its principal place of business at 100 First Avenue Charlestown, MA 02129, ("Authority" or "MWRA") and the Town of Arlington, MA, a municipal corporation duly organized and existing under the laws of the Commonwealth of Massachusetts, with its principal place of business at Town Hall, 730 Massachusetts Avenue, Arlington, MA 02476 ("Awardee") (collectively, "Parties");

WHEREAS, on August 19, 1992 the Authority Board of Directors voted to approve a program whereby the Authority was permitted to offer financial assistance to certain local communities committed to infiltration and inflow reduction or sewer system rehabilitation; and

WHEREAS, the Awardee intends to conduct, or is conducting, an infiltration/inflow ("I/I") reduction or sewer system rehabilitation project ("Project"); and

WHEREAS, the Awardee filed a Financial Assistance Application in which it furnished information about the Project to the Authority; and

WHEREAS, the MWRA will provide financial assistance to the Awardee for its Project under certain terms and conditions, hereinafter provided.

NOW THEREFORE, in consideration of the foregoing and the promises contained herein, the Parties agree that the Authority will provide and the Awardee will accept financial assistance under the following terms and conditions:

I. SCOPE OF SERVICES.

The Awardee has entered into or will enter into, within ninety (90) days of the execution of this Agreement, a contract with a consultant or contractor for sewer rehabilitation and/or I/I reduction services, in accordance with the Awardee's competitive procurement practice, and the scope of such work is listed in Attachment A.

II. FINANCIAL ASSISTANCE.

A. The Authority shall provide financial assistance ("Award") to the Awardee in the form of both a grant and a loan. The total amount of the Award shall be \$ 800,000 of which \$ 600,000 shall be in the form of a grant ("Grant") and \$ 200,000 shall be in the form of an interest-free loan ("Loan").

B. The Loan shall be governed by the attached Loan Agreement, which is incorporated herein by reference as Attachment C.

C. Upon execution of the Loan Agreement, the Authority shall initiate an electronic transfer for the total Award through the Automated Clearing House (ACH) having a pay date three business days after the execution date, including both the grant and the loan, to the following designated account of the Awardee:

MMDT Account No. 44261014 (Federated Account No. 1003275)

D. The Authority shall not be obligated to provide additional financial assistance above the Award amount regardless of additional Project costs which may be incurred by the Awardee.

E. In the event that the Project is not initiated as outlined in the Project Schedule, the Awardee shall return the entire Grant to the Authority within ninety (90) days.

III. EFFECTIVE DATE OF AGREEMENT.

This agreement will not become effective until the Loan Agreement is fully executed.

IV. TERM.

The term of this Agreement shall begin upon the date of execution of this Agreement, including the execution of the Loan Agreement, and shall be in effect until the Awardee fully repays the Loan to the Authority in accordance with the terms of the Loan Agreement. As evidence that the final payment has been made, the Authority will send a letter to the Awardee indicating that the Loan has been discharged.

V. PROJECT SCHEDULE.

Implementation of the Project must begin within ninety (90) calendar days of execution of the Agreement, including the Loan Agreement, or all grant funds must be returned to the Authority. The Project must comply with the Project Schedule listed in Attachment B.

It is the obligation of the Awardee to obtain all licenses, permits, easements or any other approvals necessary to begin and successfully complete the Project.

VI. EXPENDITURE VERIFICATION REQUIREMENTS.

A. Throughout the completion of the Project Scope of Services, the Awardee shall submit progress reports to the Authority, on forms provided by the Authority, which outline the overall progress of the Project, the progress of key Project tasks, and the total Project cost expended to date. The frequency and schedule for progress reporting is outlined within the Phase I/I Local Financial Assistance Program Guidelines. Progress reports shall be submitted to:

Massachusetts Water Resources Authority
Charlestown Navy Yard
100 First Avenue
Boston, MA 02129
Attn: Community Support Program

B. The Awardee shall append to each progress report information which documents eligible Project costs, including, but not limited to, consultant and/or contractor invoices; awardee labor, equipment, materials and other costs; and ancillary expenses. Time sheets and work summaries documenting any requests for force account work reimbursement must also be provided.

C. The Awardee shall exercise its best efforts to accomplish the Project set forth in the Scope of Services within the Award Amount established. In the event that an increase or decrease in the total Project cost is anticipated, or in fact occurs, the Awardee shall immediately notify the Authority in writing, and shall submit a status report including reasons for changes in Project cost, work completed to date, total dollars expended to date, and an estimate of the cost required to complete the Project.

VII. PROJECT INSPECTION.

The Awardee shall make the Project site and all Project records available to the Authority staff for review during the course of the Project. Authority staff may periodically monitor the progress of work to insure that the Project is: (1) proceeding substantially as defined in the Scope of Services; (2) proceeding substantially within the Project Schedule; and (3) proceeding in a manner which will substantially produce the quantitative I/I reduction result which the Awardee estimated would be achieved in the Financial Assistance Application.

VIII. PROJECT CLOSEOUT PROVISIONS.

A. Upon completion of the Project, the Awardee shall notify the Authority that the Project is complete and shall certify, on a form provided by the Authority, that all work included in the Scope of Services has been completed and performed in accordance with this Agreement. The Awardee shall submit to the Authority a Project closeout package which shall include a summary of all Project expenditures and the final Project cost.

B. If the final Project cost meets or exceeds the Award, no revision to the Grant shall be made during Project closeout.

C. If the final Project cost is less than the Award, a revision to the Grant shall be made during Project closeout. The difference between the Award and the final Project closeout cost will be calculated and defined as the Project "Shortage Amount". The existence of a Project Shortage Amount will not affect the Loan repayment amount or schedule.

D. In the event that a Project Shortage Amount exists, the Awardee agrees to repay seventy-five (75%) of such Project Shortage Amount to the Authority. The Authority will send the Awardee a separate invoice for payment of the Project Shortage Amount forty-five (45) days prior to the next loan repayment date.

IX. PROJECT AUDIT PROVISIONS.

A. The Awardee, its engineers, and its contractors shall maintain books, records, and other documents that pertain to and involve transactions related to this Agreement in accordance with generally accepted accounting principals. The Awardee, its engineers, and its contractors shall also maintain the financial information and data used by the engineers and contractors in the preparation or support of all invoices and progress reports. The Authority and any other duly authorized person, shall have access to such books, records, documents, and other evidence for inspection, audit, and copying during normal business hours, upon ten (10) days notice and at the Authority's expense. The Awardee, its engineers, and its contractors shall provide proper facilities for such access and inspection. All documents shall be kept for at least seven (7) years after either the final payment to the engineer or contractor or after the closeout of the Project, whichever is later.

B. The Awardee agrees to include the wording of Section IX A, above, in all contracts and subcontracts hereafter awarded to third party contractors, vendors and service providers related to this Agreement.

C. Audits conducted by the Authority, or its duly authorized representatives, shall be in accordance with generally accepted government auditing standards and established procedures and guidelines of the Authority. Such audits shall be conducted at the expense of the Authority upon ten (10) days notice to the Awardee.

D. The Awardee agrees to provide the Authority with a copy of the Awardee's annual audited financial statements within a reasonable time after the issuance thereof, together with a certificate of the Awardee stating that the Awardee is in compliance with its obligations under this agreement.

X. INTERACTION WITH OTHER PROGRAMS OF ASSISTANCE.

The Awardee certifies that it has not and will not receive financial assistance under the State Revolving Fund (SRF) or any other state, federal, or other program of funding assistance for any Project costs for which financial assistance has been provided by the MWRA I/I Local Financial Assistance Program.

XI. AUTHORITY TO EXECUTE AGREEMENT.

Prior to the execution of this Agreement, the Awardee shall take all steps necessary to authorize it to properly execute this Agreement.

XII. GOVERNING LAW.

This Agreement shall be governed by and construed and enforced in accordance with the laws of the Commonwealth of Massachusetts.

XIII. COMPLIANCE WITH LOCAL LAWS.

The Awardee shall comply with all applicable laws, ordinances, and codes of the state and local governments, and shall commit no trespass on any public or private property in performing any of the work embraced by this Agreement.

XIV. INVALIDITY OF PARTICULAR PROVISIONS.

If any provision of this Agreement shall to any extent be held invalid or unenforceable, the remainder of this Agreement shall not be deemed affected thereby.

XV. CONTRACTING/SUBCONTRACTING.

The Awardee shall have no capacity to involve the Authority in any contract nor to incur any liability on the part of the Authority.

XVI. CHANGES TO SCOPE OF SERVICES.

The Authority and the Awardee may, during the course of the project, mutually agree to revisions in the Scope of Services or Project Schedule. Such changes shall be incorporated into this Agreement by written amendment.

XVII. PROVISION OF CONTRACTS.

The Awardee agrees to submit to the Authority an executed copy of each contract for engineering services or construction relevant to the Scope of Services.

XVIII. EQUAL EMPLOYMENT OPPORTUNITY.

The Awardee shall not discriminate against any employee or applicant for employment because of race, religion, color, sex, age, handicap status or national origin. The Awardee, its engineer(s), and its contractor(s) shall comply with all applicable laws and regulations pertaining to nondiscrimination, equal opportunity and affirmative action, including without limitation executive orders and rules and regulations of federal and state agencies of competent jurisdiction. The Awardee shall make positive efforts to achieve a goal of 7.18 percent participation of Minority-owned Business Enterprise(s) and 5.77 percent participation of Woman-owned Business Enterprise(s) within Professional Services contracts which are funded through financial assistance under this Agreement. For Non-Professional Services category work, the Awardee should make positive efforts to achieve a goal of 5.61 percent participation of Minority-owned Business Enterprise(s) and a goal of 4.88 percent participation of Woman-owned Business Enterprise(s) within project contracts.

For Construction, the Awardee shall require all construction contractors and subcontractors to make positive efforts to achieve: (1) a minority employee work force goal of 15.30 percent, (2) a woman employee work force goal of 6.90 percent, (3) a goal of 7.24 percent participation of Minority-owned Business Enterprise(s), and (4) a goal of 3.60 percent participation of Woman-owned Business Enterprise(s) within the project contracts.

XIX. INDEMNIFICATION.

The Awardee, at its expense, shall defend and shall indemnify and hold harmless the Authority, its members, officers and employees, from and against any and all claims, causes of action, suits, losses, damages and expenses, including attorneys' fees, arising out of or resulting from any acts, errors or omissions or breach of contractual duties by the Awardee and anyone employed by it (including Contractors, Subcontractors and/or Consultants and their employees) in performance of this Agreement. Such obligation shall not be construed to negate or abridge any other obligation of indemnification running to the Authority which would otherwise exist.

XX. MEMBERS, EMPLOYEES NOT LIABLE.

No member or employee of the Authority shall be charged personally or held contractually liable by or to the Awardee under any term or provision of this Agreement or because of any breach thereof or because of its execution or attempted execution.

XXI. INTEREST OF AWARDEE.

The Awardee covenants that its Contractors, Subcontractors and/or Consultants presently have no interest and shall not acquire any interest, direct or indirect, in the property to which this Agreement pertains or any parcels therein or any other interest which would conflict in any manner or degree with the performance of its services hereunder. The Awardee further covenants that no person having any such interest shall be employed in the performance of this Agreement.

XXII. INTEREST OF EMPLOYEES; M.G.L.C. 268A.

Neither Awardee, nor its Contractors, Subcontractors and/or Consultants shall, during the term of this Agreement, hire or employ on either a full-time or part-time basis any person or persons so long as such person shall be employed by the Authority.

The Awardee acknowledges that the Authority is a state agency for the purposes of Chapter 268A of the Massachusetts General Laws (the Massachusetts Conflict of Interest statute). The Awardee agrees to take actions and to forbear from taking actions, as circumstances require, so as to be in compliance at all time with said statute.

XXIII. ASSIGNABILITY.

The Awardee shall not assign any interest, in whole or in part, in this Agreement and shall not transfer any interest in the same, whether by assignment or novation, without the prior written approval of the Authority.

XXIV. PAYMENT NOT A WAIVER.

The Authority's payment to Awardee under this Agreement or its review, approval or acceptance of any actions by Awardee under this Agreement shall not operate as a waiver of any rights under this Agreement and the Awardee shall remain liable to the Authority for all damages incurred by the Awardee's failure to perform in accordance with the terms and conditions of this Agreement.

The rights and remedies of the Authority provided for under this Agreement are in addition to any other rights or remedies provided by law. The Authority may assert a right to recover damages by any appropriate means, including but not limited to set-off, suit, withholding, recoupment, or counter-claim either during or after performance of this Agreement.

XXV. TERMINATION OF THE AGREEMENT FOR CAUSE.

If, through any cause, the Awardee shall fail to fulfill in a timely and proper manner its obligations under this Agreement (including performance of the Scope of Services and maintenance of the Project Schedule); or if it is determined that there is probable cause to believe that the Award was obtained on the basis of fraud, deceit, or illegality; or if the Awardee has failed to comply with the terms and conditions of this Agreement; the Authority shall hereupon have the right to terminate this Agreement by giving written notice to the Awardee of such termination and specifying the effective date thereof.

The Awardee agrees that if this Agreement is terminated by the Authority, the Awardee shall immediately repay to the Authority the full Grant which is identified in Section II, above. The Awardee also agrees that the Loan shall not be affected by such termination and that the separate Loan Agreement shall remain in full effect.

XXVI. ATTACHMENTS.

Attachments to this Agreement are incorporated herein and are as follows:

Attachment A Scope of Services
Attachment B Project Schedule
Attachment C Loan Agreement

XXVII. PROJECT SPECIFIC ADDITIONAL TERMS AND CONDITIONS.

1. All reports prepared in conjunction with this project shall be submitted to the Authority for review and approval.
2. The community will submit to the Authority the proposed project's plans and specifications upon their completion for review and approval.
3. The Authority will be informed of the contract award for the construction phase of the proposed rehabilitation project and forwarded bid tabulation and contractor intent to award / notice to proceed documentation. The community will inform the Authority of the date for Final Inspection for the construction phase of the proposed rehabilitation project.

IN WITNESS WHEREOF, the parties have executed this Agreement this _____ day of _____, 2019.

MASSACHUSETTS WATER RESOURCES AUTHORITY

BY: _____
Matthew R. Horan, Treasurer

AWARDEE: Town of Arlington, Massachusetts

BY:  _____
Adam W. Chapdelaine, Town Manager

**MWRA I/I LOCAL FINANCIAL ASSISTANCE PROGRAM - PHASE 11
ATTACHMENT A
FINANCIAL ASSISTANCE AGREEMENT**

TOWN OF ARLINGTON, MASSACHUSETTS

**PHASE #11 SANITARY SEWER REHABILITATIONS
PHASE #9 POST-CONSTRUCTION FLOW EVALUATION**

MWRA PROJECT NO. WRA-P11-01-3-1117

SCOPE OF SERVICES

The purpose of these projects is to identify and rehabilitate community sewer subareas that contribute excessive I/I, evaluate rehabilitation options and rehabilitate the sewer system on a continuous set schedule. Project work will include, but not be limited to, the following:

Phase #11 Sanitary Sewer Rehabilitation Construction: Construction of cost-effective / value-effective sewer rehabilitations. Sewer rehabilitation work includes: performing 1553 LF of sewer pipe root treatment; cleaning and inspecting 604 LF of 8-inch sewer; testing (48) 8-inch pipe joints; sealing (30) 8-inch pipe joints; installing 50 LF of 8-inch PVC gravity sewer; CIP pipe lining of 7536 LF of 6, 8 and 12-inch sewer pipe; installing eight (8) LF of CIP short liners; installing five (5) CIP lateral liners; grouting 162 reinstated service connections; grouting 10 service connections; installing 45 LF of 6-inch PVC building connections; cutting three (3) protruding service connections; performing cementitious lining of existing sewer manholes (2314 VF); grouting seven (7) sewer manholes; installing two (2) sewer manhole inflow dishes; furnishing & installing two (2) manhole frames & covers; raising two (2) manholes frames & covers to grade; performing 8140 LF of post-construction flow isolation; and the performance of all other work pursuant to the terms and conditions detailed within the plans and specifications of the Town of Arlington Phase #11 Sanitary Sewer Rehabilitations and the approved MWRA Phase 11 I/I Local Financial Assistance Project Application received April 18, 2019. Project work is located in Arlington Investigation Areas #1 through #11.

Phase #9 Post-Construction Flow Evaluation: Flow Evaluation work includes: compiling and reviewing flow isolation data collected as part of the Phase #9 Sanitary Sewer Rehabilitation Project (MWRA Project No. WRA-P9-01-3-960); preparing a line segment to line segment comparison of flow isolation data; and providing an estimate of the infiltration removed during the Phase #9 Sanitary Sewer Rehabilitation Project.

Overall project cost is estimated at \$800,000. Eligible MWRA I/I Local Financial Assistance is \$800,000 (Phase #11 Sanitary Sewer Rehabilitation Construction: \$635,000 / Phase #11 Sanitary Sewer Rehabilitation Construction Services: \$150,000 / Phase #9 Post-Construction Flow Evaluation: \$15,000). As a result of the above Phase #11 Sanitary System Rehabilitation work, an estimated 0.04 mgd of peak infiltration will be removed from the collection system upon contract completion.

**MWRA I/I LOCAL FINANCIAL ASSISTANCE PROGRAM - PHASE 11
ATTACHMENT B
FINANCIAL ASSISTANCE AGREEMENT**

TOWN OF ARLINGTON, MASSACHUSETTS

**PHASE #11 SANITARY SEWER REHABILITATIONS
PHASE #9 POST-CONSTRUCTION FLOW EVALUATION**

MWRA PROJECT NO. WRA-P11-01-3-1117

PROJECT SCHEDULE

<u>Item</u>	<u>Start Date</u>	<u>Completion Date</u>
Phase #11 Sanitary Sewer Rehabilitations:		
Construction	May 2019	November 2019
Warranty Retesting	May 2020	June 2020
Phase #9 Post-Construction Flow Evaluation:		
Study	May 2019	August 2019



Town of Arlington, Massachusetts

Minutes of Meetings: April 8, 2019; April 17, 2019; April 22, 2019; April 29, 2019

ATTACHMENTS:

	Type	File Name	Description
▢	Reference Material	4.8.19_draft_minutes.docx	04.08.2019 Draft Minutes
▢	Reference Material	4.17.19_draft_minutes.docx	04.17.2019 Draft Minutes
▢	Reference Material	4.22.19_draft_minutes.docx	04.22.2019 Draft Minutes
▢	Reference Material	4.29.19_draft_minutes.docx	04.29.2019 Draft Minutes

TOWN OF ARLINGTON
SELECT BOARD
MEETING MINUTES

April 8, 2019
7:15 PM

Select Board Chambers, 2nd Floor, Town Hall

Present: Mr. Dunn, Chair, Mrs. Mahon, Vice Chair, Mr. Curro, Mr. Hurd and Mr. DeCoursey
Also Present: Mr. Chapdelaine, Mr. Heim, and Mrs. Krepelka

1. Organizational Meeting for the Purpose of Electing a Chair and a Vice Chair
Marie A. Krepelka, Board Administrator

The first order of business was to have an organizational meeting for electing a Chair and Vice Chair. Mrs. Krepelka asked for nominations from the Board. Mr. Hurd nominated Mrs. Mahon seconded by Mr. Curro.

A roll call vote was taken and Mrs. Mahon was elected Chair. SO VOTED (5-0)

Mrs. Krepelka asked for nominations from the Board for Vice Chair. Mr. Curro nominated Mr. Dunn seconded by Mrs. Mahon.

A roll call was taken and Mr. Dunn was elected Vice Chair. SO VOTED (5-0)

The organizational meeting was dissolved and Mrs. Krepelka handed the gavel over to Mrs. Mahon. Mrs. Mahon congratulated Mr. DeCoursey on his election to the Board.

2. Presentation: Arlington High School Building Committee
Jeff Thielman, AHSBC

Mr. Thielman and the Arlington High School Building Committee gave a presentation before the Board. The Town will vote to fund the school in a Special Election as the proposal requires a debt-exclusion including two-thirds support to fund the \$291 million project. Mr. Thielman stated a new school is necessary due to growing enrollment and serious concerns about the current building's ability to be accredited. He stated that enrollment is nearly at capacity and it will exceed capacity in a few years.

Arlington High School Principal, Matthew Janger, stated that Arlington is not a normal high school. It ranks as the ninth best high school in the state and if Massachusetts were a country, it would be one of the highest ranked countries in terms of education.

Town Manager, Adam Chapdelaine, stated the high price tag is partially because of a building expansion in the Boston area that has led construction costs to skyrocket.

Select Board Member Curro stated that Arlington residents take great pride in the quality of their education, but the current condition of the school is embarrassing.

Select Board Member Hurd echoed the same sentiments and stated he is very impressed with how the committee has handled public input to the project.

The Board thanked the Arlington High School Building Committee for an excellent presentation. Select Board Member Curro stated he knows this project has been a herculean effort to balance with many demands from the public and cannot thank them enough for their presentation tonight.

Mr. Dunn moved approval to support the building of Arlington High School. SO VOTED (5-0)

CONSENT AGENDA

3. Reappointment: LGBTQIA + Rainbow Commission
Mel Goldsipe (term to expire 1/31/2022)
4. Request: Special (One Day) All Alcohol License, 5/4/19 @ the Robbins Library Reading Room for a Private Event
Jenny Cascio and Russ Gautier
5. Request: Special (One Day) All Alcohol License, 5/18/19 @ Fidelity House, 25 Medford Street for Annual Fundraiser
Frank Tessitore, President, Friends of Fidelity House
6. Appointment of New Election Workers: (1) P.J. Gardner, 22 Hamilton Road, D, Pct. 1; (2) Karen Meehan, 54 Medford Street, U, Pct. 10; (3) Joseph Murphy, 155 Warren Street, R, Pct.9; (4) Alex Wilson, 438 Massachusetts Ave., D, Pct. 11

Mr. Hurd moved approval subject to all conditions as set forth. SO VOTED (5-0)

LICENSES & PERMITS

7. For Approval: Common Victualler License
Abbott's Frozen Custard, 311 Broadway, Jason Denoncourt

Mr. Curro moved approval subject to all conditions as set forth. SO VOTED (5-0)

TRAFFIC RULES & ORDERS / OTHER BUSINESS

8. For Approval: Transportation Advisory Committee Recommendations:

a) Stop Signs on Hayes Street @ Mystic Lake Drive and Hayes Street @ Maynard Street
Howard Muise, Chair

Mr. Muise, Chair of TAC, asked the Select Board to authorize installation of STOP signs on both approaches of Mystic Lake Drive and Maynard Street to Hayes Street. The original request suggests that Stop signs could be used to slow traffic travelling on Hayes Street, although a speeding issue has not been established. Mr. Muise stated that this is an inappropriate use of

Stop signs. Stop signs control right-of-way at intersections and MUTCD guidance notes that "Yield or Stop signs should not be used for speed control." Volume data collected by the APD shows that approximately 106 vehicles travel eastbound on Hayes Street towards Medford Street each morning in the peak hour between 8-9 a.m. The highest morning peak hour volume was 156 vehicles on Wednesday, October 17, and the lowest was 70 vehicles on Friday, October 19. Similarly, about 106 vehicles travel eastbound on Hayes Street during the evening peak hour between 5-6 p.m. Westbound traffic volumes traveling on Hayes Street towards Mystic Valley Parkway are considerably less, with fewer than 20 vehicles on average during the morning and evening peak periods.

b) Thorndike Street at Magnolia Park Entrance

Howard Muise, Chair

At its October 22, 2018 meeting, the Select Board voted to forward to TAC a request for traffic calming on Thorndike Street at the Magnolia Park entrance. Bill Palmteer, a resident of Thorndike Street, made the request. Dan Amstutz, Senior Transportation Planner with the Planning Department met with Mr. Palmteer to better understand his concern, which primarily involved making drivers more aware of the park entrance, especially for drivers who may not use the street regularly.

Based on Mr. Amstutz's site visit and meeting with Mr. Palmteer, the TAC voted to recommend the following:

1. The Select Board should establish a no parking area 20 feet either side of the park entrance on the southbound side of Thorndike Street. This would eliminate parked cars blocking driver's view of people exiting the park entrance.
2. The Department of Public Works should install playground warning signs on both approaches to the park entrance.

Mr. Curro moved approval.

SO VOTED (5-0)

9. Arlington Commission for Arts and Culture Annual Report 2018

Adria Arch, Stephanie Marlin-Curiel, ACAC Co-Chairs

Ms. Arch stated the mission of the new Arlington Commission for Arts and Culture is to promote and develop programs that integrate arts and culture into daily life, expand creative opportunities, and foster a vibrant, sustainable arts scene to engage a diverse range of artists, residents, businesses and visitors. Ms. Arch stated that this has been a significant transitional year for the Arlington Commission for Arts and Culture (formerly, Arlington Commission on Arts and Culture). While the bylaw was being reviewed by the State Attorney General's Office, applications to join the new ACAC poured in. ACAC is excited to welcome many new members to the Commission and to our Action Committees. The expanded Commission launched in September of 2018.

The Board thanked Ms. Arch and everyone who volunteered to work on the Arts and Culture Committee.

Mr. Curro moved receipt of said report.

SO VOTED (5-0)

10. For Approval: Chairful Where You Sit at Uncle Sam Plaza, June 8

Adria Arch

Chair, Arlington Public Art

Co-Chair, Arlington Commission for Arts and Culture

The Arlington Public Art, a committee of the Arlington Commission for Arts and Culture requests permission to use the Uncle Sam Plaza as their site for this year's fundraiser and community public art event, Chairful Where You Sit.

Mr. Curro moved approval.

SO VOTED (5-0)

11. Discussion & Vote: Override and Debt Exclusion
Daniel J. Dunn, Select Board

Mr. Dunn and Mr. Curro presented revisions to the original commitments that were proposed. The Board discussed these revisions and will come back to vote on the Override and Debt Exclusion at the meeting on April 17.

12. Discussion: Future Select Board Meetings

The Board moved to schedule the following Select Board Meetings:

April 17, 2019

April 22, 2019

May 6, 2019

May 20, 2019

June 3, 2019

June 17, 2019

July 22, 2019

August 12, 2019

13. Vote: Approval of Town Manager's Evaluation
Daniel J. Dunn

The Board members overall are extremely pleased to have Adam Chapdelaine as Town Manager and look forward to working with him as Town Manager for many years to come.

Mr. Chapdelaine thanked the Board for all their kind remarks and stated he thinks it is helpful for him to receive this kind of positive feedback and critical feedback so he can continue to see where he can focus and improve.

Mrs. Mahon also thanked Caryn Malloy for doing an excellent job in preparing Adam's performance review.

Mr. Dunn moved approval of said performance evaluation.

SO VOTED (4-0-1)*

*Mr. DeCoursey did not vote since he was not a member of the Select Board.

DRAFT VOTES FOR SELECT BOARD REPORT TO TOWN MEETING

14. Articles for Approval:
- Article 27 Bylaw Amendment/Town Meeting Speaking Times
 - Article 28 Bylaw Amendment/Recycling Committee Membership and Mission
 - Article 29 Bylaw Amendment/Regulation of Polystyrene
 - Article 31 Bylaw Amendment/Rename Community Preservation Committee
 - Article 32 Bylaw Amendment/Tree Protection and Preservation
 - Article 33 Bylaw Amendment/Notice of Demolition
 - Article 34 Bylaw Amendment/Regulation of Outdoor Lighting - Dark Skies Bylaw
 - Article 35 Bylaw Amendment/Short-Term Rental Regulations
 - Article 36 Bylaw Amendment/Election Modernization Study Group
 - Article 37 Vote/Remove Police Chief from Civil Service
 - Article 41 Vote/Arlington Redevelopment Board Membership and Terms
 - Article 42 Home Rule Legislation/Town Treasurer
 - Article 44 Home Rule Legislation/CPA Surcharge Exemption for Senior Homeowners
 - Article 45 Extending Local Voting Rights to All Legal Permanent Arlington Residents
 - Article 47 Acceptance of Legislation/ PEG Access Fund
 - Article 50 Local Option/Short Term Rental Impact Fees
 - Article 53 Endorsement of Parking Benefit District Expenditures
 - Article 78 Resolution/Indigenous Peoples' Day

Mr. Curro moved approval.

SO VOTED (4-0-1)*

*Mr. DeCoursey did not vote since he was not a member of the Select Board.

FINAL VOTES & COMMENTS

Articles for Review:

- Article 26 Bylaw Amendment/Billboards and Signs
- Article 30 Bylaw Amendment/Waterline Replacement (tabled from 3/25/19 meeting)
- Article 38 Vote/Set Senior Tax Deferral Limit
- Article 39 Vote/Authorization to Deaccession Town Property-Library Art Prints
- Article 40 Vote/Robbins Library Parking Costs
- Article 43 Home Rule Legislation/Mean-Tested Senior Tax Relief
- Article 46 Acceptance of Legislation/Establishment of a Commission on Disabilities Fund
- Article 51 Endorsement of CDBG Application
- Article 52 Revolving Funds
- Article 79 Resolution/Overnight Parking Exemption Program for Medical and Financial Hardships

Please find reference under Agenda Item 14

Mr. Dunn moved approval except for Article 30 - Bylaw Amendment Waterline Replacement.

SO VOTED (4-0-1)*

*Mr. Decourcey did not vote since he was not a member of the Select Board.

CORRESPONDENCE RECEIVED

15. Request for a Cross Walk on Grove Street
Carla Rice, 35 College Avenue

Mr. Curro referred Ms. Rice to the TAC for review and recommendations.

Mr. Curro moved receipt of “Correspondence Received”

SO VOTED (5-0)

NEW BUSINESS

Mr. DeCoursey stated he attended the Arlington High School Performing Arts Musical 'Me & My Girl' on Friday, April 5th. It was a great performance and a sellout crowd.

Mrs. Mahon asked if the Manager could contact Verizon regarding the X marks on several poles throughout town and ask what can take off said marks.

Mrs. Mahon asked Town Counsel to prepare for the Cannabis procedures and applications along with the new alcohol license hearings after Town Meeting is over.

Mr. Curro moved to adjourn at 10:05 p.m.

SO VOTED (5-0)

Next Scheduled Meeting of Select Board Wednesday, April 17, 2019

A true record attest:

Marie A. Krepelka
Board Administrator

4/8/19

Agenda Item	Documents Used
1	Organizational Meeting for the Purpose of Electing a Chair and a Vice Chair Marie A. Krepelka, Board Administrator
2	Presentation: Arlington High School Building Committee Jeff Thielman, AHSBC
3	Reappointment: LGBTQIA + Rainbow Commission Mel Goldsipe (term to expire 1/31/2022)
4	Request: Special (One Day) All Alcohol License, 5/4/19 @ the Robbins Library Reading Room for a Private Event Jenny Cascio and Russ Gautier
5	Request: Special (One Day) All Alcohol License, 5/18/19 @ Fidelity House, 25 Medford

	Street for Annual Fundraiser Frank Tessitore, President, Friends of Fidelity House
6	Appointment of New Election Workers: (1) P.J. Gardner, 22 Hamilton Road, D, Pct. 1; (2) Karen Meehan, 54 Medford Street, U, Pct. 10; (3) Joseph Murphy, 155 Warren Street, R, Pct.9; (4) Alex Wilson, 438 Massachusetts Ave., D, Pct. 11
7	For Approval: Common Victualler License Abbott's Frozen Custard, 311 Broadway, Jason Denoncourt
8	For Approval: Transportation Advisory Committee Recommendations: a) Stop Signs on Hayes Street @ Mystic Lake Drive and Hayes Street @ Maynard Street b) Thorndike Street at Magnolia Park Entrance Howard Muise, Chair
9	Arlington Commission for Arts and Culture Annual Report 2018 Adria Arch, Stephanie Marlin-Curiel, ACAC Co-Chairs
10	For Approval: Chairful Where You Sit at Uncle Sam Plaza, June 8 Adria Arch Chair, Arlington Public Art Co-Chair, Arlington Commission for Arts and Culture
11	Discussion & Vote: Override and Debt Exclusion Daniel J. Dunn, Select Board
12	Discussion: Future Select Board Meetings
13	Vote: Approval of Town Manager's Evaluation Daniel J. Dunn
14	Articles for Approval: Article 27 Bylaw Amendment/Town Meeting Speaking Times Article 28 Bylaw Amendment/Recycling Committee Membership and Mission Article 29 Bylaw Amendment/Regulation of Polystyrene Article 31 Bylaw Amendment/Rename Community Preservation Committee Article 32 Bylaw Amendment/Tree Protection and Preservation Article 33 Bylaw Amendment/Notice of Demolition Article 34 Bylaw Amendment/Regulation of Outdoor Lighting - Dark Skies Bylaw Article 35 Bylaw Amendment/Short-Term Rental Regulations Article 36 Bylaw Amendment/Election Modernization Study Group Article 37 Vote/Remove Police Chief from Civil Service Article 41 Vote/Arlington Redevelopment Board Membership and Terms Article 42 Home Rule Legislation/Town Treasurer Article 44 Home Rule Legislation/CPA Surcharge Exemption for Senior Homeowners Article 45 Extending Local Voting Rights to All Legal Permanent Arlington Residents Article 47 Acceptance of Legislation/ PEG Access Fund Article 50 Local Option/Short Term Rental Impact Fees Article 53 Endorsement of Parking Benefit District Expenditures Article 78 Resolution/Indigenous Peoples' Day
15	Request for a Cross Walk on Grove Street Carla Rice, 35 College Avenue

TOWN OF ARLINGTON
SELECT BOARD
Meeting Minutes

April 17, 2019
7:15 PM

Select Board Chambers, 2nd Floor, Town Hall

Present: Mrs. Mahon, Chair, Mr. Dunn, Vice Chair, Mr. Curro, Mr. Hurd, Mr. DeCoursey
Also Present: Mr. Chapdelaine, Mr. Heim, Mrs. Krepelka

CONSENT AGENDA

1. Farmers' Market 2019
Patsy Kraemer, Market Manager
2. Request: Contractor/Drainlayer License
Knight Excavation Company, Inc., 410 Lebanon Street, Malden, MA
3. Request: Special (One Day) Beer & Wine License, 4/28/19 at Whittemore Robbins
House for 'Japanese Sister City Dinner'
Sue Sheffler
4. Request: Special (One Day) Beer & Wine License, 5/4/19 @ Arlington Masonic Hall for
the Arlington Center for the Arts 'Jugband Festival'
Linda Shoemaker, ACA
5. Appointment of New Election Workers: (1) Sean Brogan, 20 Old Mystic Street, U, Pct. 3;
(2) Evelyn Ginsparg, 370 Gray Street, D, Pct. 14

Mr. Curro moved approval subject to all conditions as set forth.

SO VOTED (5-0)

CITIZENS OPEN FORUM

Except in unusual circumstances, any matter presented for consideration of the Board shall neither be acted upon, nor a decision made the night of the presentation in accordance with the policy under which the Open Forum was established. It should be noted that there is a three minute time limit to present a concern or request.

No one appeared before the Board for Citizens Open Forum.

TRAFFIC RULES & ORDERS / OTHER BUSINESS

6. For Approval: MBTA Bus Stop Signage Installation and Replacement Initiative,
Wachusett Avenue @ Florence Avenue

Daniel Amstutz, Senior Transportation Planner
(tabled from 2/25/19 meeting)

The bus stop under additional review is on the southbound side of Wachusett Avenue approximately 125' south of the intersection with Wachusett Avenue and Florence Avenue. An MBTA bus sign is currently located on a utility pole in front of the residence at 131 Wachusett Avenue. This pole is approximately 25' south of the driveway leading into 131 Wachusett Avenue. As a result, the bus stop appears to be only 25' long if the driveway is not taken into account.

The MBTA proposes to place a second bus stop sign 25' north of the driveway at 131 Wachusett Avenue to delineate the bus stop zone in this area. This would extend the bus stop to be approximately 60-70' long, which is the MBTA's minimum stop length for a far-side bus stop based on their 2018 Bus Stop Planning Design Guide. This stop is considered to be on the "far-side", where the stop is located after the intersection, and the standard stop configuration is diagrammed in the Bus Stop Planning and Design Guide under 4-2.

The MBTA has communicated to the Town that extending the bus stop zone is a critical aspect of ensuring that all bus stops in the MBTA system are accessible to persons with disabilities and for the safety of bus riders, drivers, and residents.

The Arlington Disability Commission at their March 20, 2019 meeting voted to unanimously support the MBTA's request to lengthen bus stop zones, including this stop at Wachusett and Florence Avenue. Staff request that the Select Board approve the new bus stop sign at this location and the associated parking restrictions be put in place. This change will improve safety and accessibility for bus riders, drivers, and residents, the Disability Commission supports this change; the parking impact of this request is minimal; adjacent properties have private driveways; additional on-street parking is available within a short distance from this location; and parking utilization for this street is generally low on a day-to-day basis.

Mr. Curro moved approval.

SO VOTED (5-0)

7. For Discussion and Approval: Calling a Special Election on June 11, 2019, and Approving Override and Debt Exclusion Questions
Diane M. Mahon, Chair

Town Counsel presented the legal requirements for a Special Election Override and Debt Exclusion Ballot Questions.

The Board voted to put the following two questions on the Ballot for Special Election to be held on Tuesday, June 11, 2019:

1. "Shall the Town of Arlington be allowed to exempt from the provisions of Proposition two-and-one-half, so called, the amounts required to pay for the bond or bonds issued for the purposes of paying costs of a project to demolish, design, construct, reconstruct, remodel, add to,

and originally equip the Arlington High School, including replacing , the existing facility located at 869 Massachusetts Avenue, Arlington, MA, and for the payment of all other costs incidental and related thereto?

YES _____ NO _____

2. "Shall the Town of Arlington be allowed to assess an additional \$5,500,000 in real estate and personal property taxes for the purposes of funding the operating budgets of the Town and the Public Schools for the fiscal year beginning July first, 2019?

YES _____ NO _____

Motion to place the two ballot questions includes the adoption of the commitments by the Select Board to the residents of Arlington.

Mr. Dunn moved approval.

SO VOTED (5-0)

NEW BUSINESS

Town Counsel Heim stated the Host Community Agreement Applications will be available on line Thursday, April 18th, due on Friday, May 3 at 12:00 Noon.

Mr. Chapdelaine stated he attended the Patriots' Day Parade with his family and thanked the Committee for a wonderful Parade.

Mr. Chapdelaine also reminded the Board that the Truck Pull will be held on Saturday, April 27th, at 9:30 a.m. at Saint Camillus Parking Lot and all members are welcomed.

Select Board Member DeCoursey congratulated all forty-seven runners from Arlington who participated in the Boston Marathon on Monday, April 15th.

After discussion with other Board Members, Select Board Member Dunn stated that the process for the additional Package Store License will be discussed at a meeting in July.

Select Board Member Hurd attended the Parade and thanked everyone who participated in the Parade as well as all the organizers.

Select Board Member Curro congratulated the staff and the Committee for a wonderful Parade. He also congratulated Grand Marshall of the Parade, Veteran Elias Katsos.

Mr. Curro moved to adjourn at 7:40 p.m.

SO VOTED (5-0)

Next Scheduled Meeting of Select Board April 22, 2019

A true record attest

Marie A. Krepelka
Board Administrator

4/17/19

Agenda Item	Documents Used
1	Farmers' Market 2019 Patsy Kraemer, Market Manager
2	Request: Contractor/Drainlayer License Knight Excavation Company, Inc., 410 Lebanon Street, Malden, MA
3	Request: Special (One Day) Beer & Wine License, 4/28/19 at Whittemore Robbins House for 'Japanese Sister City Dinner' Sue Sheffler
4	Request: Special (One Day) Beer & Wine License, 5/4/19 @ Arlington Masonic Hall for the Arlington Center for the Arts 'Jugband Festival' Linda Shoemaker, ACA
5	Appointment of New Election Workers: (1) Sean Brogan, 20 Old Mystic Street, U, Pct. 3; (2) Evelyn Ginsparg, 370 Gray Street, D, Pct. 14
6	For Approval: MBTA Bus Stop Signage Installation and Replacement Initiative, Wachusett Avenue @ Florence Avenue Daniel Amstutz, Senior Transportation Planner (tabled from 2/25/19 meeting)
7	For Discussion and Approval: Calling a Special Election on June 11, 2019, and Approving Override and Debt Exclusion Questions Diane M. Mahon, Chair

TOWN OF ARLINGTON
SELECT BOARD
Meeting Minutes

April 22, 2019
7:00 PM

Select Board Chambers, 2nd Floor, Town Hall

Present: Mrs. Mahon, Chair, Mr. Dunn, Vice Chair, Mr. Curro, Mr. Hurd, and Mr. DeCoursey
Also Present: Mr. Chapdelaine, Mr. Heim, Mrs. Krepelka

CONSENT AGENDA

1. Request: Lions Club Eyemobile @ Town Hall, Saturday, 5/11/19, 9:00 a.m. - 4:00 p.m.
David Garrity, Secretary, Arlington Lions Club
Mr. Curro moved approval. SO VOTED (5-0)
2. Request: Contractor/Drainlayer License
E.B. Rotondi & Sons, Inc., 21 Manison Street, Stoneham, MA
Mr. Curro moved approval. SO VOTED (5-0)

APPOINTMENTS

3. Arlington Cultural Council
Scott Samenfeld (term to expire 4/30/2022)
Mr. Curro moved approval. SO VOTED (5-0)
4. Community Preservation Committee
Clarissa Rowe (term to expire 6/30/2020)
Mr. Curro moved approval. SO VOTED (5-0)
Mr. Dunn and the other Select Board members all expressed their delight in having Ms. Rowe back on the Community Preservation Committee.

TRAFFIC RULES & ORDERS / OTHER BUSINESS

5. For Approval: Beer Garden @ Jefferson Cutter House Lawn, Saturdays, June – September 2019
Adam W. Chapdelaine, Town Manager
Ronald Friedlander of Aeronaut Brew Company spoke regarding their Beer Garden Proposal for the summer of 2019. Aeronaut's goal in this beer garden series is to create a fun, welcoming environment, and to amplify the voice of our community. They will open the beer garden each Saturday (or Sunday, if there is inclement weather) at noon. Attendees will be free to enter, purchase beer and food and make use of the games and seating areas throughout the event. Attendees who enter with positive ID showing they are age 21+ will receive a wristband. The wristband is designed to keep track of drink purchases, and also contains messaging entitling the

bearer to a discount of local participating businesses. They will provide at least four (4) different Aeronaut beers, plus a guest cider and guest beer each week.

At 1:00 p.m., the first musical act will take the stage. Typical musical acts are family-friendly folk and Americana music, but also included are brass bands, indie rock, country and more to the mix of bookings. They have worked with the Arlington Center for the Arts to connect with local Arlington-based musicians and ensure they are represented among other regional acts.

They book two acts per day, each playing two hour-long sets. The first act will wrap up at 3:00 p.m. and the second act will play from 4:00 p.m. to 6:00 p.m. Each event will have a single food vendor providing meals for purchase to all attendees. They will issue an RFP and select the most qualified food vendors from the Arlington Center area. They require all food vendors to provide non-alcoholic beverages and a vegetarian option, in addition to their other menu selections. They will close the beer garden at 7 p.m. with last call happening at 6:45 p.m.

The Board is delighted to have the Beer Garden back this year.

Mr. Curro moved approval subject to all conditions as set forth. SO VOTED (5-0)

6. For Approval: Annual Report on Symmes Fund

Adam W. Chapdelaine, Town Manager

Mr. Curro moved approval. SO VOTED (5-0)

FINAL VOTES & COMMENTS

Corrections to Select Board Report to Town Meeting Warrant Article 52 Revolving Funds

Mr. Curro moved approval. SO VOTED (5-0)

CORRESPONDENCE RECEIVED

7. Concerns Regarding Town Owned Land at Corner of Rublee Street and Hibbert Street

Jean Caloggero, 130 Hibbert Street

Mr. Hurd moved to forward letter from Mrs. Caloggero to the Town Manager for review.

SO VOTED (5-0)

Mr. Hurd moved receipt of "Correspondence Received".

SO VOTED (5-0)

Mrs. Mahon asked that the Board meet on Monday, April 29th, to vote the following:

During regular Town Meeting and the Special Town Meeting, the Select Board will be in session from 8:00 P.M. until 11:00 P.M.

Mr. Curro moved to adjourn at 7:40 p.m. and to reconvene downstairs for the Annual Town Meeting. SO VOTED (5-0)

Next Scheduled Meeting of Select Board May 6, 2019

A true record attest:

Marie A. Krepelka

Board Administrator

4/22/19

Agenda Items	Documents Used
1	Request: Lions Club Eyemobile @ Town Hall, Saturday, 5/11/19, 9:00 a.m. - 4:00 p.m. David Garrity, Secretary, Arlington Lions Club
2	Request: Contractor/Drainlayer License E.B. Rotondi & Sons, Inc., 21 Manison Street, Stoneham, MA
3	Arlington Cultural Council Scott Samenfeld (term to expire 4/30/2022)
4	Community Preservation Committee Clarissa Rowe (term to expire 6/30/2020)
5	For Approval: Beer Garden @ Jefferson Cutter House Lawn, Saturdays, June – September 2019 Adam W. Chapdelaine, Town Manager
6	For Approval: Annual Report on Symmes Fund Adam W. Chapdelaine, Town Manager
7	Concerns Regarding Town Owned Land at Corner of Rublee Street and Hibbert Street Jean Caloggero, 130 Hibbert Street

Town of Arlington
Select Board
Meeting Minutes

April 29, 2019
7:45 PM

Select Board Chambers, 2nd Floor, Town Hall

Present: Mrs. Mahon, Chair, Mr. Dunn, Vice Chair, Mr. Curro, Mr. Hurd, Mr. DeCoursey
Also Present: Mr. Chapdelaine, Mr. Heim, Mrs. Krepelka

1. During Regular Town Meeting and Special Town Meeting, the Select Board will be in session from 8:00 P.M. until 11:00 P.M.

This meeting was called to order by Select Board Chair Diane Mahon to procedurally announce the following:

Mr. Curro made a motion that during Regular Town Meeting and Special Town Meeting the Board will be in session from 8:00 P.M. to 11:00 P.M. Mr. Hurd seconded the motion.

SO VOTED (5-0)

Mr. Curro moved to adjourn at 7:50p.m. and to reconvene downstairs for the Special Town Meeting.

SO VOTED (5-0)

Next Scheduled Meeting of Select Board May 6, 2019

A true record attest

Marie A. Krepelka
Board Administrator



Town of Arlington, Massachusetts

For Approval: Memorial Day Ceremony, May 27

Summary:

Jeffrey A. Chunglo, Director of Veterans' Services

ATTACHMENTS:

	Type	File Name	Description
▢	Reference Material	Memorial_Day_Ceremony_Request.pdf	Reference



Town of Arlington
Department of Health and Human Services
Department of Veterans' Services
730 Massachusetts Avenue
Arlington, MA 02476

Jeffrey A. Chunglo
Director of Veterans Services

Tel: 781 316-3166
Fax: 781 316-3129

23 APR 2019

Select Board
Town of Arlington
730 Massachusetts Avenue
Arlington, MA 02476

Re: Permit for May 27, 2019

Dear Board Members,

On behalf of the Department of Veterans' Service for the Town of Arlington, I am requesting a permit to allow residents to participate in the annual Memorial Day ceremony and parade. This year, the ceremony will be conducted in the auditorium of the town hall. The ceremony will begin at 09:30.

Following the ceremony, we will march to Mt. Pleasant Cemetery for wreath laying ceremonies at all of our veteran lots. A police escort will be needed along Massachusetts Avenue and Medford Street as we proceed to Mt. Pleasant Cemetery.

During the ceremony, we will be dedicating a POW/MIA chair honoring three Arlington residents that remain Missing in Action. We will also be providing military funeral honors to the family of local veteran who never received these honors after his passing. I hope you will be able to attend.

Very respectfully,

A handwritten signature in black ink, appearing to read "Jeffrey A. Chunglo", is written over a large, stylized, looping flourish.

Jeffrey A. Chunglo



Town of Arlington, Massachusetts

For Approval: Change of Officers - All Alcohol Club License

Summary:

Winchester Country Club, 468 Mystic Street, Paul Lazar

ATTACHMENTS:

	Type	File Name	Description
▢	Reference Material	WCC_-_Change_of_Officers.pdf	Change of Officers Application



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3, Chelsea, MA 02150-2358
www.mass.gov/abcc

APPLICATION FOR AMENDMENT

-Change of Officers, Stock or Ownership Interest

☒ **Change of Officers/ Directors/LLC Managers** ☐ **Change of Stock Interest**

- DOR Certificate of Good Standing
- DUA Certificate of Compliance
- Change of Officer/Directors Application
- CORI Authorization
- Vote of the Entity
- Payment Receipt
- Advertisement
- Business Structure Documents
 - If Sole Proprietor, **Business Certificate**
 - If partnership, **Partnership Agreement**
 - If corporation or LLC, **Articles of Organization** from the Secretary of the Commonwealth

(e.g. New Stockholders or Transfer or Issuance of Stock)

- DOR Certificate of Good Standing
- DUA Certificate of Compliance
- Change of Stock Application
- CORI Authorization
- Financial Statement
- Vote of the Entity
- Purchase & Sale Agreement
- Supporting Financial Records
- Advertisement
- Payment Receipt
- Business Structure Documents
 - If Sole Proprietor, **Business Certificate**
 - If partnership, **Partnership Agreement**
 - If corporation or LLC, **Articles of Organization** from the Secretary of the Commonwealth

☐ **Change of Ownership Interest**

(e.g. LLC Members, LLP Partners, Trustees etc.)

- DOR Certificate of Good Standing
- DUA Certificate of Compliance
- Change of Stock Application
- CORI Authorization
- Financial Statement
- Vote of the Entity
- Purchase & Sale Agreement
- Supporting Financial Records
- Advertisement
- Payment Receipt
- Business Structure Documents
 - If Sole Proprietor, **Business Certificate**
 - If partnership, **Partnership Agreement**
 - If corporation or LLC, **Articles of Organization** from the Secretary of the Commonwealth

Non-Profit Club Change of Officers/ Directors

- ☐ • DOR Certificate of Good Standing
- DUA Certificate of Compliance
 - Change of Officer/Directors Application
 - Vote of the club signed by an approved officer
 - Payment Receipt
 - Business Structure Documents -**Articles of Organization** from the Secretary of the Commonwealth

Management Agreement

- ☐ • DOR Certificate of Good Standing
- DUA Certificate of Compliance
 - Management Agreement
 - Vote of Entity
 - Payment Receipt

**If abutter notification and advertisement are required for transaction, please see the local licensing authority.*

1. BUSINESS ENTITY INFORMATION

Entity Name	Municipality	ABCC License Number
Winchester Country Club	Arlington	00051-CL-0030

Please provide a narrative overview of the transaction(s) being applied for. Attach additional pages, if necessary.

--

APPLICATION CONTACT

The application contact is the person who should be contacted with any questions regarding this application.

Name	Title	Email	Phone
Paul Lazar	General Manager/ COO	plazar@winchestercc.org	781-729-4850

APPLICATION FOR AMENDMENT-Change of Officers, Stock or Ownership Interest

2. PROPOSED OFFICERS, STOCK OR OWNERSHIP INTEREST

List all individuals or entities that will have a direct or indirect, beneficial or financial interest in this license (E.g. Stockholders, Officers, Directors, LLC Managers, LLP Partners, Trustees etc.). Attach additional page(s) provided, if necessary, utilizing Addendum A.

- The individuals and titles listed in this section must be identical to those filed with the Massachusetts Secretary of State.
- The individuals identified in this section, as well as the proposed Manager of Record, must complete a CORI Release Form.
- Please note the following statutory requirements for Directors and LLC Managers:
On Premises (E.g. Restaurant/ Club/Hotel) Directors or LLC Managers - At least 50% must be US citizens;
Off Premises (Liquor Store) Directors or LLC Managers - All must be US citizens and a majority must be Massachusetts residents.
- If you are a Multi-Tiered Organization, please attach a flow chart identifying each corporate interest and the individual owners of each entity as well as the Articles of Organization for each corporate entity. Every individual must be identified in Addendum A.

Name of Principal	Residential Address	SSN	DOB	Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
Paul J. Collins	5 Euclid Avenue, Winchester, MA			President		<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
William D. Chin	261 Payson Road, Belmont, MA			Vice President		<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Paul F. Kelly	5 Dix Terrace, Winchester, MA			Secretary		<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
William P. Crowe	22 Manomet Road, Winchester, MA			Treasurer		<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
David T. Savage, Jr.	8 Frothingham Road, Burlington, MA			Director		<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Joseph C. Peters	64 Salisbury Street, Winchester, MA			Director		<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No

Additional pages attached?

☒ Yes ☐ No

CRIMINAL HISTORY

Has any individual listed in question 2, and applicable attachments, ever been convicted of a State, Federal or Military Crime? If yes, attach an affidavit providing the details of any and all convictions.

☐ Yes ☒ No

MANAGEMENT AGREEMENT

Are you requesting approval to utilize a management company through a management agreement?
Please provide a copy of the management agreement.

☐ Yes ☒ No

APPLICATION FOR AMENDMENT-Change of Officers, Stock or Ownership Interest

3. CURRENT OFFICERS, STOCK OR OWNERSHIP INTEREST

List the individuals and entities of the current ownership. Attach additional pages if necessary utilizing the format below.

Name of Principal	Title/Position	Percentage of Ownership
Neal J. Harte	Past Treasurer	
Name of Principal	Title/Position	Percentage of Ownership
Joseph W. Monahan	Past President	
Name of Principal	Title/Position	Percentage of Ownership
William G. Shean	Past President	
Name of Principal	Title/Position	Percentage of Ownership
Richard F. Herlihy	Past President	
Name of Principal	Title/Position	Percentage of Ownership
William G. Shean	Past President	
Name of Principal	Title/Position	Percentage of Ownership

4. INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Does any individual or entity identified in question 2, and applicable attachments, have any direct or indirect, beneficial or financial interest in any other license to sell alcoholic beverages? Yes ☐ No ☒ If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality

5. PREVIOUSLY HELD INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Has any individual or entity identified in question 2, and applicable attachments, ever held a direct or indirect, beneficial or financial interest in a license to sell alcoholic beverages, which is not presently held? Yes ☐ No ☐

If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality

6. DISCLOSURE OF LICENSE DISCIPLINARY ACTION

Have any of the disclosed licenses listed in question 4 or 5 ever been suspended, revoked or cancelled?

Yes ☐ No ☐ If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Date of Action	Name of License	City	Reason for suspension, revocation or cancellation

7. FINANCIAL DISCLOSURE

Associated Cost(s): (E.g. Costs associated with License Transaction including but not limited to: Property price, Business Assets, Renovations costs, Construction costs, Initial Start-up costs, Inventory costs, or specify other costs):"

Associated Cost(s):

N/A

SOURCE OF CASH CONTRIBUTION

Please provide documentation of available funds. (E.g. Bank or other Financial institution Statements, Bank Letter, etc.)

Name of Contributor	Amount of Contribution
Total:	

SOURCE OF FINANCING

Please provide signed financing documentation.

Name of Lender	Amount	Type of Financing	Is the lender a licensee pursuant to M.G.L. Ch. 138.
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No

FINANCIAL INFORMATION

Provide a detailed explanation of the form(s) and source(s) of funding for the cost identified above.

APPLICANT'S STATEMENT

I, Paul F. Kelly the: ☐ sole proprietor; ☐ partner; ☒ corporate principal; ☐ LLC/LLP manager
Authorized Signatory
of Winchester Country Club
Name of the Entity/Corporation

hereby submit this application (hereinafter the "Application"), to the local licensing authority (the "LLA") and the Alcoholic Beverages Control Commission (the "ABCC" and together with the LLA collectively the "Licensing Authorities") for approval.

I do hereby declare under the pains and penalties of perjury that I have personal knowledge of the information submitted in the Application, and as such affirm that all statements and representations therein are true to the best of my knowledge and belief. I further submit the following to be true and accurate:

- (1) I understand that each representation in this Application is material to the Licensing Authorities' decision on the Application and that the Licensing Authorities will rely on each and every answer in the Application and accompanying documents in reaching its decision;
- (2) I state that the location and description of the proposed licensed premises are in compliance with state and local laws and regulations;
- (3) I understand that while the Application is pending, I must notify the Licensing Authorities of any change in the information submitted therein. I understand that failure to give such notice to the Licensing Authorities may result in disapproval of the Application;
- (4) I understand that upon approval of the Application, I must notify the Licensing Authorities of any change in the ownership as approved by the Licensing Authorities. I understand that failure to give such notice to the Licensing Authorities may result in sanctions including revocation of any license for which this Application is submitted;
- (5) I understand that the licensee will be bound by the statements and representations made in the Application, including, but not limited to the identity of persons with an ownership or financial interest in the license;
- (6) I understand that all statements and representations made become conditions of the license;
- (7) I understand that any physical alterations to or changes to the size of the area used for the sale, delivery, storage, or consumption of alcoholic beverages, must be reported to the Licensing Authorities and may require the prior approval of the Licensing Authorities;
- (8) I understand that the licensee's failure to operate the licensed premises in accordance with the statements and representations made in the Application may result in sanctions, including the revocation of any license for which the Application was submitted; and
- (9) I understand that any false statement or misrepresentation will constitute cause for disapproval of the Application or sanctions including revocation of any license for which this Application is submitted.
- (10) I confirm that the applicant corporation and each individual listed in the ownership section of the application is in good standing with the Massachusetts Department of Revenue and has complied with all laws of the Commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting of child support.

Signature:

Paul F. Kelly

Date:

4/23/19

Title:

Secretary

ADDITIONAL INFORMATION

Please utilize this space to provide any additional information that will support your application or to clarify any answers provided above.

CORPORATE VOTE

The Board of Directors or LLC Managers of

Winchester Country Club

Entity Name

duly voted to apply to the Licensing Authority of

Arlington

City/Town

and the

Commonwealth of Massachusetts Alcoholic Beverages Control Commission on

4/23/19

Date of Meeting

For the following transactions (Check all that apply):

- ☒ Change of Officers/Directors/LLC Manager
- ☐ Change of Ownership Interest (LLC Members, LLP Partners, Trustees)
- ☐ Issuance/Transfer of Stock/New Stockholder
- ☐ Management/Operating Agreement
- ☐ Other

"VOTED: To authorize

Paul F. Kelly

Name of Person

to sign the application submitted and to execute on the Entity's behalf, any necessary papers and do all things required to have the application granted."

A true copy attest,

Corporate Officer /LLC Manager Signature

(Print Name)

For Corporations ONLY

A true copy attest,



Corporation Clerk's Signature

PAUL F. KELLY

(Print Name)

ADDENDUM A

2. Change of Officers, Stock or Ownership Interest (Continued...)

List all proposed individuals or entities that will have a direct or indirect, beneficial or financial interest in this license (E.g. Stockholders, Officers, Directors, LLC Managers, LLP Partners, Trustees etc.).

Entity Name

Percentage of Ownership in Entity being Licensed

(Write "NA" if this is the entity being licensed)

Winchester Country Club

NA

Name of Principal	Residential Address	SSN	DOB
Paul M. Donahue	28 Canterbury Road, Winchester, MA		

Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
Director		<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
Richard A. Walen	183 Commonwealth Avenue Unit 4, Boston, MA		

Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
Director		<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
Leonard F. Nolan	11 Wood Lane, Winchester, MA		

Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
Director		<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
David A. Fiorentino	82 Bacon Street, Winchester, MA		

Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
Director		<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
Martin W. Hill	10 Samoset Road, Winchester, MA		

Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
Director		<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
Robert J. O'Brien, MA	63 Swan Road, Winchester, MA		

Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
Director		<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB

Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
		<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

CRIMINAL HISTORY

Has any individual identified above ever been convicted of a State, Federal or Military Crime?
If yes, attach an affidavit providing the details of any and all convictions.

☐ Yes ☐ No



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3, Chelsea, MA 02150-2358
www.mass.gov/abcc

RETAIL ALCOHOLIC BEVERAGES LICENSE APPLICATION
MONETARY TRANSMITTAL FORM

APPLICATION FOR AMENDMENT-Change of Officers, Stock or Ownership Interest

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

ECRT CODE: RETA

Please make \$200.00 payment here: [ABCC PAYMENT WEBSITE](#)

PAYMENT MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP, OR INDIVIDUAL AND INCLUDE THE PAYMENT RECEIPT

ABCC LICENSE NUMBER (IF AN EXISTING LICENSEE, CAN BE OBTAINED FROM THE CITY)

00051-CL-0030

ENTITY/ LICENSEE NAME

Winchester Country Club

ADDRESS

468 Mystic Street

CITY/TOWN

Winchester

STATE

MA

ZIP CODE

01890

For the following transactions (Check all that apply):

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> New License | <input type="checkbox"/> Change of Location | <input type="checkbox"/> Change of Class (i.e. Annual / Seasonal) | <input type="checkbox"/> Change Corporate Structure (i.e. Corp / LLC) |
| <input type="checkbox"/> Transfer of License | <input type="checkbox"/> Alteration of Licensed Premises | <input type="checkbox"/> Change of License Type (i.e. club / restaurant) | <input type="checkbox"/> Pledge of Collateral (i.e. License/Stock) |
| <input type="checkbox"/> Change of Manager | <input type="checkbox"/> Change Corporate Name | <input type="checkbox"/> Change of Category (i.e. All Alcohol/Wine, Malt) | <input type="checkbox"/> Management/Operating Agreement |
| <input checked="" type="checkbox"/> Change of Officers/
Directors/LLC Managers | <input type="checkbox"/> Change of Ownership Interest
(LLC Members/ LLP Partners,
Trustees) | <input type="checkbox"/> Issuance/Transfer of Stock/New Stockholder | <input type="checkbox"/> Change of Hours |
| | | <input type="checkbox"/> Other <input type="text"/> | <input type="checkbox"/> Change of DBA |

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

Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3
Chelsea, MA 02150-2358



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3, Chelsea, MA 02150-2358
www.mass.gov/abcc

APPLICATION FOR AMENDMENT
-Change of Officers, Stock or Ownership Interest

☒ **Change of Officers/ Directors/LLC Managers** ☐ **Change of Stock Interest**

- DOR Certificate of Good Standing
- DUA Certificate of Compliance
- Change of Officer/Directors Application
- CORI Authorization
- Vote of the Entity
- Payment Receipt
- Advertisement
- Business Structure Documents
 - If Sole Proprietor, **Business Certificate**
 - If partnership, **Partnership Agreement**
 - If corporation or LLC, **Articles of Organization** from the Secretary of the Commonwealth

(e.g. New Stockholders or Transfer or Issuance of Stock)

- DOR Certificate of Good Standing
- DUA Certificate of Compliance
- Change of Stock Application
- CORI Authorization
- Financial Statement
- Vote of the Entity
- Purchase & Sale Agreement
- Supporting Financial Records
- Advertisement
- Payment Receipt
- Business Structure Documents
 - If Sole Proprietor, **Business Certificate**
 - If partnership, **Partnership Agreement**
 - If corporation or LLC, **Articles of Organization** from the Secretary of the Commonwealth

☐ **Change of Ownership Interest**

(e.g. LLC Members, LLP Partners, Trustees etc.)

- DOR Certificate of Good Standing
- DUA Certificate of Compliance
- Change of Stock Application
- CORI Authorization
- Financial Statement
- Vote of the Entity
- Purchase & Sale Agreement
- Supporting Financial Records
- Advertisement
- Payment Receipt
- Business Structure Documents
 - If Sole Proprietor, **Business Certificate**
 - If partnership, **Partnership Agreement**
 - If corporation or LLC, **Articles of Organization** from the Secretary of the Commonwealth

Non-Profit Club Change of Officers/ Directors

- ☐
- DOR Certificate of Good Standing
 - DUA Certificate of Compliance
 - Change of Officer/Directors Application
 - Vote of the club signed by an approved officer
 - Payment Receipt
 - Business Structure Documents -**Articles of Organization** from the Secretary of the Commonwealth

Management Agreement

- ☐
- DOR Certificate of Good Standing
 - DUA Certificate of Compliance
 - Management Agreement
 - Vote of Entity
 - Payment Receipt

**If abutter notification and advertisement are required for transaction, please see the local licensing authority.*

1. BUSINESS ENTITY INFORMATION

Entity Name	Municipality	ABCC License Number
Winchester Country Club	Arlington	0007-CL-0030

Please provide a narrative overview of the transaction(s) being applied for. Attach additional pages, if necessary.

--

APPLICATION CONTACT

The application contact is the person who should be contacted with any questions regarding this application.

Name	Title	Email	Phone
Paul Lazar	General Manager/ COO	plazar@winchestercc.org	781-729-4850

APPLICATION FOR AMENDMENT-Change of Officers, Stock or Ownership Interest

2. PROPOSED OFFICERS, STOCK OR OWNERSHIP INTEREST

List all individuals or entities that will have a direct or indirect, beneficial or financial interest in this license (E.g. Stockholders, Officers, Directors, LLC Managers, LLP Partners, Trustees etc.). Attach additional page(s) provided, if necessary, utilizing Addendum A.

- The individuals and titles listed in this section must be identical to those filed with the Massachusetts Secretary of State.
- The individuals identified in this section, as well as the proposed Manager of Record, must complete a CORI Release Form.
- Please note the following statutory requirements for Directors and LLC Managers:
On Premises (E.g. Restaurant/ Club/Hotel) Directors or LLC Managers - At least 50% must be US citizens;
Off Premises (Liquor Store) Directors or LLC Managers - All must be US citizens and a majority must be Massachusetts residents.
- If you are a Multi-Tiered Organization, please attach a flow chart identifying each corporate interest and the individual owners of each entity as well as the Articles of Organization for each corporate entity. Every individual must be identified in Addendum A.

Name of Principal	Residential Address	SSN	DOB
Paul J. Collins	5 Euclid Avenue, Winchester, MA		
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
President		<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
MA Resident		<input checked="" type="radio"/> Yes <input type="radio"/> No	
William D. Chin	261 Payson Road, Belmont, MA		
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
Vice President		<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
MA Resident		<input checked="" type="radio"/> Yes <input type="radio"/> No	
Paul F. Kelly	5 Dix Terrace, Winchester, MA		
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
Secretary		<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
MA Resident		<input checked="" type="radio"/> Yes <input type="radio"/> No	
William P. Crowe	22 Manomet Road, Winchester, MA		
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
Treasurer		<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
MA Resident		<input checked="" type="radio"/> Yes <input type="radio"/> No	
David T. Savage, Jr.	8 Frothingham Road, Burlington, MA		
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
Director		<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
MA Resident		<input checked="" type="radio"/> Yes <input type="radio"/> No	
Joseph C. Peters	64 Salisbury Street, Winchester, MA		
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
Director		<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
MA Resident		<input checked="" type="radio"/> Yes <input type="radio"/> No	

Additional pages attached? ☒ Yes ☐ No

CRIMINAL HISTORY

Has any individual listed in question 2, and applicable attachments, ever been convicted of a State, Federal or Military Crime? If yes, attach an affidavit providing the details of any and all convictions.

☐ Yes ☒ No

MANAGEMENT AGREEMENT

Are you requesting approval to utilize a management company through a management agreement?
Please provide a copy of the management agreement.

☐ Yes ☒ No

APPLICATION FOR AMENDMENT-Change of Officers, Stock or Ownership Interest

3. CURRENT OFFICERS, STOCK OR OWNERSHIP INTEREST

List the individuals and entities of the current ownership. Attach additional pages if necessary utilizing the format below.

Name of Principal	Title/Position	Percentage of Ownership
Neal J. Harte	Past Treasurer	
Name of Principal	Title/Position	Percentage of Ownership
Joseph W. Monahan	Past President	
Name of Principal	Title/Position	Percentage of Ownership
William G. Shean	Past President	
Name of Principal	Title/Position	Percentage of Ownership
Richard F. Herlihy	Past President	
Name of Principal	Title/Position	Percentage of Ownership
William G. Shean	Past President	
Name of Principal	Title/Position	Percentage of Ownership

4. INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Does any individual or entity identified in question 2, and applicable attachments, have any direct or indirect, beneficial or financial interest in any other license to sell alcoholic beverages? Yes ☐ No ☒ If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality

5. PREVIOUSLY HELD INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Has any individual or entity identified in question 2, and applicable attachments, ever held a direct or indirect, beneficial or financial interest in a license to sell alcoholic beverages, which is not presently held? Yes ☐ No ☐

If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality

6. DISCLOSURE OF LICENSE DISCIPLINARY ACTION

Have any of the disclosed licenses listed in question 4 or 5 ever been suspended, revoked or cancelled?

Yes ☐ No ☐ If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Date of Action	Name of License	City	Reason for suspension, revocation or cancellation

7. FINANCIAL DISCLOSURE

Associated Cost(s): (E.g. Costs associated with License Transaction including but not limited to: Property price, Business Assets, Renovations costs, Construction costs, Initial Start-up costs, Inventory costs, or specify other costs):"

Associated Cost(s):

N/A

SOURCE OF CASH CONTRIBUTION

Please provide documentation of available funds. (E.g. Bank or other Financial institution Statements, Bank Letter, etc.)

Name of Contributor	Amount of Contribution
Total:	

SOURCE OF FINANCING

Please provide signed financing documentation.

Name of Lender	Amount	Type of Financing	Is the lender a licensee pursuant to M.G.L. Ch. 138.
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No

FINANCIAL INFORMATION

Provide a detailed explanation of the form(s) and source(s) of funding for the cost identified above.

APPLICANT'S STATEMENT

I, Paul F. Kelly the: ☐ sole proprietor; ☐ partner; ☒ corporate principal; ☐ LLC/LLP manager
Authorized Signatory

of Winchester Country Club
Name of the Entity/Corporation

hereby submit this application (hereinafter the "Application"), to the local licensing authority (the "LLA") and the Alcoholic Beverages Control Commission (the "ABCC" and together with the LLA collectively the "Licensing Authorities") for approval.

I do hereby declare under the pains and penalties of perjury that I have personal knowledge of the information submitted in the Application, and as such affirm that all statements and representations therein are true to the best of my knowledge and belief. I further submit the following to be true and accurate:

- (1) I understand that each representation in this Application is material to the Licensing Authorities' decision on the Application and that the Licensing Authorities will rely on each and every answer in the Application and accompanying documents in reaching its decision;
- (2) I state that the location and description of the proposed licensed premises are in compliance with state and local laws and regulations;
- (3) I understand that while the Application is pending, I must notify the Licensing Authorities of any change in the information submitted therein. I understand that failure to give such notice to the Licensing Authorities may result in disapproval of the Application;
- (4) I understand that upon approval of the Application, I must notify the Licensing Authorities of any change in the ownership as approved by the Licensing Authorities. I understand that failure to give such notice to the Licensing Authorities may result in sanctions including revocation of any license for which this Application is submitted;
- (5) I understand that the licensee will be bound by the statements and representations made in the Application, including, but not limited to the identity of persons with an ownership or financial interest in the license;
- (6) I understand that all statements and representations made become conditions of the license;
- (7) I understand that any physical alterations to or changes to the size of the area used for the sale, delivery, storage, or consumption of alcoholic beverages, must be reported to the Licensing Authorities and may require the prior approval of the Licensing Authorities;
- (8) I understand that the licensee's failure to operate the licensed premises in accordance with the statements and representations made in the Application may result in sanctions, including the revocation of any license for which the Application was submitted; and
- (9) I understand that any false statement or misrepresentation will constitute cause for disapproval of the Application or sanctions including revocation of any license for which this Application is submitted.
- (10) I confirm that the applicant corporation and each individual listed in the ownership section of the application is in good standing with the Massachusetts Department of Revenue and has complied with all laws of the Commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting of child support.

Signature:

Paul F. Kelly

Date:

4/23/19

Title:

Secretary

ADDITIONAL INFORMATION

Please utilize this space to provide any additional information that will support your application or to clarify any answers provided above.

CORPORATE VOTE

The Board of Directors or LLC Managers of

Winchester Country Club
Entity Name

duly voted to apply to the Licensing Authority of

Arlington
City/Town

and the

Commonwealth of Massachusetts Alcoholic Beverages Control Commission on

4/23/19
Date of Meeting

For the following transactions (Check all that apply):

- ☒ Change of Officers/Directors/LLC Manager
☐ Change of Ownership Interest (LLC Members, LLP Partners, Trustees)
☐ Issuance/Transfer of Stock/New Stockholder
☐ Management/Operating Agreement
☐ Other

"VOTED: To authorize

Paul F. Kelly

Name of Person

to sign the application submitted and to execute on the Entity's behalf, any necessary papers and do all things required to have the application granted."

A true copy attest,

Corporate Officer /LLC Manager Signature

(Print Name)

For Corporations ONLY

A true copy attest,

Paul F. Kelly

Corporation Clerk's Signature

PAUL F. KELLY

(Print Name)

ADDENDUM A

2. Change of Officers, Stock or Ownership Interest (Continued...)

List all proposed individuals or entities that will have a direct or indirect, beneficial or financial interest in this license (E.g. Stockholders, Officers, Directors, LLC Managers, LLP Partners, Trustees etc.).

Entity Name

Winchester Country Club

Percentage of Ownership in Entity being Licensed
(Write "NA" if this is the entity being licensed)

NA

Name of Principal	Residential Address	SSN	DOB
Paul M. Donahue	28 Canterbury Road, Winchester, MA		

Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
Director		<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
Richard A. Walen	183 Commonwealth Avenue Unit 4, Boston, MA		

Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
Director		<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
Leonard F. Nolan	11 Wood Lane, Winchester, MA		

Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
Director		<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
David A. Fiorentino	82 Bacon Street, Winchester, MA		

Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
Director		<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
Martin W. Hill	10 Samoset Road, Winchester, MA		

Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
Director		<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
Robert J. O'Brien, MA	63 Swan Road, Winchester, MA		

Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
Director		<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB

Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
		<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

CRIMINAL HISTORY

Has any individual identified above ever been convicted of a State, Federal or Military Crime?
If yes, attach an affidavit providing the details of any and all convictions.

☐ Yes ☐ No



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3, Chelsea, MA 02150-2358
www.mass.gov/abcc

RETAIL ALCOHOLIC BEVERAGES LICENSE APPLICATION
MONETARY TRANSMITTAL FORM

APPLICATION FOR AMENDMENT-Change of Officers, Stock or Ownership Interest

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

ECRT CODE: RETA

Please make \$200.00 payment here: [ABCC PAYMENT WEBSITE](#)

PAYMENT MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP, OR INDIVIDUAL AND INCLUDE THE PAYMENT RECEIPT

ABCC LICENSE NUMBER (IF AN EXISTING LICENSEE, CAN BE OBTAINED FROM THE CITY)

0007-CL-00030

ENTITY/ LICENSEE NAME

Winchester Country Club

ADDRESS

468 Mystic Street

CITY/TOWN

Winchester

STATE

MA

ZIP CODE

01890

For the following transactions (Check all that apply):

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> New License | <input type="checkbox"/> Change of Location | <input type="checkbox"/> Change of Class (i.e. Annual / Seasonal) | <input type="checkbox"/> Change Corporate Structure (i.e. Corp / LLC) |
| <input type="checkbox"/> Transfer of License | <input type="checkbox"/> Alteration of Licensed Premises | <input type="checkbox"/> Change of License Type (i.e. club / restaurant) | <input type="checkbox"/> Pledge of Collateral (i.e. License/Stock) |
| <input type="checkbox"/> Change of Manager | <input type="checkbox"/> Change Corporate Name | <input type="checkbox"/> Change of Category (i.e. All Alcohol/Wine, Malt) | <input type="checkbox"/> Management/Operating Agreement |
| <input checked="" type="checkbox"/> Change of Officers/
Directors/LLC Managers | <input type="checkbox"/> Change of Ownership Interest
(LLC Members/ LLP Partners,
Trustees) | <input type="checkbox"/> Issuance/Transfer of Stock/New Stockholder | <input type="checkbox"/> Change of Hours |
| | | <input type="checkbox"/> Other <input type="text"/> | <input type="checkbox"/> Change of DBA |

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

Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3
Chelsea, MA 02150-2358



Town of Arlington, Massachusetts

For Approval: Change of Hours - Food Vendor

Summary:

Arlington Convenience, 245 Massachusetts Avenue, Davinder Sharma

ATTACHMENTS:

	Type	File Name	Description
▢	Reference Material	Arlington_Convenience_Extended_Hours_Request.pdf	Change of Hours Request
▢	Reference Material	Arlington_Convenience_License_2019.pdf	Arlington Convenience License 2019

From: Davinder Sharma <sharmadavinder50@yahoo.com>
To: "amaher@town.arlington.ma.us" <amaher@town.arlington.ma.us>
Date: 04/29/2019 01:16 PM
Subject: Arlington convenience

Hi Ashley

As I spoke to you this morning I request the permission from Town of Arlington to open my store located at 245-mass ave at 6.00am instead of current time 7.00am.

Sincerely,

Davinder Sharma

[Sent from Yahoo Mail on Android](#)

OFFICE OF THE SELECT BOARD



TOWN OF ARLINGTON
MASSACHUSETTS 02476-4908

**2019 FOOD VENDOR'S LICENSE
THIS LICENSE IS NON-TRANSFERABLE**

In accordance with the Town By Laws, Article 12, Section 16, the Select Board hereby grants a Food Vendor's License

TO: **Davinder K. Sharma**
Arlington Convenience

ADDRESS: **245 Massachusetts Avenue**
Arlington, MA 02474

HOURS OF OPERATION: **Monday-Sunday 7:00 a.m. – 11:00 p.m.**

EXPIRATION DATE: **December 31, 2019** **FEE: \$60.00**

NOTE: No food is to be consumed on the premises - **TAKE OUT ONLY**
APPROVED BY THE SELECT BOARD

Window signs cannot cover more than 25% of the area of the window. Licensee is required to clean up the outside area of the store; and, in the general area of the store, including the sidewalk and street. All rubbish and discarded materials are to be picked up on a daily basis.

The issuance of this license by the Select Board of the Town of Arlington is conditional upon the holder thereof maintaining the premises to which this license applies, and all surrounding outside areas adjacent to the premises including areas not owned or controlled by the holder of said license, if entry upon same would not constitute an unlawful trespass thereon, free from all litter, rubbish, trash or other refuse that in any way is associated with the operation of the premises as a food dispensing operation. Holders of food vendor licenses shall be required to place an adequate sized receptacle for the placing of trash or other discarded items inside the establishment directly next to all exits. In addition, to the extent that said food vendors own or control sufficient areas outside of their establishment to accommodate same, an additional receptacle shall likewise be placed adjacent to all entrances and exits thereof. Failure to comply with this condition shall be cause for suspension or revocation of this license.

Sign to be posted in establishments offering cigarettes for sale stating that no sales are to be made to minors under the age of twenty-one. Any violation of conditions to sale of cigarettes to minors could result in revocation of license after public hearing.


Marie A. Krepelka, Board Administrator



Town of Arlington, Massachusetts

Request: Special (One Day) Beer & Wine License, 5/10/19 @ Robbins Memorial Town Hall for Boys & Girls Club Annual Celebration Dinner

Summary:

Derek Curran, Arlington Boys & Girls Club

ATTACHMENTS:

	Type	File Name	Description
▢	Reference Material	Boys_Girls_Club_Special_Application.pdf	Special Beer and Wine Application

OFFICE OF THE BOARD OF SELECTMEN



TOWN OF ARLINGTON
MASSACHUSETTS 02476-4908

SPECIAL ALCOHOL LICENSE APPLICATION

Name of Applicant:

Derek Curran, Arlington Boys & Girls Club

Address, phone & e-mail contact information:

60 Pond Lane, Arlington, Ma 781-648-1617 dcurran@abgclub.org

Name & address of Organization for which license is sought:

same

Does this Organization hold nonprofit status under the IRS Code? ☒ Yes ☐ No

Name of Responsible Manager of Organization (if different from above):

Jodi Auerbach, Something Savory Catering

Address, phone & e-mail contact information:

1337 Mass. Ave., #235, Arlington, Ma. 617-549-2599 jodi@somethingsavory.com

Has the Applicant or Organization applied for and/or been granted a special liquor license this calendar year? ☐ NO ☐ If so, please give date(s) of Special Licenses and/or applications and title of event(s).

Is this event an annual or regular event? If so, when was the last time this event was held and at what location?

one time event - second time
around.

24-Hour contact number for Responsible Manager on Event date:

617-549-2599

Title of Event:

Boys & Girls Club Annual Dinner Celebration

Date/time of Event:

Friday May 10, 2019 7:00 pm - 10:00 pm

Location of Event: Arlington Town Hall

Location/Event Coordinator: Patsy Kraemer/Vicki Rose/Sheelah Ward

Method(s) of invitation/publicity for Event:

Invitation

Number of people expected to attend: 175

Expected admission/ticket prices: \$50

Expected prices for food and beverages (alcoholic and non-alcoholic):

\$5 for beer and wine

Will persons under age 21 be on premises? yes

If "yes," please detail plan to prevent access of minors to alcoholic beverages.

Bartenders will check for ID's

Have you consulted with the Department of Police Services about your security plan for the Event?

YES

OFFICE USE ONLY

For Police Chief, Operations Commander, or designee:

Your signature below indicates that you have discussed this event with the applicant, you have reviewed the applicant's security plan, and any necessary police details have been arranged for the Event.

Off. Corey P. Rataean
Off. Corey P. Rataean
Printed name/title

Date 4-24-19

POLICE COMMENTS:

Request one safety detail

What types of alcoholic beverages do you plan to serve at the Event? (Note: By State Law, all-alcohol Special Licenses are available only to nonprofit organizations.)

beer/wine

What types of food and non-alcoholic beverages do you plan to serve at the Event?

savory/sweet tapas menu with waters/sodas

Who will be responsible for serving alcoholic beverages at the Event?

Something Savory Caterers

What training or certification in responsible alcohol service does this person have? Please attach certificate or other proof of training for at least one person who will have responsibility for serving alcoholic beverages at each point of service and who will be present for the entire Event.

TIPS CERTIFICATION

Please list the names and dates of birth for all people who will be responsible for serving alcoholic beverages at the Event. Anyone serving alcoholic beverages must be at least 21 years of age.

attached

Name of the Massachusetts wholesaler who will deliver to site? (Full supplier list available on the ABCC website: www.mass.gov/abcc:

Adonna Imports LLS Waltham - WM-LIC - 000290

Date of Delivery: Friday, May 10, 2019

Alcohol Serving Time (s) 7:00 pm - 10:00 pm

How, when, and by whom will excess alcoholic beverages obtained for the Event be disposed of?

Adonna will take back what is not used.

Date of Pick-Up:

Mon. May 13, 2019

Please provide details (insurance company, type of policy, name of insured, and policy limits) of any relevant insurance coverage for the Event, included but not limited to General Liability and Liquor Liability insurance. (You may be asked to supply a certificate or other proof of adequate insurance coverage.)

ATTACHED

Please submit this completed form and filing fee to the Board of Selectmen at least 21 days before your Event. Failure to provide complete information may delay the processing of your application.

I HAVE READ AND UNDERSTAND ALL RULES AND REGULATIONS:

Signature: _____

Printed name: Derek Curran

Printed title & Organization name: _____

Email: dcurran@abgclub.org

revised: 5/18/2015 reformatted: 02252018



ROBBINS MEMORIAL TOWN HALL AUDITORIUM
730 Massachusetts Avenue, Arlington, Ma. 02476

23 April 2019

SECURITY PLAN FOR - Boys/Girls Club Eightieth Birthday Celebration

An Annual Celebration dinner event sponsored by the Arlington Boys and Girls Club will be held on Friday, May 10, 2019, at Arlington Town Hall. The event will run from 7:00 pm - 10:00 pm.

An Alcohol Permit Application has been submitted to the Selectmen's Office.

This is the Security Plan.

We anticipate approximately 175 guests to attend. Some attendees/helpers will be under the age of 21.

Patsy Kraemer will be the event coordinator for the event. Greg Stathopoulos will be the custodian for the event. Something Savory Caterers will be catering the event, will provide the bartending service and will provide the TIPS certified bartending staff. The Boys & Girls Club planning committee is responsible for ensuring that the event runs smoothly.

A fire services detail will be hired for the event. This officer will be available to help with any emergency situations that may arise. A police detail also will be hired based on the number of anticipated attendees.

Parking for the event will be available in the Town Hall parking lot, the parking lot at the Central School office building directly behind Town Hall, and on the side streets, as well as Mass. Ave.

Please advise if there are other items that we need to consider.

it with you as proof of your TIPS certification.

ID#: 4720949 Name: Bonnie Sue Tomassian
Exam Date: 2/1/2018 Expiration Date: 2/1/2021



eTIPS On Premise 3.0

CERTIFIED

Issued: 2/1/2018

Expires: 2/1/2021

ID#: 4720949

Bonnie Sue Tomassian
Something Savory LLC
1337 Massachusetts Ave
Arlington, MA 02476-4101

For service visit us online at www.gettips.com

<https://w3.cartegnty.com/cp3.nsf/RetrDocument?OpenAgent&DML=...>

Close Window

This card is only valid for use online - and cannot be used as proof of certification except from within Certification Manager



eTIPS On Premise 3.0

CERTIFIED

Issued: 01/21/2017

Expires: 01/21/2020

ID#: 4438835

Sheila Reynolds

237 Grove St
Waltham, MA 02453-0548 USA



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

01/03/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER T. Edmund Garrity & Co., Inc. 545 Concord Avenue, Suite 16 Cambridge MA 02138	CONTACT NAME: Ashlee Espinosa PHONE (A/C, No, Ext): (617) 354-4640 E-MAIL ADDRESS: ashlee@garrity-insurance.com FAX (A/C, No): (617) 354-5828
INSURED Jodi Auerbach, DBA: Something Savory 1337 Massachusetts Ave #237 Arlington MA 02476	INSURER(S) AFFORDING COVERAGE INSURER A: Travelers Indemnity Co CT INSURER B: AIM MUTUAL INS CO INSURER C: Hospitality Mutual INSURER D: INSURER E: INSURER F:

COVERAGES

CERTIFICATE NUMBER: Master COI 2018

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			6607B769370	04/20/2018	04/20/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input checked="" type="checkbox"/> N	N/A	AWC40070360032019A	01/10/2019	01/10/2020	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE - EA EMPLOYEE \$ 100,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
C	Liquor Liability			00061130LL	12/16/2018	12/16/2019	Per Occurance 1,000,000 Aggregate 2,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Town of Arlington is listed as additional insured for general liability and liquor liability.

CERTIFICATE HOLDER

CANCELLATION

Town of Arlington Arlington MA	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
---------------------------------------	---



Town of Arlington, Massachusetts

Request: Special (One Day) Beer & Wine License, 5/18/19 @ Robbins Memorial Town Hall / Robbins Town Garden for Garden Party for Restoration of Reflecting Pool

Summary:

Patsy Kraemer, Arlington Garden Club

ATTACHMENTS:

	Type	File Name	Description
▯	Reference Material	Town_Hall_Gardens_Special_Application.pdf	Special Beer and Wine Application

OFFICE OF THE BOARD OF SELECTMEN



TOWN OF ARLINGTON
MASSACHUSETTS 02476-4908

SPECIAL ALCOHOL LICENSE APPLICATION

Name of Applicant:

Patsy Kraemer, Arlington Garden Club, (Friends of Robbins Town Gardens, Arlington Events, Arlington Historical Commission, Dallin Museum - co-sponsors)

Address, phone & e-mail contact information:

85 Columbia Rd., Arlington, Ma. 02484 781-858-8629
pkraemer@town.arlington.ma.us

Name & address of Organization for which license is sought:

same

Does this Organization hold nonprofit status under the IRS Code? ☒ Yes ☒ No

Name of Responsible Manager of Organization (if different from above):

Beaujolais Catering , Michelle Noska

Address, phone & e-mail contact information:

207 Broadway, Arlington, Ma. michelle@beaujolaiscatering.com

Has the Applicant or Organization applied for and/or been granted a special liquor license this calendar year? No If so, please give date(s) of Special Licenses and/or applications and title of event(s).

Is this event an annual or regular event? If so, when was the last time this event was held and at what location?

one time event

24-Hour contact number for Responsible Manager of Alcohol Event date:

617-519-6081

Title of Event:

Garden Party for Restoration of Reflecting Pool

Date/time of Event:

Saturday, May 18, 2019 6:30 - 9:30 pm

Location of Event:

Arlington Town Hall /Robbins Town Garden

Location/Event Coordinator:

Patsy Kraemer/Vicki Rose

Method(s) of invitation/publicity for Event:

invitation/public notice/social media

Number of people expected to attend:

Expected admission/ticket prices:

\$25 in advance/ \$30 at door

Expected prices for food and beverages (alcoholic and non-alcoholic):

\$7 wine/beer, no charge for waters/sodas

Will persons under age 21 be on premises?

yes

If "yes," please detail plan to prevent access of minors to alcoholic beverages.

Bartender will check ID's

Have you consulted with the Department of Police Services about your security plan for the Event?

YES

OFFICE USE ONLY

For Police Chief, Operations Commander, or designee:

Your signature below indicates that you have discussed this event with the applicant, you have reviewed the applicant's security plan, and any necessary police details have been arranged for the Event.

Off. Corey F. Rafeau Date 4-24-19
Off. Corey F. Rafeau
Printed name/title

POLICE COMMENTS:

Police safety detail should be requested if attendance is 150+

What types of alcoholic beverages do you plan to serve at the Event? (Note: By State Law, all-alcohol Special Licenses are available only to nonprofit organizations.)

beer/wine

What types of food and non-alcoholic beverages do you plan to serve at the Event?

sweet and savory tapas, sodas/waters

Who will be responsible for serving alcoholic beverages at the Event?

Beaujolais Catering

What training or certification in responsible alcohol service does this person have? Please attach certificate or other proof of training for at least one person who will have responsibility for serving alcoholic beverages at each point of service and who will be present for the entire Event.

TIPS Certification

Please list the names and dates of birth for all people who will be responsible for serving alcoholic beverages at the Event. Anyone serving alcoholic beverages must be at least 21 years of age.

ATTACHED

Name of the Massachusetts wholesaler who will deliver to site? (Full supplier list available on the ABCC website: www.mass.gov/abcc)

Kappy's on Line, Everett

Date of Delivery:

Saturday, May 18, 2019

Alcohol Serving Time (s):

6:30 pm - 9:00 pm

How, when, and by whom will excess alcoholic beverages obtained for the Event be disposed of?

Committee will distribute alcohol to individual members

Date of Pick-Up:

N/A

Please provide details (insurance company, type of policy, name of insured, and policy limits) of any relevant insurance coverage for the Event, included but not limited to General Liability and Liquor Liability insurance. (You may be asked to supply a certificate or other proof of adequate insurance coverage.)

ATTACHED

**Please submit this completed form and filing fee to the Board of Selectmen
at least 21 days before your Event. Failure to provide complete
information may delay the processing of your application.**

I HAVE READ AND UNDERSTAND ALL RULES AND REGULATIONS:

Signature: 

Printed name Patsy Kraemer

Printed title & Organization name: Party Committee Chair, Arlington Garden Club

Email: pkraemer@town.arlington.ma.us



ROBBINS MEMORIAL TOWN HALL AUDITORIUM
730 Massachusetts Avenue, Arlington, Ma. 02476

23 April 2019

SECURITY PLAN FOR ARLINGTON TOWN GARDENS PARTY
Celebrating the Restoration of the Reflecting Pool

A group of five organizations are co-sponsoring a Garden Party to celebrate the restoration of the reflecting pool in the Robbins Town Gardens. These organizations are the Arlington Garden Club, the Arlington Historical Commission, Arlington Events, the Friends of Robbins Town Gardens, and the Dallin Museum. The Arlington Garden Club is acting as the fiscal conduit for the event and is the lead sponsor. The event will take place on Saturday, May 18, 2019, 6:30 pm – 9:30 pm at the Arlington Town Hall and Robbins Town Gardens. A One-Day Permit has been submitted to the Selectmen's Office.

This is the Security Plan.

Advance tickets will be sold for the evening event at \$25 each; and tickets will be sold at the door for \$30. We anticipate approximately 140 people to attend.

Patsy Kraemer will be the event coordinator for the event. Beaujolais Catering will provide food for the event and will also provide bartender service. Greg Stathopoulos will be the custodian for the event. A committee of 8 volunteers from the sponsoring groups is planning the event and will assist in staffing the party. All these people will be responsible for ensuring that the event runs smoothly.

A fire services detail will be hired for the event. A police detail will be hired if the numbers expand.

Parking for the event will be available in the Town Hall parking lot, the parking lot at the Central School office building directly behind Town Hall, and on the side streets, as well as Mass. Ave.

Please advise if there are other items that we need to consider.

Official TIPS certification card. Carry it with you as proof of your TIPS certification.

that you have successfully completed the Intervention ProcedureS) program. We value and dedication to the responsible sale, assumption of alcohol.

techniques you have learned, you will help to safer environment for your patrons, peers, and to reduce the tragedies resulting from intoxication, king, and drunk driving.

any information you think would PS program, or if we can assist you please contact us at 800-438-8477.

Sincerely,



Adam F. Chafetz
HCI President

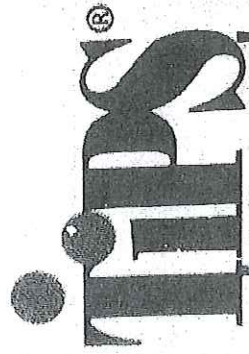
ID#: 4856356 Name: Aldo G De Oliveira
Exam Date: 7/19/2018 Expiration Date: 7/19/2021

TIPS eTIPS On Premise 3.0 **CERTIFIED**

Issued: 7/19/2018 Expires: 7/19/2021
ID#: 4856356

Aldo G De Oliveira
Rebecca'cafe
364 Reservoir Ave
Revere, MA 02151-5808

For service visit us online at www.gettips.com



eTIPS On Premise 3.0

CERTIFIED

Issued: 5/29/2018

Expires: 5/29/2021

ID#: 4813268

Kevin Malloy

193 Crescent Ave Unit 2

Revere, MA 02151-4218

For service visit us online at www.gettips.com



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/8/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Prescott and Son Insurance Agency, Inc. 963 Eastern Avenue Malden MA 02148		CONTACT NAME: Commercial Lines PHONE (A/C, No, Ext): (781) 322-2350 FAX (A/C, No): E-MAIL ADDRESS:	
INSURED Michelle C Noska 207a Broadway Arlington MA 02474		INSURER(S) AFFORDING COVERAGE INSURER A: Hartford Insurance Group INSURER B: Safety Insurance Co INSURER C: Twin City Fire Ins Co INSURER D: INSURER E: INSURER F:	

COVERAGES

CERTIFICATE NUMBER: CL1921928590

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY			08SBAAA8353	4/9/2019	4/9/2020	EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						MED EXP (Any one person) \$ 5,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC						PERSONAL & ADV INJURY \$ 1,000,000
	OTHER:						GENERAL AGGREGATE \$ 2,000,000
B	AUTOMOBILE LIABILITY			6227097	1/21/2019	1/21/2020	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input type="checkbox"/> ANY AUTO	<input checked="" type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS	<input checked="" type="checkbox"/> NON-OWNED AUTOS					BODILY INJURY (Per accident) \$
	<input checked="" type="checkbox"/> HIRED AUTOS						PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB	<input type="checkbox"/> OCCUR					Medical payments \$ 5,000
	EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE					EACH OCCURRENCE \$
	DED	RETENTION \$					AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	Y/N	N/A				PER STATUTE OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						E.L. EACH ACCIDENT \$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$
C	LIQUOR LIABILITY			08SBAAA8353	4/9/2019	4/9/2020	EACH OCCURRENCE \$1,000,000
							AGGREGATE \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Town of Arlington as additional Insured

CERTIFICATE HOLDER**CANCELLATION**

Town of Arlington 730 Mass Ave Arlington, MA 02474	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE

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ACORD 25 (2014/01)

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INS025 (201401)



Town of Arlington, Massachusetts

Request: Special (One Day) Beer & Wine License, 6/1/19 @ Whittemore Robbins House for a Private Event

Summary:

Andrea Bloch

ATTACHMENTS:

	Type	File Name	Description
▢	Reference Material	A._Bloch_Special_Application.pdf	Special Beer and Wine Application

OFFICE OF THE SELECT BOARD



TOWN OF ARLINGTON
MASSACHUSETTS 02476-4908

SPECIAL ALCOHOL LICENSE APPLICATION

Name of Applicant: *Andrea Bloch*

Address, phone & e-mail contact information: *45 Salisbury Street, Winchester, MA 01890; 781-729-3370; apbloch@verizon.net*

Name & address of Organization for which license is sought: _____

Does this Organization hold nonprofit status under the IRS Code? ____ Yes ____ No

Name of Responsible Manager of Organization (if different from above): *Michelle Noska*

Address, phone & e-mail contact information: : *207 Broadway Arlington, MA 02474; 781-646-5408; michelle@beaujolaiscatering.com*

Has the Applicant or Organization applied for and/or been granted a special liquor license this calendar year? *NO* If so, please give date(s) of Special Licenses and/or applications and title of event(s). _____

Is this event an annual or regular event? If so, when was the last time this event was held and at what location? *One Time Event*

24-Hour contact number for Responsible Manager of Alcohol Event date: *781-646-5408*

Title of Event: *Michelle McPadden Bat Mitzvah Party*

Date/time of Event: *June 1, 2019/6pm-10pm*

Location of Event: *Whittemore Robbins House*

Location/Event Coordinator: *Victoria Rose*

Method(s) of invitation/publicity for Event: *mail, email*

Number of people expected to attend: *75-100*

Expected admission/ticket prices: *N/A*

Expected prices for food and beverages (alcoholic and non-alcoholic): *N/A*

Will persons under age 21 be on premises? *YES*

If "yes," please detail plan to prevent access of minors to alcoholic beverages. *Bartenders will follow the rules for alcohol service as instructed through TiPs Certification*

Have you consulted with the Department of Police Services about your security plan for the Event?
YES

OFFICE USE ONLY

For Police Chief, Operations Commander, or designee:

Your signature below indicates that you have discussed this event with the applicant, you have reviewed the applicant's security plan, and any necessary police details have been arranged for the Event.

Off. Corey P. Roteau Date *5-2-19*
Off. Corey P. Roteau
Printed name/title

POLICE COMMENTS:

What types of alcoholic beverages do you plan to serve at the Event? (Note: By State Law, all-alcohol Special Licenses are available only to nonprofit organizations.) *Beer and Wine*

What types of food and non-alcoholic beverages do you plan to serve at the Event? *See attached Menu.*

Who will be responsible for serving alcoholic beverages at the Event?

Aldo G De Oliveira

Kevin Malloy

What training or certification in responsible alcohol service does this person have? Please attach certificate or other proof of training for at least one person who will have responsibility for serving alcoholic beverages at each point of service and who will be present for the entire Event.

Bartenders have completed eTIPS on Premise 3.0

Please list the names and dates of birth for all people who will be responsible for serving alcoholic beverages at the Event. Anyone serving alcoholic beverages must be at least 21 years of age.

Aldo G De Oliveira

Kevin Malloy

Name of the Massachusetts wholesaler who will deliver to site? (Full supplier list available on the ABCC website: www.mass.gov/abcc) **Kappy's in Everett, MA**

Date of Delivery: **June 1, 2019**

Alcohol Serving Time (s): **6:00pm-9:30pm**

How, when, and by whom will excess alcoholic beverages obtained for the Event be disposed of?
Unopened will be picked up by Kappy's service; Opened, unused will be put in the trunk of designated person by the responsible manager.

Date of Pick-Up: **June 3, 2019**

Please provide details (insurance company, type of policy, name of insured, and policy limits) of any relevant insurance coverage for the Event, included but not limited to General Liability and Liquor Liability insurance. (You may be asked to supply a certificate or other proof of adequate insurance coverage.) **General and Liquor Liability Insurance, TiPS Certificate are included**

**Please submit this completed form and filing fee to the Select Board
at least 21 days before your Event. Failure to provide complete
information may delay the processing of your application.**

I HAVE READ AND UNDERSTAND ALL RULES AND REGULATIONS:

Signature: **Andrea Bloch**

Printed name: **Andrea Bloch**

Printed title & Organization name: **Michelle McPadden Bat Mitzvah Party**

Email: **apbloch@verizon.net**

Andrea Bloch
Michelle McPadden Bat Mitzvah
45 Salisbury Street Winchester, MA 01890
apbloch@verizon.net
June 1, 2019

April 17, 2019

A Bat Mitzvah will be held at the Whittemore Robbins House on Saturday, June 1, 2019 from 6:00pm-10:00pm.
Alcohol service will be from 6:00pm-9:30pm.

A Special Alcohol License Application has been submitted to the Select Board.

This is the Security Plan.

We anticipate approximately 70 guests to attend. There will be 10 guests under the age of 21.

Victoria Rose, Event Coordinator, will be on site to monitor the use of the Whittemore Robbins House. Beaujolais Catering Company will be catering the event and will provide the food service and beverage service. Michelle Noska, Responsible Manager and bartenders, Aldo De Oliveira and Kevin Malloy and the event coordinator are all responsible for ensuring that the event runs smoothly.

Parking for the event will be available in the Whittemore Robbins House parking lot, Robbins Library parking lot and on the side streets, as well as Massachusetts Avenue.

Please advise if there are other items that we need to consider.

• • • C-1010

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ims eTIPS On Premises 3.0

Issued: 07/15/2018

ID: 455336

Expires: 07/15/2021

Alto G De Oliveira

Rebeca Costa

98 S Bedford St

Burlington, MA 01803-5179 USA

Date of Birth:

[Redacted]

tips[®] eTIPS On Premise 3.0 **CERTIFIED**

Issued: 5/29/2018

Expires: 5/29/2021

ID#: 4813268

Kevin Malloy
193 Crescent Ave Unit 2
Revere, MA 02151-4218

Date of birth

For service visit us online at www.gettips.com



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/8/2019

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PRODUCER	CONTACT NAME: Commercial Lines
Prescott and Son Insurance Agency, Inc.	PHONE (A/C, No, Ext): (781) 322-2350
963 Eastern Avenue	FAX (A/C, No):
	E-MAIL ADDRESS:
	INSURER(S) AFFORDING COVERAGE
	INSURER A: Hartford Insurance Group
	INSURER B: Safety Insurance Co
	INSURER C: Twin City Fire Ins Co
	INSURER D:
	INSURER E:
	INSURER F:

COVERAGES CERTIFICATE NUMBER: CL1921928590 REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:			08SBAAA8353	4/9/2019	4/9/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Liquor Liability \$ 1,000,000
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			6227097	1/21/2019	1/21/2020	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Medical payments \$ 5,000
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
C	LIQUOR LIABILITY			08SBAAA8353	4/9/2019	4/9/2020	EACH OCCURRENCE \$1,000,000 AGGREGATE \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Town of Arlington as additional Insured

CERTIFICATE HOLDER

CANCELLATION

Town of Arlington
730 Mass Ave
Arlington, MA 02474

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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Town of Arlington, Massachusetts

Request: Annual Greek Festival, May 30, 2019 - June 2, 2019

Summary:

S.Nicholas Kriketos, Parish Council, St. Athanasius the Great, 4 Appleton Street

- a) 4-Day Special (One Day) Beer & Wine License
- b) 'One Way' designation of Appleton Place (from Mass. Ave. to Burton St.)
- c) Acton Place - street closing

ATTACHMENTS:

	Type	File Name	Description
▢	Reference Material	Greek_Festival.pdf	Reference



Metropolis of Boston

SAINT ATHANASIUS THE GREAT GREEK ORTHODOX CHURCH

4 Appleton Street, Arlington, MA 02476

April 24, 2019

Dear Selectmen,

Our annual Greek Festival will be celebrated this year on Thursday, Friday, Saturday, and Sunday May 30, May 31, June 1 & June 2 2019 on our campus at 4 Appleton Street. Please accept our request for the following:

- Permission to serve wine and beer at our 4-day Festival 2019 event. The wine and beer bar will be strictly monitored and supervised by our Bar Manager, Mark Ypsilantis, and President of our Parish Council, Constandinos Ioakimidis. We've attached a completed Special License Application Packet with this request along with the \$125 fee and insurance documents covering the Town and Church.
- We ask for the authorization that Appleton Place, between Massachusetts Avenue and Burton Street, is designated a "One Way Street" heading up towards Burton Street, including the closing of Acton Place. This was put into practice the last several years during the festival, proving to be very successful in controlling traffic flow and alleviating congestion. We plan to have the appropriate police detail to further assist with matters in this area.

We are grateful for your ongoing support and look forward to welcoming you at our Annual Greek Food Festival.

Sincerely,

S Nicholas Kriketos
Secretary – Parish Council

Constandinos Ioakimidis
President-Parish Council

OFFICE OF THE BOARD OF SELECTMEN



TOWN OF ARLINGTON
MASSACHUSETTS 02476-4908

SPECIAL ALCOHOL LICENSE APPLICATION

Name of Applicant: Dean Ioakimidis - President, Parish Council

Address, phone & e-mail contact information: 4 Appleton Street Arlington MA Cell: 781-844-8159
Email: Dean@steveandsonsinc.com

Name & address of Organization for which license is sought: St. Athanasius the Great Greek Orthodox Church
Arlington MA 02476

Does this Organization hold nonprofit status under the IRS Code? ☒ Yes ☐ No

Name of Responsible Manager of Organization (if different from above):
Bar Manager - Mark Ypsilantis (Tip Certified) & Asst. Manager Christian Makredes (Tip Certified)

Address, phone & e-mail contact information: 39 Maynard Street Arlington MA Cell: 781-724-6973; mypsilantis@gmail.com

Has the Applicant or Organization applied for and/or been granted a special liquor license this calendar year? NO If so, please give date(s) of Special Licenses and/or applications and title of event(s).
THIS IS AN ANNUAL EVENT

Is this event an annual or regular event? If so, when was the last time this event was held and at what location?
yes this is an annual event

24-Hour contact number for Responsible Manager of Alcohol Event date: See Above

Title of Event: Arlington Greek Festival

Date/time of Event: May 30, May 31, June 1, & June 2 2019

Location of Event: 4 Appleton Street Arlington MA

Location/Event Coordinator: Dean Ioakimidis, Parish Council President

Method(s) of invitation/publicity for Event: Banners, Newspapers, Flyer's & Radios

Number of people expected to attend: Estimated 10,000 over 4 days

Expected admission/ticket prices: No admission cost

Expected prices for food and beverages (alcoholic and non-alcoholic): Beer \$7, - \$9 - Wine \$7(glass), \$25 (poured Bottle)
Food Prices Range from \$7 - \$27.

Will persons under age 21 be on premises? YES

If "yes," please detail plan to prevent access of minors to alcoholic beverages. Govt. issued ID required for purchase

Have you consulted with the Department of Police Services about your security plan for the Event?
Yes the security plan has been forwarded for review.

OFFICE USE ONLY

For Police Chief, Operations Commander, or designee:

Your signature below indicates that you have discussed this event with the applicant, you have reviewed the applicant's security plan, and any necessary police details have been arranged for the Event.

Det. Corey P. Rotundo Date 4-1-19
Det. Corey P. Rotundo
Printed name/title

POLICE COMMENTS:

Approved pending changes to police staffing levels so that they match previous staffing levels from 2017 and 2018. (Per Capt. Conroy)

What types of alcoholic beverages do you plan to serve at the Event? (Note: By State Law, all-alcohol Special Licenses are available only to nonprofit organizations.)

Beer & Wine only

What types of food and non-alcoholic beverages do you plan to serve at the Event? _____

Greek cuisine & pastries along with soft drinks and water.

Who will be responsible for serving alcoholic beverages at the Event? All bar servers are over the age of 21 and have 10-15 years experience serving beer and wine at this event.

What training or certification in responsible alcohol service does this person have? Please attach certificate or other proof of training for at least one person who will have responsibility for serving alcoholic beverages at each point of service and who will be present for the entire Event.

Bar Manager - Mark Ypsilantis (Tip Certified) & Asst. Manager Christian Makredes (Tip Certified)

Please list the names and dates of birth for all people who will be responsible for serving alcoholic beverages at the Event. Anyone serving alcoholic beverages must be at least 21 years of age.

Mark Ypsilantis, Age 53(DOB 4/22/65); Randy Fassas, age 56 (); Nick Ypsilantis, Age 60 (DOE);
Christian Makredes, Age 46 (DOE); Evan Ypsilantis, age 57 (); David Schubert

Name of the Massachusetts wholesaler who will deliver to site? (Full supplier list available on the ABCC website: www.mass.gov/abcc) AKG Distributors (Greek Beer & Wine) & Anheuser Busch

Date of Delivery: May 29th 2019

Alcohol Serving Time (s): Thursday May 30 5pm - 9pm, Friday May 31 11am - 10pm
June 1 Saturday 11am - 10pm, June 2 Sunday 12pm - 8pm

How, when, and by whom will excess alcoholic beverages obtained for the Event be disposed of?
any excess beer or wine will be returned to the wholesaler for a credit or disposed of.

Wholesaler will pick up all alcohol the day after the event on June 3th 2019

Date of Pick-Up: June 3th, 2019

Please provide details (insurance company, type of policy, name of insured, and policy limits) of any relevant insurance coverage for the Event, included but not limited to General Liability and Liquor Liability insurance. (You may be asked to supply a certificate or other proof of adequate insurance coverage.) See attached documents.

**Please submit this completed form and filing fee to the Board of Selectmen
at least 21 days before your Event. Failure to provide complete
information may delay the processing of your application.**

I HAVE READ AND UNDERSTAND ALL RULES AND REGULATIONS:

Signature: S Nicholas Kriketos

Digitally signed by S Nicholas Kriketos
Date: 2019.04.24 15:06:15 -04'00'

Printed name: S Nicholas Kriketos

Printed title & Organization name: Parish Council Secretary, Saint Athanasius the Great Greek Orthodox Church

Email: nicholas.kriketos@gmail.com



Metropolis of Boston

SAINT ATHANASIUS THE GREAT

GREEK ORTHODOX CHURCH

4 Appleton Street, Arlington, MA 02476

Greek Festival 2019 - Security Plan

Event Dates: May 30, 31, June 1, & 2

Thursday May 30, 5pm to 9pm

Friday May 31, 11am to 10pm

Saturday June 1, 11am to 10pm

Sunday June 2, 11am to 8pm

Saint Athanasius the Great Greek Orthodox Church also known as the Greek Orthodox Church of Arlington believes in providing a safe, secure and pleasant experience for all that attend our annual Greek Festival. Below is our detailed plan for this year's event.

Crowd control

Police officers will be present at all times during the event. Police details will follow the current staffing plan as in previous years.

Only one bar will be located in the main tent right after the main food line. A photo copied driver's license of all listed bar tenders and a photo copy of certification of those who are all T.I.P.S. certified will be made so that it can be presented to the board of selectmen. At least one T.I.P.S certified volunteer will be present at all times at the bar area.

Thursday – May 30 Hours of Operation from 5:00pm – 9:00pm

Festival will open with limited scope; only Gyro, Souvlaki, Wraps and Bar sections will be open.

We expect significantly lighter crowds during this night.

One officer posted at the main entrance to the tent 5:00pm – 9:00pm.

One officer providing overnight coverage from 11:00pm – 7:00am to ensure all products and vendor areas are secure.

Friday – May 31 Hours of Operation from 11:00am – 10:00pm

One officer posted at the main entrance to the tent 12:00pm – 10:00pm.

One officer patrolling the tent from 3:00pm – 11:00pm

One officer patrolling the Acton Place side 1:00pm – 10:00pm

Additional detail - Rank of Sargent or higher during posted hours of operation (per A.P.D. policy 3 or more details require a shift commander)

One officer providing overnight coverage from 11:00pm – 7:00am to ensure all products and vendor areas are secure.

Saturday - June 1 Hours of Operation from 11:00am – 10:00pm

One officer posted at the main entrance to the tent 12:00pm – 11:00pm.

One officer patrolling the tent from 12:00pm – 10:00pm

One officer patrolling the Acton Place side by the children's activity area from 1:00pm -10:00pm.

Additional detail - Rank of Sargent or higher during posted hours of operation (per A.P.D. policy 3 or more details require a shift commander)

One officer providing overnight coverage from 11:00pm – 7:00am to ensure all products and vendor areas are secure.

Sunday - June 2 Hours of Operation 12:00pm – 8:00pm

One officer posted at the entrance to the tent 12:00pm – 8:00pm.

One officer patrolling the tent area in the vicinity of the bar area 12:00pm – 8:00pm.

No overnight coverage required.

Cash Handling will be handled by St. Athanasius the Great Parish Council Treasurers. Random times will be selected and all deposits will be coordinated with the Arlington

Police Department to ensure the proper escort is provided. Further details can be given to the Arlington Police Department once they are on site.

Dealing with unruly patrons

Any patron of the St. Athanasius the Great Greek Festival will be spoken to by a authorized manager of the event with the presence of a Arlington Police officer. Once the situation is assessed and it is determined that the person or persons are no longer welcomed at the Greek festival they will be asked to leave St. Athanasius property.

Emergency evacuations

In the event of an emergency situation or natural disaster all patrons and volunteers will be instructed to seek safe shelter in the lower level of St. Athanasius the Great Church and the lower level of 10 Acton Street (St. Athanasius School building). All St. Athanasius volunteers will be instructed by the event manager along with the board of directors to direct all patrons to safe shelter points.

Traffic/parking considerations

A request is formally made to the Arlington Board of Selectmen each year to turn Appleton place into a one way starting on Friday, June 1, 2018 – Sunday June 3, 2018. The one way will go from Massachusetts avenue towards Quincy street. Signage is provided from the Arlington DPW for all streets leading to Appleton Place. These streets include but are not limited to: Burton Street, Fresenden, Acton, Quincy, Massachusetts Avenue and Appleton Place.

Parking along the side of the church on Appleton Place from Massachusetts Avenue to the first entrance of the church parking lot will be reserved for people with state issued handicap plates. St. Athanasius the Great will provide all handicap parking signs for the areas indicated above.

The upper church parking lot and on street parking will be primarily used for this event. All abutters will receive advanced notices as in years past. Signage at the entrances to the tent will give all patrons advance notice to respect parking regulations in the neighborhood and the Town of Arlington.

Controlling access to alcohol by under aged persons.

A bar manager will be present at all times during the event. T.I.P.S. certified staff will be present at all times and will ensure proper policies and state laws are being adhered to. At any time St. Athanasius and its bar staff reserve the right to stop the sale of alcohol to any persons who do not have a state issued license or if the bar tender (using his training skills) does not feel comfortable serving a patron. All patrons looking to purchase alcohol will be asked to provide proper state issued identification. All alcohol will be secured and only bar managers will have authority to control inventory. Persons 21 or older will only be served alcohol per Massachusetts State Law. Only one bar will be located in the main tent right after the main food line. A photo copied driver's license of all listed bar tenders and a photo copy of certification of those who are all T.I.P.S. certified will be made so that it can be presented to the board of selectmen. At least one T.I.P.S certified volunteer will be present at all times at the bar area.

Certificate of Completion

This Certificate of Completion of
eTIPS On Premise 2.0

provided by Health Communications, Inc.
is hereby granted to:

Mark Ypsilantis

For coursework completed on May 31, 2015

Certification documents to be sent to:
39 Maynard St, Arlington, MA 02474-2317

Kei

HEALTH COMMUNICATIONS, INC.

This document is not proof of TIPS certification. It signifies only that you have completed the course. Valid certification documents will be forwarded to you.





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

04/23/2019

PRODUCER (212) 406-4004

Compass Rose and Sons, Inc.

80 Maiden Lane, Room 701

New York, NY 10038-

INSURED

St. Athanasios The Great Greek Orthodox Church

4 Appleton Street

Arlington, MA 02476-

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURERS AFFORDING COVERAGE

NAIC #

INSURER A: Great American Ins Co

16691

INSURER B: Fireman's Fund

INSURER C:

INSURER D:

INSURER E:

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> GENERAL LIABILITY	PAC 0255589	03/06/2019	03/06/2020	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY		/ /	/ /	DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR		/ /	/ /	MED EXP (Any one person) \$ 10,000
	<input checked="" type="checkbox"/> Liq Liab Agg \$3000000		/ /	/ /	PERSONAL & ADV INJURY \$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:		/ /	/ /	GENERAL AGGREGATE \$ 3,000,000
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC		/ /	/ /	PRODUCTS - COMP/OP AGG \$ 3,000,000
			/ /	/ /	Liquor Liability 1,000,000
	AUTOMOBILE LIABILITY		/ /	/ /	COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO		/ /	/ /	BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALLOWED AUTOS		/ /	/ /	BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS		/ /	/ /	PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS		/ /	/ /	
	<input type="checkbox"/> NON-OWNED AUTOS		/ /	/ /	
	GARAGE LIABILITY		/ /	/ /	AUTO ONLY - EA ACCIDENT \$
	<input type="checkbox"/> ANY AUTO		/ /	/ /	OTHER THAN EA ACC \$
			/ /	/ /	AUTO ONLY: AGG \$
B	EXCESS / UMBRELLA LIABILITY	SSE-000-5812-2235	03/06/2019	03/06/2020	EACH OCCURRENCE \$ 10,000,000
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE		/ /	/ /	AGGREGATE \$ 10,000,000
	<input type="checkbox"/> DEDUCTIBLE		/ /	/ /	\$
	<input checked="" type="checkbox"/> RETENTION \$ 10,000		/ /	/ /	\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		/ /	/ /	WC STATU-TORY LIMITS OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N	/ /	/ /	E.L. EACH ACCIDENT \$
	If yes, describe under SPECIAL PROVISIONS below		/ /	/ /	E.L. DISEASE - EA EMPLOYEE \$
	OTHER		/ /	/ /	E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

Below Certificate holder, for the period May 25, 2019 through June 10, 2019 including set up and take down, with regard to the Greek Food Festival.

CERTIFICATE HOLDER

() - () -
Town of Arlington
730 Massachusetts Avenue
Arlington, MA 02476-

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

ACORD 25 (2009/01)

INS025 (200901)

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The ACORD name and logo are registered marks of ACORD

IMPORTANT

If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

DISCLAIMER

This Certificate of Insurance does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.



Town of Arlington, Massachusetts

Request: Farmers' Market Winery Application - Sale of Wine

Summary:

Coastal Vineyards, David W. Neilson
61 Pardon Hill Road, South Dartmouth, MA 02748

ATTACHMENTS:

	Type	File Name	Description
▢	Reference Material	Coastal_Vineyards_Farmers_Market_Application.pdf	Farmers Market Application

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

YEAR 20

19

1. Licensee Information:

Name of Applicant: David W. Neilson		ABCC License Number: (If Existing Licensee) FW - 63	
Mailing Address: 61 Pardon Hill Road		Business Name (d/b/a if different): Coastal Vineyards	
Manager of Record: David W. Neilson		City/Town: South Dartmouth	State: MA Zip: 02748
Phone Number of Premises: 774-202-4876			
Other Phone: 508-642-3866	Email: info@coastal-vineyards.com	Website: www.Coastal-Vineyards.com	

Contact Person concerning this application (attorney if applicable):

Name:		City/Town:		State:		Zip:	
Address:			Email:				
Contact Number:			Fax Number:				

2. Event Information:

A. Farmer's Market licenses are only permitted at events that the Department of Agriculture has certified as Agricultural Events.

Please attach document from Department of Agricultural Resources certifying that this is an agricultural event.

Date(s) of Event: June 12 - October 30, 2019. Wednesdays from 2pm - 6:30 pm

B. Contact person for applicant during event:

Name: David W. Neilson

Phone number of contact: 508-642-3866

C. Description of the premises within the Farmer's Market:

Address of Premises for the Sale of Wine: Russell Commons Municipal Parking lot at Mystic Street/Winslow Street

City/Town: Arlington State: MA Zip: 02474 Phone Number of Premises: 781-858-8629

Describe Area to be Licensed:

Arlington Farmers Market

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

3. Existing License(s) to Manufacture, Export and Sell at Retail:

List the license(s) you hold which authorize the manufacture, exportation and retail sale of wine to consumers: (Attach a copy of each license)

Name	License Type	License Address
David W. Neilson	FW-63	61 Pardon Hill Road, South Dartmouth, MA

4. Are you providing, without charge, samples of wine to prospective customers?

Yes ☒ No ☐

Section 15F specifically requires that "all samples of wine shall be served by an agent, representative or solicitor of the licensee."

A. If yes, please provide names and addresses of all agents, representatives and solicitors:

Name	Address	ABCC License Number
David W. Neilson	61 Pardon Hill Road, South Dartmouth	FW-63

B. Proof of Age for Sale to Consumers:

Please identify all methods by which you will obtain proof of age before providing samples or making any sales of wine to consumers :

MA Drivers License
Military ID

5. Transportation and Delivery:

Please identify in detail all persons or businesses that are licensed under M.G.L. c. 138, §22 that will be making any delivery of wine on your behalf to the Farmer's Market in Massachusetts.

David W. Neilson

*If additional space is needed, please use last page.

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

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 ☒

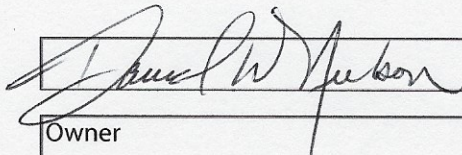
If yes, list said interest below:

Date	License	Reason why license was Suspended, Revoked or Cancelled

Pursuant to M.G.L. Ch. 62C, Sec. 49A, I certify under the penalties of perjury that, I have filed all state tax returns and paid all state taxes required under law. I further understand that each representation in this application is material to the determination of the application and state under penalty of perjury that all statements and representations therein are true.

Note: The LLA may require additional information.

Signature



Title

Owner

Date

4/30/2019

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

MATTHEW A. BEATON
Secretary

JOHN LEBEAUX
Commissioner

April 19, 2019

David Neilson
Coastal Vineyards
61 Pardon Hill Rd.
South Dartmouth, MA 02748

Re: Arlington Farmers' Market

Dear David Neilson:

Please be advised that your application for certification of the Arlington Farmers' Market, on Wednesday, June 12, 2019 to October 30, 2019, 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,

A handwritten signature in black ink, appearing to read "John Lebeaux", written in a cursive style.

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

By Email: Rebecca.Davidson@State.ma.us with the subject line "Agricultural Event Certification"

(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.

Signed and dated application with farm-winery license number

List of vendors with brief descriptions of products for current year/season

Event operational guidelines or rules for current year/season

Resume of event manager or description of experience

Plan depicting the premises and specific location where the license will be exercised. See Template 1.

Approval letter from event management including the name of the licensed farm-winery and the day(s), month and year of event. See Template 2.

1. Applicant Information

Name of Licensed Farm-Winery					
Farm-Winery License Number		State of Issue			
Contact Person					
Address					
City		State		Zip	
Phone Number		Email			
Correspondence preference	Regular Mail		Email		
<i>Note: Approval/denial letters will be sent regular mail.</i>					
Do you intend to sell, sample, or both? Check all that apply.					
Sell		Sample			

2. Event Information

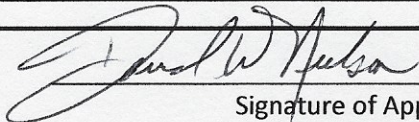
Name of Agricultural Event					
Type of Event	Agricultural Fair (as defined by MDAR policy)	Farmers Market (as defined by MDAR policy)	Other Agricultural Event		
If you selected "Other Agricultural Event", how does this event promote local agriculture?					
Event Address					
City		State		Zip	
Event Phone Number		Event Website			

3. Event Description				
What are the date(s) and time(s) of the event?				
Start date	/	/	End date	/ / Time
Month		Day	Year	Month Day Year
If this is a weekly event, on what day of the week does the event occur?				
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 agricultural/horticultural society, grange, agricultural commission or association whose primary purpose is the promotion of agriculture and its allied industries?	Yes		No	
	If yes, identify:			
4. Event Management				
Name of Event Manager				
Email Address			Phone Number	
Is this person the on-site manager?	Yes		No	
If no, identify on-site manager (include contact information):				
If there are multiple managers, list them and include contact information:				
Attach on-site manager(s) resume(s) <u>or</u> list any credentials or training of the on-site manager(s): <i>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.</i>				

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.

See attached



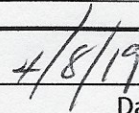
Signature of Applicant

David W. Neilson

Name (please print)

FW-63

Farm-Winery License Number



Date

Owner

Title (please print)

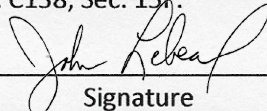
MA

State

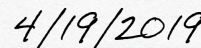
FOR DEPARTMENT USE ONLY

APPROVAL

The event listed above is an approved agricultural event by the Massachusetts Department of Agricultural Resources under M.G.L. C138, Sec. 15F.



Signature



Date

DENIAL

The event listed above is not approved as an agricultural event by the Massachusetts Department of Agricultural Resources for the following reason(s):

Signature

Date

[Name of Event] - Layout Plan

Address, City, State

Farm-Winery

Applicant Name

Farm B

Farm C

Farm A

Market Manager Area

Farm D

Farm F

Farm E

Entrance

Market/Event Address

Anywhere Town Fair
John Doe
123 Center Rd.
Anywhere, MA 01111

July 1, 2014

Dear ABCD Farm-winery,

The ABCD Farm-winery has been accepted as a vendor at the 5th annual 2014 Anywhere Town Fair, pending all necessary special licenses and/or permits. The fair will take place from Saturday September 6th 2014 to Sunday September 7th 2014, at 123 Center Road in Anywhere, MA.

Sincerely,

John Doe, Event Manager

Phone: 555-1234

Email: john.doe@anywheretownfair.com



Town of Arlington, Massachusetts

Sponsorship of COA Info Session on Senior Tax Relief

Summary:

Joseph A. Curro, Jr., Select Board



Town of Arlington, Massachusetts

Discussion: Goal Setting Meeting Date

ATTACHMENTS:

	Type	File Name	Description
▢	Reference Material	July_-_August_Calendar.pdf	Calendar

July 2019						
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	1	2	3	4 HAPPY 4TH OF JULY	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22 SELECT BOARD MEETING	23	24	25	26	27
28	29	30	31			

August 2019

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
				1	2	3
4	5	6	7	8	9	10
11	12 SELECT BOARD MEETING	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31



Town of Arlington, Massachusetts

Invitation to Participate in Memorial Day Ceremony

Summary:

Jeffrey A. Chunglo, Director of Veterans' Services

ATTACHMENTS:

	Type	File Name	Description
▢	Reference Material	J._Chunglo_CR.pdf	Reference



Town of Arlington
Department of Health and Human Services
Department of Veterans' Services
730 Massachusetts Avenue
Arlington, MA 02476

Jeffrey A. Chunglo
Director of Veterans Services

Tel: 781 316-3166
Fax: 781 316-3129

23 APR 2019

Ms. Diane Mahon
Chair, Arlington Select Board
730 Massachusetts Avenue
Arlington, MA 02476

Chairman Mahon,

I want to cordially invite you, and all members of the Board of Selectmen to participate in our Memorial Day ceremony this year.

The ceremony will be conducted on 27 MAY 2019 at 09:30 in the auditorium of the Town Hall. The Town Hall will officially be open to the public at 09:00. The keynote speaker for this year's ceremony will be Brigadier General (Ret) Francis Magurn. During the ceremony we will be dedicating our POW/MIA chair in honor of three Arlington veterans who remain Missing in Action. We will also be providing funeral honors to the family of a local veteran who never received honors following his passing.

Following the official ceremony at the Town Hall, we will proceed to Mt. Pleasant Cemetery for wreath laying ceremonies at each of the veteran burial lots. All are invited to attend. I look forward to your participation as always, and I would urge all members to attend this once in a lifetime event.

Should you have any questions or require additional information, please feel free to contact my office. Thank you in advance for your consideration.

Sincerely,

A handwritten signature in dark ink, appearing to read "Jeffrey A. Chunglo", is written over a light blue horizontal line.

Jeffrey A. Chunglo



Town of Arlington, Massachusetts

Arlington Needs a Candy Shop

Summary:

Reid Elverson, Bishop School Student

ATTACHMENTS:

	Type	File Name	Description
▢	Reference Material	Elverson_CR.pdf	Reference

April 11, 2019

Dear Board of Selectmen,

Did you know that cotton candy can help you grow new blood vessels. I think that Arlington needs a candy shop. One reason why Arlington needs to have a candy shop is because people love candy. Another reason why Arlington needs a candy shop is because candy can help your health. A final reason why Arlington needs a candy shop is because candy makes you happy and helps you work better.

One reason why Arlington needs to have a candy shop is because people love candy. For example, according to the website, "Live Science" "The human tongue can detect four basic flavors — salt, sour, bitter and sweet, but humans are naturally drawn to sweet because we are primates, animals that evolved eating fruit in the trees." This proves, that since people naturally like candy, and are drawn to it. All humans, according to science are adapted to like candy. Also, according to the article, "Why Do We Prefer Eating Sweet Things" Scientific data shows that we have sweet tooth. This proves that since we have a sweet tooth, it makes us want sugar and because of this, we are drawn to candy. In addition, according to the website, "CIMA Confections" certain research has shown that candy and other sugary treats have a positive effect on our mood. This proves that when you eat candy since it makes you happy people will like to eat candy.

Another reason why I think that Arlington needs a candy shop is because candy can help your health. For example, according to the article, "The Superpowers of Candy," chocolate can decrease your risk of getting cardiovascular disease. This proves, eating candy can decrease your risk of getting heart disease and other heart problems. Also, according to the website "Newsmax Health" according to a animal study, for people with type 2 diabetes candy is a medicine for learning and memory problems caused by type 2 diabetes. This proves that studies have shown that candy can memory and learning problems. In addition, according to the website "Reader's Digest" dark chocolate is antioxidant which means it helps fights off bad molecules. Dark chocolate also helps protect your skin against harmful UV rays. This proves that dark chocolate, while a tasty candy, which many people like as a healthy treat it also helps your body from harmful rays and fights off bad molecules that hurt your body.

A final reason why Arlington needs a candy shop is because candy makes you happy and helps you work better. For example, according to the website called "Readers digest" studies show when your blood sugar drops you struggle to focus and control your impulses. But if you have a small candy it can help you to get focused and work better. This proves candy can help you work better and get you focused and back on track during a long hard test. Also, according to the article titled "Does Sugar Help You Focus?" according to research sugar does help you focus. When your working and you start to not focus as well take a bite of candy to you help get back to being focused. This proves that research has proved that candy does, in fact help you

focus and control your impulses. In addition, according to the website titled "Frozen Dessert Supplies" "researchers have found that eating chocolate, which is the number one most craved food in America, causes the brain to release endorphins. These hormones make you feel better almost immediately,". This proves, according to research candy does make you happy

I think that Arlington needs a candy shop. One reason why Arlington needs to have a candy shop is because people love candy. Another reason why Arlington needs a candy shop is because candy can help your health. A final reason why Arlington needs a candy shop is because candy makes you happy and helps you work better. Most parents and dentists probably would disagree that Arlington needs a candy shop saying that eating candy is not good for you it might make you sick, obese, or get cavities. But kids would mostly only get candy for special occasions, tests, or for after dinner. Also, candy does not cost that much at most candy stores, like a regular m and m packet only costs about \$1.40. So, I think that Arlington needs a candy shop.

Sincerely,

Reid Elverson

Reid Elverson

OFFICE OF THE SELECT BOARD

DIANE M. MAHON, CHAIR
DANIEL J. DUNN, VICE CHAIR
JOSEPH A. CURRO, JR.
JOHN V. HURD
STEPHEN W. DECOURCEY



730 MASSACHUSETTS AVENUE
TELEPHONE
781-316-3020
781-316-3029 FAX

TOWN OF ARLINGTON
MASSACHUSETTS 02476-4908

April 25, 2019

Reid Elverson
30 Oak Hill Drive
Arlington, MA 02474

Dear Reid:

We are in receipt of your correspondence in which you discuss the need for a candy store in Arlington.

Thank you for writing to the Select Board. Your correspondence will appear on the May 6th Select Board Agenda under "Correspondence Received". Although it is not necessary for you to attend the meeting, you may do so if you are so inclined. The meeting begins at 7:00 p.m.

If you have any questions, please do not hesitate to contact this office.

Very truly yours,
SELECT BOARD

Marie A. Krepelka
Marie A. Krepelka
Board Administrator

MAK:fr



Town of Arlington, Massachusetts

Request for Signage and Pavement Markings on Chestnut Terrace and Chestnut Street

Summary:

Gisela Pikarsky, President Mystic Tower Condominium Trust

ATTACHMENTS:

	Type	File Name	Description
▢	Reference Material	Pikarsky_CR.pdf	Reference

RECEIVED
TOWN OF ARLINGTON
ARLINGTON, MA 02476
2019 MAY -2 PM 3:21

Select Board
Town of Arlington
Arlington Town Hall
Arlington, Massachusetts 02476

Dear Members of the Select Board

The Mystic Tower Condominium Trust is the governing board for our 47 unit building, located at 47 Mystic Street in Arlington, Massachusetts. The Board of Trustees for the Trust is elected by, and represents, the unit owners in our building.

The entrance and exit for our building is on Chestnut Terrace, at the rear of our building. To leave our complex, we must enter Chestnut Street from Chestnut Terrace. This is becoming more and more difficult, as gridlocked traffic on Chestnut Street has extended far beyond the normal rush hour. The new timing of the traffic signals at Chestnut Street and Mystic Street, as part of the Arlington Center Save Travel Project has resulted in longer backups on Chestnut Street. Traffic is now regularly blocking our ability to exit from Chestnut Terrace, or make a left turn from eastbound Chestnut Street into Chestnut Terrace.

The federal Manual on Uniform Traffic Control Devices (MUTCD) prescribes the use of the DO NOT BLOCK INTERSECTION sign (R10-7) for the avoidance of traffic obstructions. In addition, the MUTCD, Section 3B.17 states that:

Do Not Block Intersection markings may be used to mark the edges of an intersection area that is in close proximity to a signalized intersection, railroad crossing, or other nearby traffic control that might cause vehicles to stop within the intersection and impede other traffic entering the intersection.

Clearly, the close proximity to the signalized intersection of Mystic Street and Chestnut Street, as well as traffic backed up from the signalized intersection of Medford Street and Warren Street, is causing congestion in which vehicles stop within the intersection and impede other traffic entering the intersection to and from Chestnut Terrace. This warrants the use of traffic control signage and pavement markings described in the MUTCD.

Therefore, on 04-29-2019 the Board of Directors of the Mystic Tower Condominium Trust voted unanimously to request the Select Board to install DO NOT BLOCK INTERSECTION (R10-7) signs on both the eastbound and westbound approach to the intersection of Chestnut Terrace and Chestnut Street. In addition, we request the use of the Do Not Block Intersection pavement markings described in the MUTCD.

We look forward to your prompt and positive response.

2018-2019 Board of Trustees

Gisela Pikarsky, President
Unit 8B

Gisela Pikarsky

Ann Flentje, Vice President
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Beth Swords, Assistant Treasurer
Unit 6D



Town of Arlington, Massachusetts

Next Scheduled Meeting of Select Board May 20, 2019