OFFICE OF THE SELECT BOARD



TOWN OF ARLINGTON MASSACHUSETTS 02476-4908

SPECIAL ALCOHOL LICENSE APPLICATION

Name of Applicant:Suzanne Hammer/Evan Bauer_
Address, phone & e-mail contact information:
192 School St #1, Somoerville, Ma. 708-822-2550 Suzanne.C.Hammer@gmail.com
Name & address of Organization for which license is sought:
Beaujolais Catering, 207 Broadway, Arlington, Ma. 02474
Does this Organization hold nonprofit status under the IRS Code? Yes _X No
Name of Responsible Manager of Organization (if different from above):
Michelle Noska 617-519-6081 michelle@beaujolaiscatering.com
Address, phone & e-mail contact information:see above
Has the Applicant or Organization applied for and/or been granted a special liquor license this calendar year? 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:										
Wedding reception										
Date/time of Event:Friday, September 9, 2022, 5:30 – 10:30 pm										
Location of Event:Arlington town Hall										
Location/Event Coordinator: Patsy Kraemer										
Method(s) of invitation/publicity for Event: <u>wedding invitation</u>										
Number of people expected to attend: _140										
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? no										
If "yes," please detail plan to prevent access of minors to alcoholic beverages.										
Have you consulted with the Department of Police Services about your security plan for the Event? yes										
8										
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.										
Africa Cory & Frateuro Date 8-8-2012										
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/wine							
What types of food and non-alcoholic beverages do you plan to serve at the Event?							
Hors d'oeuvres, full dinner, seltzers, juices							
Who will be responsible for serving alcoholic beverages at the Event?							
Beaujolais bartender staff							
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 Everett							
Date of Delivery: <u>Friday, September 9, 2022</u> Alcohol Serving Time (s): <u>5:30 pm - 10:00 pm</u>							
How, when, and by whom will excess alcoholic beverages obtained for the Event be disposed of?							
Keppy"s will pick up - Monday, September 12, 2022							
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							

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:		
Printed name:	Suzanne Hammer	
Printed title & C	Organization name:	
Email:	suzanne c hammer@gmail.com	



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

8 August 2022

SECURITY PLAN FOR HAMMER/BAUER WEDDING RECEPTION

Suzanne Hammer and Evan Bauer are holding a wedding reception event on Friday, September 9, 2022, 5:30 pm –10:30 pm at the Arlington Town Hall. A One-Day Permit has been submitted to the Selectmen's Office.

This is the Security Plan.

We anticipate approximately 140 people to attend.

Patsy Kraemer will be the event coordinator for the event. Beaujolais Catering will provide food and bartending service for the reception. Greg Stathopoulos will be the custodian for the event. The families of the bride and groom will be responsible for ensuring that the event runs smoothly.

A fire services detail will be hired for the event.

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.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 04/19/2022

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(les) 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).

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Pre	scott	and Son Insurance Agency, Inc.					PHONE (781) 322-2350 FAX							
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	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													
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SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE														
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Town of Arlington 730 Mass Ave						ACC	CORDANCE WIT	TH THE POLICY	Y PROVISIONS.					
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This is your official TIPS certification card. Carry it with you as proof of your TIPS certification

Congratulations!

service, and consumption of alcohol. your participation and dedication to the responsible sale, TIPS (Training for Intervention ProcedureS) program. We value This card certifies that you have successfully completed the

Exam Date: 11/25/2019

ID#: 5247939 Name: Erika Elissa McNeal

Expiration Date: 11/25/2022

By using the techniques you have learned, you will help to underage drinking, and drunk driving. colleagues and reduce the tragedies resulting from intoxication, provide a safer environment for your patrons, peers, and

enhance the TIPS program, or if we can assist you If you have any information you think would in any way, please contact us at 800-438-8477.





Sincerely, Calor Crafty

Adam F. Chafetz **HCI President**

eTIPS On Premise 3.0

Issued: 11/25/2019 ID#: 5247939

Expires: 11/25/2022

Arlington, MA 02474-5410 Beaujolais Catering Erika Elissa McNeal 207 Broadway

For service visit us online at www.gettips.com