

OFFICE OF THE SELECT BOARD



TOWN OF ARLINGTON
MASSACHUSETTS 02476-4908

SPECIAL ALCOHOL LICENSE APPLICATION

Name of Applicant: PATRICK CURRAN

Address, phone & e-mail contact information: _____

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):

FRANKIE POWERS

Address, phone & e-mail contact information: _____

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? NO

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

Title of Event: CURRAN POWERS WEDDING

Date/time of Event: 11-26-22 12-8 PM

Location of Event: ARLINGTON TOWN HALL

Location/Event Coordinator: PATSY KRAMER

Method(s) of invitation/publicity for Event: MAILED INVITATIONS

Number of people expected to attend: 70

Expected admission/ticket prices: 0

Expected prices for food and beverages (alcoholic and non-alcoholic): 0

Will persons under age 21 be on premises? YES 3 CHILDREN

If "yes," please detail plan to prevent access of minors to alcoholic beverages. NO ACCESS
W/ PARENTS SECURITY ON PREMISE

Have you consulted with the Department of Police Services about your security plan for the Event?
UNDER 150 PEOPLE

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.

Officer Corey F. Ratea

Date 11-7-22

OFFICER COREY F. Ratea
Printed name/title

POLICE COMMENTS:

None

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?

COCKTAIL + BUFFET DINNER MENUS
WATER SODAS JUICES

Who will be responsible for serving alcoholic beverages at the Event? 2 TIPS

CERTIFIED BARTENDERS

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.

LINDSAY TORRIDI 4-26-83

MARIA ALEXANDER 4-21-96

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

Date of Delivery: 11-26-22

Alcohol Serving Time (s): 4-7:30 pm

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

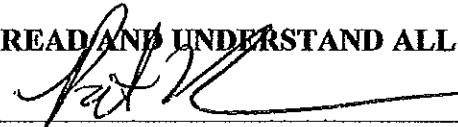
KAPPY'S DROP OFF AND PICK-UP SERVICE

Date of Pick-Up: 11-28-22

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.) POLICIES ATTACHED

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: PATRICK CURRAN

Printed title & Organization name: _____

Email: _____ @COM



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

1 November 2022

SECURITY PLAN FOR CURRAN/POWERS WEDDING RECEPTION

Patrick Curran and Alyson Powers are holding a wedding ceremony and reception event on Saturday, November 26, 2022, 2:00 pm –8:00 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 70 people to attend.

Patsy Kraemer will be the event coordinator for the event. Tryst Restaurant 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 Completion

This Certificate of Completion of
eTIPS On Premise 3.1
For coursework completed on October 17, 2022
provided by Health Communications, Inc.
is hereby granted to:

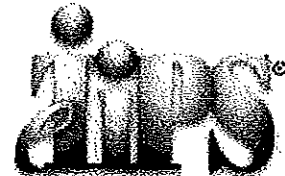
Maria Alexander

Certification to be sent to:

Arlington MA, 02474-5415 USA



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.



eTIPS On Premise 3.1 **CERTIFIED**

Issued: 9/7/2021

ID#: 5548931

Expires: 9/7/2024

Lindsay M Torridi

Tony CS Sportsbar

699 Assembly Row

Somerville, MA 02145-1231

For service visit us online at www.qr.tips.com

CERTIFICATE OF LIABILITY INSURANCE

ISSUE DATE (MM/DD/YYYY)

10/30/2022

PRODUCERAffinity Insurance Services, Inc.
900 Stewart Avenue
Garden City, NY 11530

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

INSURED

Patrick Curran

Arlington, MA 02476

Event Date: 11/26/2022

INSURERS AFFORDING COVERAGE**INSURER A:** Market American Insurance Company**HONOREE(S)**

Patrick Curran

Patrick Curran

COVERAGE**CERTIFICATE NUMBER:** WS00608535

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE ABOVE NAMED INSURED FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OF 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	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY	M2WPL0000453565200	11/26/2022 12:01 AM EDT	11/27/2022 12:01 AM	EACH OCCURRENCE	\$500,000
	<input checked="" type="checkbox"/> GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> HOST LIQUOR INCL <input checked="" type="checkbox"/> TPPD GENERAL AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC				FIRE DAMAGE (Any one fire)	Included
	AUTOMOBILE LIABILITY				MED EXP (Any one person)	Excluded
	<input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				PERSONAL INJURY	Included
	GARAGE LIABILITY				GENERAL AGGREGATE	\$500,000
	<input type="checkbox"/> ANY AUTO				DAMAGE TO RNTD PROP	Included
	EXCESS LIABILITY					
	<input type="checkbox"/> OCCUR CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				COMBINED SINGLE LIMIT (Each Accident)	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				BODILY INJURY (Per Person)	
	OTHER				BODILY INJURY (Per Accident)	
					PROPERTY DAMAGE (Per Accident)	
					AUTO ONLY-EA ACCIDENT	
					OTHER THAN EA ACC	
					AUTO ONLY AGG	
					EACH OCCURRENCE	
					AGGREGATE	
					WC STATU	OTHER
					E.L. EACH ACCIDENT	
					E.L. DISEASE-EA EMPLOYEE	
					E.L. DISEASE-POLICY LIMIT	

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

Event Type: A wedding ceremony, reception and/or rehearsal; Wedding Couple: Patrick Curran, Patrick Curran; Event Date: 11/26/2022; Location: Arlington Town Hall

If the event continues past 12:00 am at the location named on the Declarations Page, such continuation shall be considered as the event date. Event includes set up and break down and the scheduled rehearsal or rehearsal dinner scheduled within 48 hours of the event if the event is a wedding. Set up and Break down means decoration and removal of decoration at the event location that occurs no more than 24 hours prior to the event and 24 hours after the event.

The certificate holder is included as an insured under the Hosting Facility Liability Coverage, but only in respects to claims arising out of the negligence of the Named Insured.

CERTIFICATE HOLDERArlington Town Hall
730 Mass Ave
Arlington, MA 02476**CANCELLATION**

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



MARKEL AMERICAN INSURANCE COMPANY

P.O. Box 906, Pewaukee, Wisconsin 53072-0906
(800) 236-2862 www.markelamerican.com

Special Event Liability Insurance Policy Declarations Page

Policy Number:	M2WPL0000453565200	Date of Issue:	10/30/2022	Event Date:	11/26/2022
Policy Period:	If the event continues past 12:00 am at the location named on the Declarations Page, such continuation shall be considered as the event date. Event includes set up and break down and the scheduled rehearsal or rehearsal dinner scheduled within 48 hours of the event if the event is a wedding. Set up and Break down means decoration and removal of decoration at the event location that occurs no more than 24 hours prior to the event and 24 hours after the event.				
Named Insured:	Patrick Curran				
Mailing Address:	Arlington, MA 02476				
Honoree(s):	Patrick Curran Patrick Curran				
Insured Event:	A wedding ceremony, reception and/or rehearsal				
Policy Premium:	\$128.00				
Surcharges and Taxes (if applicable):	\$0.00				
1% FHCFA Tax: (if applicable):	Applied				
Multi Policy Discount (if applicable):	\$128.00				
Total:	\$128.00				
Event Location 1:	Arlington Town Hall				
Hosting Facility Insured Extension: <input checked="" type="checkbox"/>	730 Mass Ave Arlington, MA 02476				
Event Location 2:					
Hosting Facility Insured Extension: <input type="checkbox"/>					
Event Location 3:					
Hosting Facility Insured Extension: <input type="checkbox"/>					
Policy Coverage	Limit	Deductible			
General Aggregate	\$500,000	\$0			
Each Occurrence	\$500,000	\$0			
Property Damage	Included	\$1,000			
Host Liquor Liability	Included				
Administered by:	K&K Insurance Group, Inc. 1712 Magnavox Way Fort Wayne IN 46804 And Affinity Insurance Services, Inc. 900 Stewart Avenue Garden City, NY 11530				
For Policy Questions Call Toll Free:	877-723-3933 – Affinity Insurance Services, Inc.				
For Claims Call Toll Free:	800-237-2917 – K&K Insurance Group, Inc.				
Policy Form (s):	MIL 1214 MA 09	EVL100-0708	EVL129-0904		
Countersignature (if required):	<i>Scott Curran</i>				

Forms and endorsements made a part of this policy at inception are those which numbers are entered above.

Invoice #:
Client: Patrick Curran-
Phone:
Email: patty16@yahoo.com
Payment: Credit
Event Date: 11-26-2022

Delivery: 11-26-2022-
Pickup: 11-28-2022-
Caterer/Contact/Phone: -
Adults/Children: 70-
Location: Arlington Town Hall
Notes:

Proposal: \$977.75
Deposit: \$100.00
Total Owed: \$877.75
Drinks: 354

SKU	Description	Size	Qty	Price	Tax	Deposit	Total	Drinks	Returns	Final
WINE										
55933	NATALE VERGA MONTE D'ABRUZZO	750ML	16	\$10.99	\$0.00	\$0.00	\$175.84	81		\$175.84
54846	90+ RIES MOSEL L66	750ML	16	\$10.99	\$0.00	\$0.00	\$175.84	81		\$175.84
BEER										
11189	MILLER LT BT 12PK	12oz	8	\$14.99	\$0.00	\$4.80	\$124.72	96		\$124.72
04937	HEINEKEN BT 12PK	12oz	8	\$16.99	\$0.00	\$4.80	\$140.72	96		\$140.72
SODA & MIXERS										
30098	SCHWEPES CLUB SODA BT	1.0L	6	\$2.99	\$0.00	\$0.30	\$18.24			\$18.24
13284	COKE CLASSIC BT	1.0L	6	\$1.99	\$0.00	\$0.30	\$12.24			\$12.24
32003	COKE DIET BT	1.0L	6	\$1.99	\$0.00	\$0.30	\$12.24			\$12.24
14605	CANADA DRY GINGER ALE BT	1.0L	6	\$1.99	\$0.00	\$0.30	\$12.24			\$12.24
16864	DOLE PINEAPPLE JUICE	46oz	6	\$5.99	\$0.00	\$0.00	\$35.94			\$35.94
43067	OCEAN SPRAY CRANBERRY BT	32oz	4	\$4.99	\$0.00	\$0.00	\$19.96			\$19.96
31781	TROPICANA ORANGE JUICE	32oz	2	\$4.99	\$0.00	\$0.00	\$9.98			\$9.98
28410	SAN PELLEGRINO BT	1.0L	12	\$2.99	\$0.00	\$0.60	\$36.48			\$36.48
91769	POLAND SPRING BT	1.5L	15	\$1.99	\$0.00	\$0.00	\$29.85			\$29.85
71142	ROSES LIME JUICE	1.0L	1	\$6.99	\$0.00	\$0.00	\$6.99			\$6.99
46590	COCKTAIL ESSENTIAL SIMPLE SYRUP	12.7z	1	\$4.99	\$0.00	\$0.00	\$4.99			\$4.99
27560	LEMONS		12	\$0.99	\$0.00	\$0.00	\$11.88			\$11.88
27678	LIMES		20	\$1.99	\$0.00	\$0.00	\$39.80			\$39.80
ICE & EXTRAS										
00026	ICE CUBES BAG	5LB	20	\$2.99	\$0.00	\$0.00	\$59.80			\$59.80
48296	\$50 ON CALL DELIVERY CHARGE		1	\$50.00	\$0.00	\$0.00	\$50.00			\$50.00

ANY CHANGES MADE LESS THAN ONE WEEK BEFORE YOUR SCHEDULED DELIVERY WILL INCUR A \$50.00 FEE.