## OFFICE OF THE BOARD OF SELECTMEN



# TOWN OF ARLINGTON MASSACHUSETTS 02476-4908

## SPECIAL ALCOHOL LICENSE APPLICATION

Name of Applicant:
Arlington Garden Club/Friends of Robbins Library
Address, phone & e-mail contact information:
Patsy Kraemer, 85 Columbia Rd., Arlington Ma. 781-858- 8629 patsy@patsykraemer.com
Name & address of Organization for which license is sought:
Arlington Garden Club / Friends of Robbins Library
Does this Organization hold nonprofit status under the IRS Code? _X Yes No
Name of Responsible Manager of Organization (if different from above):
Address, phone & e-mail contact information:
Has the Applicant or Organization applied for and/or been granted a special liquor license this calendar year? _YES If so, please give date(s) of Special Licenses and/or applications and title of event(s).
February 27, 2015 - event was cancelled because of snow storms
Is this event an annual or regular event? If so, when was the last time this event was held and at what location?
biannual event - March 2013
24-Hour contact number for Responsible Manager on Event date:
781-858-8629

Title of Event:
Books in Bloom
Date/time of Event:
Friday, November 6, 2015 7.00 ρm - 9.00 ρ.π.
Location of Event:
Robbins Library
Location/Event Coordinator:
Patsy Kraemer/Vicki Rose
Method(s) of invitation/publicity for Event:
websites/posters/newspapers/email lists/membership lists
Number of people expected to attend:
200 - 250
Expected admission/ticket prices:
Pre Event \$25 \$30 at door
Expected prices for food and beverages (alcoholic and non-alcoholic):
\$5 for wine/champagne/beer/hard cider \$2 for waters/sodas
Will persons under age 21 be on premises?
yes - helping with coat check/set-up/breakdown
If "yes," please detail plan to prevent access of minors to alcoholic beverages.
The high school students will be given bracelets to wear to distinguish that they are under age. no one else at the event will be under 21.
Have you consulted with the Department of Police Services about your security plan for the Event?
YES - security plan has been forwarded to Corey Rateau

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.
Mc. Cocy J. Malloca Date 10/5/15
Printed name/title
reguest at least one sately 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.)
Prosecco/wine/beer/hard cider_
What types of food and non-alcoholic beverages do you plan to serve at the Event?
fruit/cheese/nuts/sweet treats/waters/sodas
Who will be responsible for serving alcoholic beverages at the Event?
Premier Bartending/Ed Garland
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.
To be provided
Name of the Massachusetts wholesaler who will deliver to site? (Full supplier list available on the ABCC website: www.mass.gov/abcc)
Atlas Liquors, Medford Ma.

Date of Delivery: Fri. November 6, 2015 Alcohol Serving Time (s):							
7:00 pm - 9:00 pm							
How, when, and by whom will excess alcoholic beverages obtained for the Event be disposed of?							
Date of Pick-Up:							
Sat. November 7, 2015							
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: Arlington Garden Club							
Email:patsy@patsykraemer.com							



#### ROBBINS MEMORIAL TOWN HALL AUDITORIUM

730 Massachusetts Avenue, Arlington, Ma. 02476

29 September 2015

#### **SECURITY PLAN FOR BOOKS IN BLOOM - 2015**

Books in Bloom is a fundraising event co-sponsored by the Arlington Garden Club and the Friends of Robbins Library. An organizing committee of twelve members of the two organizations is responsible for the event. Patsy Kraemer of the Arlington Garden Club and Sally Naish of the Friends of the Libraries are the cochairs of the planning committee.

The event is scheduled for Friday night, November 6, 2015, 7:00 pm to 9:00 pm, at the Robbins Memorial Library.

A One-Day Permit has been submitted to the Selectmen's Office.

This is the Security Plan.

Tickets will be sold for the event. We anticipate approximately 200 - 250 people to attend. Guests will come and go during the duration of the party - it is not anticipated that everyone will be at the event at the same time. There will be a mix of adults and high school students at the event. The high school students are at the event only as helpers with the coat check. They will be issued bracelets to designate that they are under age. They will be directly supervised by Amy McElroy, one of the committee members and a member of the Friends group.

As other people arrive at the bar they will be asked for an ID to verify their age by the bartenders if there is any question as to their age.

Patsy Kraemer will be the event coordinator for the event. She will be assisted by the event coordinator from the Library, Vicki Rose. Brian Rose will be the custodian for the event. A committee of volunteers from the Arlington Garden Club and the Friends of the Libraries will also be staffing the party. All these people will be responsible for ensuring that the event runs smoothly.

A police detail will be hired for the event (if required). This officer will be available to help with any emergency situations that may arise.

Parking for the event will be available in the Library parking lots, the parking lot at the Whittemore Robbins House, and on the side streets, as well as Mass. Ave.

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

(ssued: 12/1/2014 ID#: 38942

Expires: 12/1/2015 Trainer Year, 11

Edward R Garland, Jr. 28 Saunders St North Weymouth, MA 02191-1014

Trainer Certification Card



### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/12/2015

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.

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	DUCER				CONTA NAME:	CT Roblin Insur	ance Agency, In	e		
Roblin Insurance Agency, Inc. 144 Gould Street, Suite 100					NAME: RODIN Institute Agency, inc  PHONE (A/C, No, Ext): 781-455-0700  FAX (A/C, No): 7				. 781-4	149-8976
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	PO Box 310				INSURER C : Torus Specialty Insurance Co.					
	Waltham, MA 02451				INSURER D:					
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Α	X COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE DAMAGE TO RENTED	\$	1,000,000
_	CLAIMS-MADE X OCCUR			680-4B652113-15-42		03/11/2015	03/11/2016	PREMISES (Ea occurrence)	\$	100,000
В	X Liquor Liability			CL1569703B		03/11/2015	03/11/2016	MED EXP (Any one person)	\$	5,000
								PERSONAL & ADV INJURY	\$	1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	3,000,000
	POLICY PRO-							PRODUCTS - COMP/OP AGG		3,000,000
	OTHER:							COMBINED SINGLE LIMIT	\$	
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$	
	ANY AUTO ALL OWNED SCHEDULED							BODILY INJURY (Per person)	\$	
	AUTOS SCHEDULED AUTOS NON-OWNED							BODILY INJURY (Per accident		
	HIRED AUTOS AUTOS							PROPERTY DAMAGE (Per accident)	\$	
									\$	
	UMBRELLA LIAB X OCCUR					EACH OCCURRENCE	\$	9,000,000		
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	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N							PER OTH- STATUTE ER	ļ	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDENT	s	
	(Mandatory in NH) If yes, describe under							E.L. DISEASE - EA EMPLOYE	<b>\$</b>	
	DESCRIPTION OF OPERATIONS below		ļ					E.L. DISEASE - POLICY LIMIT	\$	
The	CRIPTION OF OPERATIONS / LOCATIONS / VEHICI Town of Arlington is additional in the named insured.				ile, may be	e attached if more	e space is require	ed)		
CE	RTIFICATE HOLDER				CANO	ELLATION				
TOWNAR1  Town of Arlington  Town Hall				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.						
730 Massachusetts Ave. Arlington, MA 02476					Peter Kolin					