

LICENSE APPLICATION REPORT

Type of License: Common Victualler and Wine & Malt Licenses

Name of Applicant: Twyrl - Christopher Furlong and Anka Bric/Co-Owners

Address: 315 Broadway

The following Departments have **no objections** to the issuance of said license:

- Police x
- Fire
- Health
- Building
- Planning

The following Departments have **no objections** but have made comments or conditions regarding the issuance of said license: (see attached)

- Police
- Fire x
- Health x
- Building x
- Planning x

The following Departments have **objections** to the issuance of said license:
(see attached)

- Police
- Fire
- Health
- Building
- Planning

ARLINGTON POLICE DEPARTMENT

Frederick Ryan
Chief of Police



POLICE HEADQUARTERS
112 Mystic Street
Telephone 781-316-3900

Town of Arlington
MASSACHUSETTS 02474

April 3, 2017

On Monday, April 03, 2017 at 3:10 PM, I called and spoke with Christopher Furlong regarding this application for a Common Victualler and Beer and Wine License for the Twyrl, located at 315 Broadway. Mr. Furlong stated that he is opening this restaurant in the existing space available. Mr. Furlong stated that he will be serving Beer and Wine and will be having outside seating. Mr. Furlong stated that he is hoping for a June 1st opening for the restaurant.

I advised Mr. Furlong that the Board of Selectmen may be conducting C.O.R.I and S.O.R.I checks during the application process.

Pending the checks conducted by the Board of Selectmen's Office, Arlington Police Dept. is not aware of any law enforcement or public safety reasons to object to the Common Victualler and Beer and Wine License for the Twyrl.

Respectfully Submitted,

Detective Edward DeFrancisco

"Proactive and Proud"



Arlington Fire Department Town of Arlington

Administrative Office
411 Massachusetts Ave, Arlington, MA 02474
Phone: (781) 316-3803 Fax: (781) 316-3808
Email: jkelly@town.arlington.ma.us

John R Kelly
Deputy Fire Chief

315 Broadway

Checklist for food sales ownership conversion.

- All exit signs and emergency lights must be tested and in good working order
- FACP must have annual test paperwork on hand and be free of trouble and alarm signals
- Sprinkler system (if present) shall have current inspection tag
- All extinguishers must be hung with signs and a current inspection tag
- "K" extinguisher mounted and tagged in the kitchen area if using fat to cook
- All exits and exit paths must be in proper working order and free from storage
- No storage of excess combustibles allowed inside building or near exit ways
- Hoods must have current inspection/cleaning sticker attached
- Kitchen extinguishing systems must have current inspection tags
- If Ansul or Sprinklers present FACP must report to monitoring company
- Address must be clearly visible from the street
- Electrical panels must be accessible from floor to ceiling for the entire width
- Call for inspection after all has been completed 781-316-3803



Town of Arlington
Department of Health and Human Services

Office of the Board of Health

27 Maple Street
Arlington, MA 02476

Tel: (781) 316-3170
Fax: (781) 316-3175

MEMO

To: Board of Selectmen
From: Natasha Waden, Health Compliance Officer
Date: April 13, 2017
RE: Board of Health Comments for Selectmen's Meeting on Monday April 24, 2017

Please accept the following as comments from the Office of the Board of Health:

Twyri - 315 Broadway
Common Viticular License

- The applicant has not submitted a plan review application or the necessary documents for review to the Office of the Board of Health.
- A Food Permit will not be issued until a completed plan review application with all documents have been submitted, plans have been approved, and a final inspection of the Establishment has been conducted by this Office.

Outdoor Furniture

- The applicant must ensure that smoking and the use of e-cigarettes is prohibited in the outdoor seating area by conspicuously posting a notice or sign which states "No Smoking" or thereby using a sign with the international "No Smoking" symbol in the outdoor area.
- The owner or designated Person in Charge is responsible for maintaining the outdoor seating area Smoke Free.
- Any person in charge of a public place or workplace who fails to comply with the regulations is subject to a fine of (a) \$100 for the first violation, (b) \$200 for a second violation occurring within two years of the date of the first offense; and (c) \$300 for a third or subsequent violation occurring within two years of the second violation. Each calendar day on which a violation occurs shall be considered a separate offense.
- The Establishment is responsible for maintaining the outdoor seating in a clean and sanitary manner, free from garbage and trash or other refuse that would constitute a public health nuisance.

**BOARD OF SELECTMEN
TOWN OF ARLINGTON – INSPECTION REPORT**

Report is Due at the office of the Board of Selectmen by, 4/19/2017

ONE REPORT IS REQUIRED FROM EACH DEPARTMENT.

Location: 315 Broadway
Applicants Name: Christopher Furlong
D/B/A: Twyrl
Telephone: 617 699-4006
Department: Sent E-mail

Date: 3/27/2017

Report Filed By: Michael F. Byrne, Director of Inspectional Services
Vincent Lee, Inspector of Wires
Kenneth McConnell, Inspector of Plumbing & Gasfitting

Departments:

Fire
Police
Board of Health
Building, Wiring, Plumbing

Re: COMMON VICTUALLER LICENSE
and BEER & WINE LICENSES

Building

All building changes need permits.

All sign changes need approval and sign permit.

Window signs cannot exceed 25% of window or fines will be levied.

Certificate of Occupancy is needed - \$100 fee.

The Director of Inspectional Services has no objection to the issuance/ renewal of this license as the applicant has been made aware of seating capacity and necessity for showing proof of ownership of sidewalk

Plumbing

The Inspector of Plumbing and Gasfitting has no objection to the issuance/ renewal of this license.

All plumbing and Gasfitting work requires that the permits be obtained from this office for their respective trades by licensed contractors.

Electrical

The Inspector Wires has no objection to the issuance/ renewal of this license.

The applicant acknowledges that this is a conditional approval of the premises only and is not to be constructed as approval by the Inspector of Wires of concealed electrical wiring. Any new wiring must conform to the Mass. Electrical Code. Notify the Inspector of Wires in accordance with Chapter 143, Section 3L.

I have received the above report and knowledge said inspection. I fully understand that no work is to commence at the premises of the proposed location of which is the subject matter of this inspection report until the license is approved by the Board of Selectmen; furthermore, any work done is done at the applicants risk.

Applicant's Name: Ch Furlong

Date: 4-21-17

**BOARD OF SELECTMEN
TOWN OF ARLINGTON - INSPECTION REPORT**

Report is due at the Office of the Board of Selectmen by 4/19/17
ONE REPORT IS REQUIRED FROM EACH DEPARTMENT.

Location: 315 Broadway
Applicant's Name: Christopher Furlong
D/B/A: Twyrl
Telephone: 617-699-4006
Department: Sent Interoffice Mail & E-mail
Date: April 18, 2017

Meeting Date: 4/24/17

Re: COMMON VICTUALLER LICENSE

Police
Fire
Board of Health
Building
Planning

Comments by Allison Carter, Economic Development Coordinator, Department of Planning and Community Development:

The proposed business is at the former location of the Madrona Tree restaurant located at 315 Broadway. It is located in a B3 Zoning District, which is a village business district. This is an appropriate use for this location.

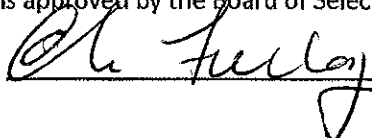
The Department has no objection to the issuance of a Common Victualler license or a Beer and Wine license to this business.

Any changes in signage, including signs in the window, and changes to the façade of the building may be subject to review by this Department. The Applicant is reminded that all signs, including re-lettering of the existing signs require a permit issued by the Building Department. Other provisions of the Zoning Bylaw may apply as determined by the Building Inspector.

I have received the above report and acknowledge said inspection. I fully understand that no work is to commence at the premises of the proposed location of which is the subject matter of this inspection report until the license is approved by the Board of Selectmen; furthermore, any work done is done at the applicant's risk.

APPLICANT SIGNATURE SECTION:

I have received the above report and acknowledge said inspection. I fully understand that no work is to commence at the premises of the proposed location of which is the subject matter of this inspection report until the license is approved by the Board of Selectmen; furthermore, any work done is done at the applicant's risk.

Applicant's Signature:  Date: 4-21-17

OFFICE OF THE BOARD OF SELECTMEN

730 Massachusetts Avenue

Town of Arlington

Massachusetts 02476-4908

(781) 316-3020

(781) 316-3029 fax

\$60.00 Filing Fee

APPLICATION

☒ COMMON VICTUALLER LICENSE

☐ FOOD VENDOR LICENSE (Take Out Only)

You must complete an application packet from the Board of Health Department located at 27 Maple St.

You must have the completed application reviewed by the Inspections Department located at 51 Grove St. before filing this application with this office

Location 315 Broadway

Name of Applicant _____

Corporate Name (if applicable) Shockwave, LLC

D/B/A TWYRL

Date March 17, 2017

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

(A) it is understood that the Board is not required to grant the license.

(B) no work is to commence at the premises of the proposed location which is the subject matter of this application until the license is approved by the Board of Selectmen, and, furthermore, any work done is done at the applicant's risk, and

(C) in the event of a proposed sale of a business requiring a Common Victualler License, an application for a transfer of said license will be deemed to be an application for a new license (subject to the rules and regulations herein contained), and the owner of such business shall be required to file with the Board of Selectmen a thirty day notice of his intention to sell same before such application will be acted upon by the Selectmen.

(D) that the license is subject to revocation if the holder of the license does not comply with Town By-Laws or the Rules and Regulations of the Board.

Signature Name 

Signature Name 

Phone: 617-699-4006 Email: furlong37@gmail.com

Note: (A) If a corporation, state full names and addresses of principal officers.

(B) If a co-partnership, information must be provided on each partner; if a corporation, information must be provided on corporate officer making application.

Name <u>Christopher Furlong</u>	Name <u>Anka Bric</u>
Address <u>31 Franklin Road</u>	Address <u>38 Elmwood Road</u>
City <u>Winchester</u> Zip <u>01890</u>	City <u>Needham</u> Zip <u>02492</u>
DESCRIPTION OF APPLICANT	
Born in the U.S., Yes <u>x</u> No <u> </u>	Born in the U.S., Yes <u> </u> No <u>x</u>
Born Where <u>Salem, MA</u>	Born Where <u>Ljubljana, Slovenia</u>
Date of Naturalization <u> </u>	Date of Naturalization <u> </u>
Male or Female <u>Male</u>	Male or Female <u>Female</u>
Date of birth <u> </u>	Date of birth <u> </u>
Height <u>5 ft. 10 in.</u>	Height <u>5 ft. 8 in.</u>
Weight <u>170</u>	Weight <u>140</u>
Complexion <u>White</u>	Complexion <u>White</u>
Hair <u>Black</u> Eyes <u>Brown</u>	Hair <u>Brown</u> Eyes <u>Brown</u>
Mother's Name <u>Brodvine</u>	Mother's Name <u>Nada Mrakovcic Bric</u>
Father's Name <u>Robert J. Furlong</u>	Father's Name <u>Leopold Bric</u>
Wife's Maiden Name <u>Bric</u>	Wife's Maiden Name <u> </u>

Photo 1 inch by 1 inch



=====

The Establishment shall operate as:

☐ Sole Ownership ☐ Partnership ☐ Total Number of Partners ☒ Corporation Based in Massachusetts
(Once approved, please go to Clerk's Office for Business Certificate)

=====

Corporate Information Required:

President	<u>Christopher Furlong, 31 Franklin Road, Winchester, MA 01890</u>		
Secretary	<u>Anka Bric, 38 Elmwood Road, Needham, MA 02492</u>		
Treasurer	<u>Anka Bric, 38 Elmwood Road, Needham, MA 02492</u>		
	Name	Address	Zip

INFORMATION RELATIVE TO APPLICATION

Breakfast _____

Yes ☒ No _____

Lunch _____

Yes ☒ No _____

Dinner _____

Yes ☒ No _____

Do you own the property? Yes _____ No ☒ Tenant At Will _____ Lease 5 years

Hours of Operation:

Every Day 10:00 a.m. to 11:00 p.m. Hours _____

Day _____ Hours _____

Day _____ Hours _____

Floor Space 1100 Sq. Ft. Seating Capacity (if any) 19

Parking Capacity (if any) none spaces Number of Employees 2

List Cooking Facilities (and implements)

Griddle, Range, Steam Table, Deli Slicer, Pasta Maker

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

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

A copy of the following items must be submitted with the application:

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

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

FOR OFFICE USE ONLY

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

Date _____ Time _____

Board Action: Approved Yes _____ No _____

APPLICANT'S RESUME

Food Business Experience of Applicant

From 2004 to 2007
Employee D/B/A East Coast Pizza
Sole Owner Christopher Furlong Location San Diego, CA
Partnership Type Food Italian
Corporation Number of Employees 5

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

List any other information that you feel will assist in the review of this application.

Christopher has a safe Serve Certification

REFERENCES

Bank C Type Account Personal Business x
Address 791 Main St., Phone 781-721-1556
Account Number Contact
Personal Reference Alan Buckler
Address 81 Highland Ave. Phone
Prior Employer Arlington
Address Phone
Number of years employed From To
Contact Position Held
Other

Name

Address

Our Menu

Hand made semolina pasta

Fine European tomatoes and cheeses

Locally sourced and organic meats

Specialty pastas

Carbonara: Pasta with pancetta, egg, Parmigiano Reggiano and Pecorino Romano

Diablo turkey: Spicy creamy marinara with red pepper and ground turkey

Bolognese: Classic meat sauce with marinara and organic ground beef

As you wish pastas

Choose a sauce:

Marinara

Creamy marinara

Diablo

Light Alfredo

Blue cheese

Creamy basil pesto

Add a meat:

Molly's Meatballs

Italian fennel sausage

Shredded chicken

Prosciutto

Sundried tomato tofu

Choose freshly sauteed vegetables:

Caramelized onions

Peppers

Zucchini

Artichokes

Eggplant

All pastas served with freshly grated Parmigiano Reggiano and fresh local bakery bread

Paninis made with fresh bakery bread

With choice of meat, vegetables and cheese

Hand-tossed pizzas made to order

Variety of toppings as desired

pasta bar

Hand made semolina pasta

Fine European tomatoes and cheeses

Locally sourced and organic meats

Specialty pastas

Carbonara: Pasta with pancetta, egg, Parmigiano Reggiano and Pecorino Romano

Diablo turkey: Spicy creamy marinara with red pepper and ground turkey

Bolognese: Classic meat sauce with marinara and organic ground beef

As you wish pastas

Choose a sauce:

Marinara

Creamy marinara

Diablo

Light Alfredo

Blue cheese

Creamy basil pesto

Add a meat:

Molly's Meatballs

Italian fennel sausage

Shredded chicken

Prosciutto

Sundried tomato tofu

Choose freshly sauteed vegetables:

Caramelized onions

Peppers

Zucchini

Artichokes

Eggplant

All pastas served with freshly grated Parmigiano Reggiano and fresh local bakery bread

Paninis made with fresh bakery bread

With choice of meat, vegetables and cheese

Hand-tossed pizzas made to order

Variety of toppings as desired

Fresh garden salads

Mixed greens with peppers, shredded carrots, shredded cabbage, cherry tomatoes, onions, fresh croutons

Add chicken

All pastas served with freshly grated Parmigiano Reggiano and fresh local bakery bread

Crepes, for breakfast or anytime

Chocolate

Nutella

Strawberries

Bananas

Vanilla cream

Lemon cheesecake filling

Whipped cream

Drinks

Soft drinks

Juices

(Beer)

(Wine)

Espresso

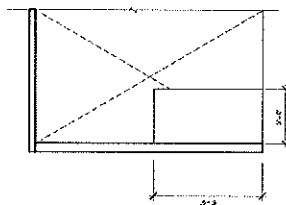
Cappuccino

Fruit smoothies

- Before placing your order, please inform your server if a person in your party has a food allergy



-



② Sending Word
3:15 - 3:30

② 2000 10/28

315 Broadway
Arlington, MA

2-28-17

A101

On Drawing

Unofficial Property Record Card - Arlington, MA

General Property Data

Parcel ID 045.0-0005-0008.0	Account Number 31940
Prior Parcel ID 31940 --	
Property Owner TRITON-ARLINGTON LLC	Property Location 311 -321 BROADWAY
	Property Use Store
Mailing Address 180 SECOND STREET	Most Recent Sale Date 6/9/2014
	Legal Reference 63725-317
City CHELSEA	Grantor CURTIS THOMAS+HADDAD JAMES,
Mailing State MA Zip 02150	Sale Price 99
ParcelZoning B3	Land Area 0.385 acres

Current Property Assessment

Card 1 Value	Building Value 1,292,300	Xtra Features Value 0	Land Value 682,000	Total Value 1,974,300
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Building Description

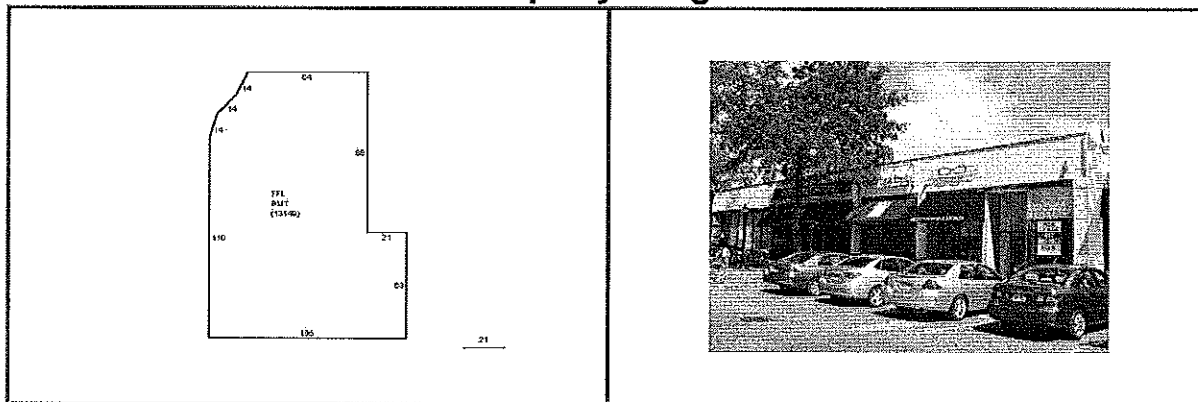
Building Style Store	Foundation Type BrickStone	Flooring Type Lino/Vinyl
# of Living Units 5	Frame Type Steel	Basement Floor Concrete
Year Built 1930	Roof Structure Flat	Heating Type Forced H/Air
Building Grade Average (+)	Roof Cover Tar & Gravel	Heating Fuel Oil
Building Condition Very Good	Siding Brick	Air Conditioning 100%
Finished Area (SF) 13149	Interior Walls Drywall	# of Bsmt Garages 0
Number Rooms 0	# of Bedrooms 0	# of Full Baths 3
# of 3/4 Baths 0	# of 1/2 Baths 7	# of Other Fixtures 0

Legal Description

Narrative Description of Property

This property contains 0.385 acres of land mainly classified as Store with a(n) Store style building, built about 1930 , having Brick exterior and Tar & Gravel roof cover, with 5 unit(s), 0 room(s), 0 bedroom(s), 3 bath(s), 7 half bath(s).

Property Images



Disclaimer: This information is believed to be correct but is subject to change and is not warranted.



TWYRL

MAINTENANCE PLAN

Trash, refuse and garbage will be stored in a secured dumpster located at the rear of the premises which will be shielded and screened from public view. Refuse removal service will be provided by duly licensed contractors with pick-up as often as necessary, but not less than twice per week and between the hours of 7:00 a.m. and 6:00 p.m. Monday through Friday.

A duly licensed contractor will be used to ensure that no pest control issues arise.

The cooking and ventilation equipment will be regularly cleaned in accordance with manufacture instructions and industry recommendations.

The cooking ventilation equipment will be in accordance with the requirements of the Arlington Board of Health and the Redevelopment Board Special Permit,

The kitchen will be kept in the highest state of cleanliness and will be fully cleaned and sanitized nightly.

The floors will be swept and mopped multiple times daily.

The ADS compliant handicapped-accessible bathrooms and all other bathrooms will be cleaned according to the posted routine daily.

The area directly outside the entrance as well as the patio seating/dining area will be monitored to ensure that it is free of debris and/or clutter, cleaned daily, as well as free from snow and ice.

Christopher E. Furlong hold a Food Manager Certificate from ServeSafe.

CHRISTOPHER E. FURLONG

Winchester, MA
617-699-4006
furlong37@gmail.com

A results-driven professional with proven experience

EXPERIENCE:

East Coast Pizza, San Diego, CA (2004–2007)

RESTAURANT OWNER – Built, owned and operated a successful retail food business from the ground up. Performed all duties including: head chef, quality control, scheduling, accounting, marketing, merchandising and advertising. Brokered and sold business at a significant profit.

Time Warner Media, San Diego, CA (2003-2004)

ACCOUNT EXECUTIVE – Supervised \$1.9 million dollars in advertising accounts including advertising for Harrah's Casino. Generated more than \$1 million dollars in new business.

Brubaker Advertising, San Diego, CA (2000-2002)

CREATIVE DIRECTOR - Wrote, produced and directed radio, television and print ads and infomercials. Supervised placement of media campaigns in six major markets. Produced comprehensive market research studies for automotive sales trends in five major markets. Designed major automobile manufacturer's multi-media, retail sales campaign. Created materials for and managed new business development initiative.

Cox Media, San Diego, CA (1997-2000)

ACCOUNT EXECUTIVE - Generated more than \$1 million in new business. Sales Person of the Month: April, September 1999; February, March, June 2000. Wrote, produced and directed television commercials including San Diego Padres Baseball campaigns.

ADDITIONAL EXPERIENCE:

Account Executive - WXTK FM Radio, West Yarmouth, MA

Account Executive – KMCG FM Radio, San Diego, CA

Restaurant Manager – DAKA International, Saugus, MA

Restaurant Manager – Lulu's Alibi, West Hollywood, CA

Retail Store Manager – Hollywood Entertainment, Encinitas, CA

Professional Ski Patrol – Sunday River Ski Resort, Bethel, ME

EDUCATION:

University Of Massachusetts, Amherst, MA

Bachelor of Arts – English

INTERESTS:

Skiing, mountain-biking, surfing, hiking, travel, pizza

*References, design- portfolio, commercial demo-reels
and sales presentation samples upon request*

SUMMARY

Research investigator with extensive experience in drug discovery, molecular biology, cellular assays and mouse models.

RESEARCH EXPERIENCE

NOVARTIS INSTITUTES FOR BIOMEDICAL RESEARCH, Cambridge, MA
2011-present

Projects:

- ❖ **Lab head in Oncology**
Led programs in drug discovery for oncology targets
Supervised associates conducting experiments

PROTEOSTASIS THERAPEUTICS, INC., Cambridge, MA
2009-2011

Projects:

- ❖ **Program leader for cell models of disease**
Designed and constructed lentiviral-based cell lines of protein-folding and stress pathway diseases.
Performed low-throughput testing of in-house compounds in disease model cell lines.
Supervisor for research associate.

Additional responsibilities:

- ❖ **Lab management**
Instrumental in setting up new lab for tissue culture and biochemistry capabilities.
In charge of ordering all items for biology lab.

COLD SPRING HARBOR LABORATORY, Cold Spring Harbor, NY
2002-2008

Post Doctoral Fellow

Mentor: Scott W. Lowe, Ph.D

Projects:

- ❖ **Utilizing RNAi to identify tumor suppressors individually and in screens.**
Performed a successful *in vivo* screen using 2300 shRNAs in a mouse lymphoma model.
Identified and validated a number of novel tumor suppressors both *in vivo* and *in vitro*.
Determined mechanism of action for selected genes.

- ❖ **Identifying mechanisms of tumorigenesis in mouse lymphoma models.**
Determined mechanism of action for point mutants of c-Myc oncogene that renders them highly tumorigenic. Demonstrated the first example of an oncogene that does not require a cooperating mutation.
- ❖ **Analyzing drug response of cells to altered death receptor pathways.**
Analyzed response of cells with varying genotypes to a number of drugs including TRAIL, TNF and doxorubicin.

Skills:

Molecular Biology: shRNA design and testing, cloning, DNA and RNA preparation, PCR, Western blots, flow cytometry analysis

Cell Culture: culturing of primary mouse cells, mouse cell lines, human cell lines, transfections and stable viral infections of cells

Mouse techniques: tail vein and IP injections, tumor palpation, fluorescence imaging, organ and tumor isolation, tumor preparation and *in vitro* culture, mouse embryo fibroblast and fetal liver cell isolation

COLORADO STATE UNIVERSITY, Fort Collins, CO

1996-2002

Graduate student

Mentor: Marvin R. Paule, Ph.D.

Projects:

- ❖ Identifying and mapping factors involved in transcription by RNA polymerase I in *Acanthamoeba castellanii*
Mapped the entire RNA pol I transcription initiation complex and actively transcribing complex on DNA.
- ❖ Collaboration involving mapping transcription factors for RNA polymerase II in yeast

Skills:

Molecular Biology and Biochemistry: protein purification by classical methods, DNA and RNA preparation, EMSA, transcription assays, protein mapping assays

Cell Culture: culturing of *Acanthamoeba* and yeast cells

AWARDS

Ruth L. Kirschstein National Research Service Award Fellowship 2002-2005.

TEACHING AND SUPERVISION EXPERIENCE

Proteostasis Therapeutics, Inc. Supervision of research associate 2009-2010.

Cold Spring Harbor Lab. Supervision of graduate students 2007-2008.

Colorado State University. Teaching assistant for lecture and laboratory classes. 1998-2000.

Colorado State University. Supervision and training of rotation undergraduate students. 2000-2002

- ❖ **Identifying mechanisms of tumorigenesis in mouse lymphoma models.**
Determined mechanism of action for point mutants of c-Myc oncogene that renders them highly tumorigenic. Demonstrated the first example of an oncogene that does not require a cooperating mutation.
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COLORADO STATE UNIVERSITY, Fort Collins, CO

1996-2002

Graduate student

Mentor: Marvin R. Paule, Ph.D.

Projects:

- ❖ **Identifying and mapping factors involved in transcription by RNA polymerase I in *Acanthamoeba castellanii***
Mapped the entire RNA pol I transcription initiation complex and actively transcribing complex on DNA.
- ❖ **Collaboration involving mapping transcription factors for RNA polymerase II in yeast**

Skills:

Molecular Biology and Biochemistry: protein purification by classical methods, DNA and RNA preparation, EMSA, transcription assays, protein mapping assays

Cell Culture: culturing of *Acanthamoeba* and yeast cells

AWARDS

Ruth L. Kirschstein National Research Service Award Fellowship 2002-2005.

TEACHING AND SUPERVISION EXPERIENCE

Proteostasis Therapeutics, Inc. Supervision of research associate 2009-2010.

Cold Spring Harbor Lab. Supervision of graduate students 2007-2008.

Colorado State University. Teaching assistant for lecture and laboratory classes. 1998-2000.

Colorado State University. Supervision and training of rotation undergraduate students. 2000-2002

EDUCATION

Ph.D. in Biochemistry and Molecular Biology
Colorado State University, Fort Collins, CO
June 2002

Bachelor of Arts, Economics
University of Massachusetts at Amherst, Amherst, MA
December 1991

PUBLICATIONS

Bric A*, Miething C*, Bialucha CU*, Scuoppo C, Zender L, Krasnitz A, Xuan Z, Zuber J, Wigler M, Hicks J, McCombie RW, Hemann MT, Hannon GJ, Powers S, Lowe SW. (2009)
Functional identification of tumor suppressor genes through an *in vivo* RNA interference screen in a mouse lymphoma model. **Cancer Cell** 16(4):324-35.

*co-first author

Bric A*, Hemann MT*, Teruya-Feldstein J, Herbst A, Nilsson JA, Cordon-Cardo C, Tansey WP, Lowe SW. (2005)
Evasion of the p53 tumour surveillance network by tumour-derived MYC mutants. **Nature** 436(7052):807-11.

*co-first author

Finnberg N, Gruber JJ, Fei P, Rudolph D, **Bric A**, Kim SH, Burns TF, Ajuha H, Page R, Wu GS, Chen Y, McKenna WG, Bernhard E, Lowe S, Mak T, El-Deiry WS. (2005)
DR5 knockout mice are compromised in radiation-induced apoptosis. **Mol Cell Biol** 25(5):2000-13.

Robinson MM, Yatherajam G, Ranallo RT, **Bric A**, Paule MR, Stargell LA. (2005)
Mapping and functional characterization of the TAF11 interaction with TFIIA. **Mol Cell Biol** 25(3):945-57.

Bric A, Radebaugh CA, Paule MR. (2004)
Photocross-linking of the RNA polymerase I preinitiation and immediate postinitiation complexes: implications for promoter recruitment. **J Biol Chem** 279(30):31259-67.

REFERENCES UPON REQUEST.



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street
Boston, MA 02114
www.mass.gov/abcc

APPLICATION FOR A RETAIL ALCOHOLIC BEVERAGES LICENSE

Please complete this entire application, leaving no fields blank. If field does not apply to your situation, please write N/A.

1. NAME OF PROPOSED LICENSEE (Business Contact)

Shockwave, LLC

This is the corporation or LLC which will hold the license, **not** the individual submitting this application. If you are applying for this license as a sole proprietor, not an LLC, corporation or other legal entity, you may enter your personal name here.

2. RETAIL APPLICATION INFORMATION

There are two ways to obtain an alcoholic beverages license in the Commonwealth of Massachusetts, either by obtaining an existing license through a transfer or by applying for a new license.

Are you applying for a new license ☒ New ☐ Transfer
or the transfer of an existing license?

If transferring, please indicate the
current ABCC license number you
are seeking to obtain:

If applying for a new license, are you applying for this license
pursuant to special legislation?

If transferring, by what method
is the license being transferred?

☐ Yes ☒ No

Chapter

Acts of

3. LICENSE INFORMATION / QUOTA CHECK

City/Town

Arlington

On/Off-Premises

On-Premises

TYPE

\$12 Restaurant

CATEGORY

Wines and Malt Beverages

CLASS

Annual

4. APPLICATION CONTACT

The application contact is required and is the person who will be contacted with any questions regarding this application.

First Name: John

Middle: D

Last Name: Leone

Title: Attorney

Primary Phone: 781-648-2345

Email: John@Leonelaw.com

5. OWNERSHIP Please list all individuals or entities with a direct or indirect, beneficial or financial interest in this license.

An individual or entity has a direct beneficial interest in a license when the individual or entity owns or controls any part of the license. For example, if John Smith owns Smith LLC, a licensee, John Smith has a direct beneficial interest in the license.

An individual or entity has an indirect beneficial interest if the individual or entity has 1) any ownership interest in the license through an intermediary, no matter how removed from direct ownership, 2) any form of control over part of a license no matter how attenuated, or 3) otherwise benefits in any way from the license's operation. For Example, Jane Doe owns Doe Holding Company Inc., which is a shareholder of Doe LLC, the license holder. Jane Doe has an indirect interest in the license.

A. All individuals listed below are required to complete a Beneficial Interest Contact - Individual form.

B. All entities listed below are required to complete a Beneficial Interest Contact - Organization form.

C. Any individual with any ownership in this license and/or the proposed manager of record must complete a CORI Release Form.

Name	Title / Position	% Owned	Other Beneficial Interest
Christopher E. Furlong	LLC Manager	50%	
Anka Bric	LLC Manager	50%	

For additional space, please use next page

APPLICATION FOR A NEW RETAIL ALCOHOLIC BEVERAGES LICENSE

5. OWNERSHIP (continued)

Name	Title / Position	% Owned	Other Beneficial Interest

6. PREMISES INFORMATION

Please enter the address where the alcoholic beverages are sold.

Premises Address

Street Number: Street Name: Unit:

City/Town: State: Zip Code:

Country:

Description of Premises

Please provide a complete description of the premises, including the number of floors, number of rooms on each floor, any outdoor areas to be included in the licensed area, and total square footage.

Floor Number	Square Footage	Number of Rooms
1	1100	1
basement	400	1

Patio/Deck/Outdoor Area Total Square Footage

Indoor Area Total Square Footage

Number of Entrances

Number of Exits

Proposed Seating Capacity

Proposed Occupancy

Occupancy of Premises

Please complete all fields in this section. Documentation showing proof of legal occupancy of the premises is required.

Please indicate by what right the applicant has to occupy the premises: Landlord Name:

Lease Beginning Term: Landlord Phone:

Lease Ending Term: Landlord Address:

Rent per Month:

Rent per Year:

If leasing or renting the premises, a signed copy of the lease is required.

If the lease is contingent on the approval of this license, and a signed lease is not available, a copy of the unsigned lease and a letter of intent to lease, signed by the applicant and the landlord, is required.

Please indicate if the terms of the lease include payments based on the sale of alcohol: ☐ Yes ☒ No

APPLICATION FOR A NEW RETAIL ALCOHOLIC BEVERAGES LICENSE

7. BUSINESS CONTACT

The Business Contact is the proposed licensee. If you are applying as a Sole Proprietor (the license will be held by an individual, not a business), you should use your own name as the entity name.

* Please see last page of application for required documents based on Legal Structure *

Entity Name:	Shockwave, LLC	FEIN:	[REDACTED]
DBA:	Twyrl	Fax Number:	
Primary Phone:	617-699-4006	Email:	furlong37@gmail.com
Alternative Phone:	631-434-5765	Legal Structure of Entity	LLC

Business Address (Corporate Headquarters)

☐ Check here if your Business Address is the same as your Premises Address

Street Number:	31	Street Name:	Franklin Rd.
City/Town:	Winchester	State:	MA
Zip Code:	01890	Country:	USA

Mailing Address

☒ Check here if your Mailing Address is the same as your Premises Address

Street Number:	P.O. Box 560124	Street Name:	[REDACTED]
City/Town:	West Medford	State:	MA
Zip Code:	02156	Country:	USA

Is the Entity a Massachusetts Corporation?

☒ Yes ☐ No

If no, is the Entity registered to do business in Massachusetts?

☐ Yes ☐ No

If no, state of incorporation

Other Beneficial Interest

Does the proposed licensee have a beneficial interest in any other Massachusetts Alcoholic Beverages Licenses? ☐ Yes ☒ No

If yes, please complete the following table.

Name of License	Type of License	License Number	Premises Address

Prior Disciplinary Action:

Has any alcoholic beverages license owned by the proposed licensee ever been disciplined for an alcohol related violation?

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

APPLICATION FOR A NEW RETAIL ALCOHOLIC BEVERAGES LICENSE

8. MANAGER CONTACT

The Manager Contact is required and is the individual who will have day-to-day, operational control over the liquor license.

Salutation First Name Middle Name Last Name Suffix

Social Security Number Date of Birth

Primary Phone: Email:

Mobile Phone: Place of Employment

Alternative Phone: Fax Number

Citizenship / Residency / Background Information of Proposed Manager

Are you a U.S. Citizen? ☒ Yes ☐ No

Have you ever been convicted of a state, federal, or military crime? ☐ Yes ☒ No
If yes, attach an affidavit that lists your convictions with an explanation for each

Have you ever been Manager of Record of a license to sell alcoholic beverages? ☐ Yes ☒ No

If yes, please list the licenses for which you are the current or proposed manager:

Do you have direct, indirect, or financial interest in this license? ☒ Yes ☐ No

If yes, percentage of interest

If yes, please indicate type of Interest (check all that apply):

<input type="checkbox"/> Officer	<input type="checkbox"/> Sole Proprietor
<input type="checkbox"/> Stockholder	<input checked="" type="checkbox"/> LLC Manager
<input checked="" type="checkbox"/> LLC Member	<input type="checkbox"/> Director
<input type="checkbox"/> Partner	<input type="checkbox"/> Landlord
<input type="checkbox"/> Contractual	<input type="checkbox"/> Revenue Sharing
<input type="checkbox"/> Management Agreement	<input type="checkbox"/> Other

Please indicate how many hours per week you intend to be on the licensed premises

Employment Information of Proposed Manager

Please provide your employment history for the *past 10 years*

Date(s)	Position	Employer	Address	Phone
2004 - 2007	Owner / Operator	East Coast Pizza	2015 San Elijo Ave, Cardiff, CA 92067	760-944-1599

Prior Disciplinary Action of Proposed Manager

Have you ever been involved directly or indirectly in an alcoholic beverages license that was subject to disciplinary action? If yes, please complete the following:

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

9. FINANCIAL INFORMATION

Associated Costs

Please note, the total amount of **Cash Investment** (top right table) plus the total amount of **Financing** (bottom right table) must be equal to or greater than the **Total Cost** (line G above).

Source of Cash Investment

Source of Financing

Name of Lender	Amount	Does the lender hold an interest in any MA alcoholic beverages licenses?	If yes, please provide ABCC license number of lender
Total:			0.00

Are you seeking approval for a pledge? ☐ Yes ☒ No

☐ License ☐ Stock / Beneficial Interest ☐ Inventory

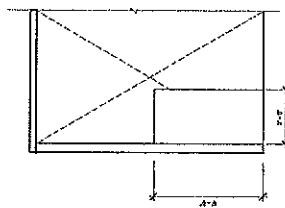
Does the lender have a beneficial interest in this license?

Does the lease require a pledge of this license?

☐ Yes ☐ No



-



② Sending Mail

2. **Slurp Knead Well** —

315 Broadway
Arlington, MA

2-28-17

A101

Scale _____ On Drawing _____

TWYRL

ALCOHOL SERVICE POLICY

In addition to our commitment to exceptional service and the highest quality cuisine, TWYRL is committed to providing responsible alcohol service. Bartenders and servers are responsible for who they serve and must always be cautious.

It is illegal to serve alcohol to a person under the age of 21, to serve a guest who is or appears to be intoxicated, or to allow a person to become intoxicated on the premises. Anyone who appears to be under 35 years old must be asked for identification before they are served alcohol; serving a guest that is under 21 and/or failure to check the ID of a person that appears to be under age 35 will result in immediate suspension or termination. Before serving alcohol to any guest, the server/bartender must adequately determine, through conversation and/or observation, that the person is not intoxicated. Always notify a manager if you suspect a guest is intoxicated. Serving an intoxicated guest or serving a guest to the point of intoxication is grounds for immediate termination as well.

Acceptable forms of ID vary slightly from State to State, but in general the following are valid if they appear to be genuine:

- State-issued driver's license
- State-issued ID card
- Passport
- Military ID

An ID checking guide is kept behind every bar and must be used to verify out-of-state IDs and IDs that are suspected to be fraudulent. Always notify a manager if you are unsure whether an ID is valid and/or genuine.

When checking IDs, we must ensure they are valid, genuine and belong to the guest.
To be valid, an ID at a minimum must:

- Contain the owner's birthdate
- Be current (not expired)
- Contain the owner's signature
- Contain the owner's photo
- Be intact (lamination is not split or cracked, no bubbles)

To ensure an ID is genuine: it must match certain specifications listed in your 7 step ID checking guide, attached, such as:

- Proper text (correct font, properly spaced), and not containing words like 'authentic', 'genuine', 'official', 'novelty'
- Proper images (holograms, ghost photos, etc)
- Proper number of letters/numbers in the license number
- Clear photo
- State-specific information on the back of the ID (not blank)

To ensure the ID belongs to the guest:

Compare the photo on the ID to the guest, focusing on features that are less likely to change like their chin, shape of their face and their hairline.

Compare the guest to physical characteristics listed on the ID (height, weight, etc.)

Be aware of the signs of intoxication:

Relaxed inhibitions: a guest may be overly friendly, use foul language, become loud, make rude comments or be unfriendly, depressed or quiet.

Impaired judgment: a guest may begin drinking faster or switch to larger or stronger drinks, make irrational or argumentative statements, become careless with money (buy drinks for strangers)

Slowed reaction time: a guest may talk or move slowly, be unable to concentrate, lose their train of thought or become forgetful. They may also become drowsy, glassy-eyed, or unable to focus.

Impaired motor coordination: a guest may stagger, stumble, fall down, bump objects or sway when sitting or standing. They may also slur their speech, spill drinks or drop objects and be unable to pick them up.

Prevent intoxication by:

Offering food: this keeps alcohol in the stomach, slowing its absorption into the bloodstream

Offering water: drinking alcohol causes dehydration, making guests thirsty and causing them to drink more than they normally would. Drinking water will off-set this.

Do not serve more than one drink at a time: this will help pace the guest's consumption

DO NOT SERVE MORE THAN TWO DRINKS TO ANY GUEST WITHOUT TAKING AN ORDER FOR FOOD.

The sale of alcohol for off premises use is not allowed:

The sale of unopen alcoholic beverages for consumption off premise is not allowed in any circumstances.

Any wine left by a guest in an open bottle during service, can be taken off premises by the patron only in the following circumstance and manner. Before permitting the carry out of a bottle of wine employees must:

- 1) Securely reseal the bottle of wine;
- 2) Place the resealed bottle in a one-time-use tamper-proof transparent bag;
- 3) Securely seal the bag; and,
- 4) Affix the receipt that prominently displays the date of the purchase of the meal and the bottle of wine to the sealed bag.

Only one partially consumed bottle of wine per patron may be resealed and removed from the restaurant.

Any wine left by a guest in an open bottle during service that the guest does not wish to take home should be sealed, labeled and used for tasting the following day prior to service or discarded.

- **I have read and understand and will comply with the TWYRL Alcohol Service Policy.**
- **I understand the failure to comply with this policy will be grounds for termination.**

Employee Name: _____

Employee Signature: _____

Date: _____

Manager Signature: _____

Date: _____

SEVEN STEP GUIDE TO PROPER ID/VALID COMPLIANCE

1. Accept driver's licenses, state issued identification cards, passports and military identification. All other forms of ID are invalid when attempting to purchase alcohol. If the customer argues, smile and tell them politely that you have no choice. It's the law.
2. Look for the expiration date. An expired ID is no longer valid, and cannot be used to establish legal drinking age.
3. Check the birth date on the ID. If math confuses you, work out the date beforehand. Check the posted date sign that say "You cannot purchase alcohol unless you were born on or before this date in...."
4. Match the face with the picture. Sometimes it's tricky to tell if the person in the picture is the same person who just pulled the card out of their wallet. Hair and even eye color can change, so look at the shape of the face. If you are unsure, look for a detail like whether the ears lobes are attached to the head or dangling.
5. Ask the customer his birth date and the spelling of his name if you are uncertain if the ID is valid. Of course, if the person is underage, she may have memorized the information on her false ID. You can ask the normal questions the underage person might have already memorized such as the address on the ID or the zip code of the ID. But, instead, when you have an ID in your hand, you've verified the date but the photo just isn't right, you should have a couple of "Go To" questions that you know what the response should be.

You don't have to know the correct answer but instead, you want the person who is using a borrowed ID to stop and think about your question, mainly because the question has surprised them and they don't know the answer. So, pick a question that most people would automatically know the answer to such as; "What's your zodiac sign?" or "What high school did you go to?" Again, you don't have to know the answer but you need to understand their answer.

Typically an underage person will start their answer with; "Uhh" or will be very silent. Try this with another employee or friend you know. If they have a brother or sister or a real close friend, just quickly ask them; "What's your sister's zodiac sign?" It's funny but you will automatically see the response you're looking for when you ask the underage person using a borrowed ID.

6. Talk to a manager. If you have checked the ID, asked questions and still are not satisfied that your customer has presented valid identification, give your manager the heads up. Most restaurants understand the importance of serving alcohol responsibly. Even the server can sometimes be held responsible under the law.
7. Compare an out of state ID against a picture in the ID GUIDE. Don't hesitate to politely excuse yourself and check.

Frequently Asked Questions:

- Q. How and when do you ask a guest for identification? What forms of proper identification do we accept?
- A. Ask anyone who looks under 35 years of age for identification immediately after they order an alcoholic beverage. State ID, driver's license, US passport, Military ID
- Q. What do you do if a guest appears intoxicated when they come into the restaurant?
- A. Inform your manager. Confirm that they are or are not intoxicated by listening and looking for signs of intoxication (slurred speech lack of coordination, etc.); do not serve any alcoholic beverages if they are.
- Q. How do you prevent a guest from becoming intoxicated?
- A. Follow ServSafe Alcohol suggestions such as getting the guest to eat (proteins are best) and don't bring another beverage until the existing one is completely finished. Pouring drinks to spec ensures alcohol is not over-poured.
- Q. What do you do if you are uncertain if a guest has had too much to drink?
- A. Inform your manager and bartender. Check for the tell-tale signs such as slurring, increased loudness unfocused eyes, improper discussions and behavior. Cease all alcohol service to the guest.
- Q. Must a guest also order food with an alcoholic beverage?
- A. Yes, a guest must order food after they have been served two alcohol beverages. The Town of Arlington requires service of food after two drinks. No guest may order a third drink unless they have ordered food.

Tastings & Trainings:

TWYRL'S goal is to maintain a suitable and fair working environment that allows for appropriate tasting and training with alcoholic beverages while protecting the safety, integrity and reputation of our team, our guests and our business.

The following is a list of tasting protocol to be followed inside the restaurant for any tastings or trainings that include alcoholic beverages of any kind.

1. Any and all alcoholic beverage tastings & trainings (beer & wine) must take place at pre-shift meetings or designated training sessions with a manager present, and the entire team invited to attend.
2. Trainings must be structured and learning outcomes achieved with the entire team, documented in daily logs/handovers.
3. Appropriate tasting size pours must be observed, not to exceed 3 ounces for malt and 2.5 ounces for wines.
4. Any inventory received and used for tastings or training must be entered in POS for tracking purposes.
5. Only employees / team members who are over the age of 21 can participate in tasting and training with alcoholic beverages.
6. Any wine left by a guest in an open bottle during service that the guest does not wish to take home should be sealed, labeled and used for tasting the following day prior to service or discarded.

SIDEWALK CAFÉ APPLICATION REPORT

Type of License: Sidewalk Café Permit

Name of Applicant: Twyrl - Christopher Furlong and Anka Bric/Co-Owners

Address: 315 Broadway

The following Departments have **no objections** but have made comments or conditions regarding the issuance of said license: (see attached)

- Board of Health x
- Building x
- Planning x
- ADA Compliance x

PLEASE NOTE:

ALL APPROVALS WILL BE SUBJECT TO CONDITIONS SET FORTH
(SUCH AS DEPARTMENT CONDITIONS, CERTIFICATE OF INSURANCE ETC.)



Town of Arlington
Department of Health and Human Services
Office of the Board of Health

27 Maple Street
Arlington, MA 02476

Tel: (781) 316-3170
Fax: (781) 316-3175

MEMO

To: Board of Selectmen
From: Natasha Waden, Health Compliance Officer
Date: April 13, 2017
RE: Board of Health Comments for Selectmen's Meeting on Monday April 24, 2017

Please accept the following as comments from the Office of the Board of Health:

Twyrl - 315 Broadway
Common Viticular License

- The applicant has not submitted a plan review application or the necessary documents for review to the Office of the Board of Health.
- A Food Permit will not be issued until a completed plan review application with all documents have been submitted, plans have been approved, and a final inspection of the Establishment has been conducted by this Office.

Outdoor Furniture

- The applicant must ensure that smoking and the use of e-cigarettes is prohibited in the outdoor seating area by conspicuously posting a notice or sign which states "No Smoking" or thereby using a sign with the international "No Smoking" symbol in the outdoor area.
- The owner or designated Person in Charge is responsible for maintaining the outdoor seating area Smoke Free.
- Any person in charge of a public place or workplace who fails to comply with the regulations is subject to a fine of (a) \$100 for the first violation, (b) \$200 for a second violation occurring within two years of the date of the first offense; and (c) \$300 for a third or subsequent violation occurring within two years of the second violation. Each calendar day on which a violation occurs shall be considered a separate offense.
- The Establishment is responsible for maintaining the outdoor seating in a clean and sanitary manner, free from garbage and trash or other refuse that would constitute a public health nuisance.

From: "Ken McConnell" <KMcConnell@town.arlington.ma.us>
To: "MaryAnn Sullivan" <MSullivan@town.arlington.ma.us>
Date: 04/05/2017 08:30 AM
Subject: twryl

Building Dept

Maryann, Twryl will have to go by the same rules as Madonna Tree. The outdoor seats will have to come from the interior count ,they are only allowed nineteen total. Ken

Attachments:

File: [ATT00002.txt](#) Size: 0k Content Type: text/plain
File: [ATT00003.html](#) (Shown Inline) Size: 0k Content Type: text/html

**BOARD OF SELECTMEN
RENEWAL - INSPECTION REPORT**

REPORT IS REQUIRED FROM EACH DEPARTMENT BY 4/19/17

Location: 315 Broadway
Applicant's Name: Christopher Furlong
D/B/A: Twyrl
Telephone: 617-699-4006
Department: Sent Interoffice Mail & E-mail

Date: 3-27-17

MEETING DATE: 4/24/17

Departments:

Re: Sidewalk Café Permit

Police

Fire

Board of Health

Building

Planning – Ali Carter, Economic Development Coordinator

Comments by each Division or Department:

The proposed outdoor seating for this business will include four tables and provide an acceptable eight-foot travel corridor on the sidewalk. The applicant should ensure that the proposed furniture be kept close to the planter in Broadway Plaza to maintain that eight-foot corridor, which allows adequate space for foot traffic and ADA compliance.

The Department of Planning and Community Development has no objection to the issuance of a sidewalk café permit to the Applicant.

Any changes in signage, including signs in the window, and changes to the facade of the building are subject to review by this department. The applicant is reminded that all signs, including re-lettering of the existing signs require a permit issued by the Building Department. Other provisions of the Zoning Bylaw may apply as determined by the Building Inspector.

Applicant Section:

I have received the above report and acknowledge said inspection. I fully understand that no work is to commence at the premises of the proposed location of which is the subject matter of this inspection report until the license is approved by the Board of Selectmen; furthermore, any work done is done at the applicant's risk.

Applicant's Name: Ch Furlong

Date: 4-21-17

COMMISSION ON DISABILITY, TOWN OF ARLINGTON

20 ACADEMY STREET, SUITE 203, ARLINGTON, MASSACHUSETTS 02476-6436 (781) 316-3431



MEMO TO: Board of Selectmen
Adam Chadelaine, Town Manager

FROM: Jack Jones, Director of Housing & Disability Programs

jj

DATE: April 18, 2017

RE: Twyrl Sidewalk Cafe' Permit

It appears from the attached diagram and a completed survey of the sidewalk in front of **Twyrl, 315 Broadway** that all conditions pertaining to accessibility of sidewalk dining are in compliance with ADA Architectural Access Guidelines and Massachusetts Architectural Access Board regulations.

In order to be in compliance with regards to sidewalk dining the absolute minimum clear path of travel along the sidewalk must be at least 36" excluding curb stones with at least 36" between tables according to the Massachusetts Architectural Access Board and the Americans with Disabilities Act Architectural Access Guidelines. The Arlington Commission on Disability does have a preference for a 48" clear path of travel. Possible obstructions on the sidewalk that could affect compliance after permitting that will need to be watched are location of tables, chairs, other furniture, trees, trash receptacles, fire hydrants, planters, sandwich boards, etc. In addition a portion (5%), but not less than one, of available seating must be wheelchair accessible. The Disability Commission recommends to the Board of Selectmen that a compliance monitoring process be developed in addition to restaurants providing training for all their restaurant staff to ensure that accessibility is maintained after the permitting process.

Sidewalk Café Permit Application - Town of Arlington, MA

This is an application to the Board of Selectmen of the Town of Arlington Massachusetts, for a permit to place and maintain a Sidewalk Café (an outside seating area for licensed restaurants) on the public right of way in Arlington, Massachusetts described below:

(PLEASE TYPE OR PRINT)

Business Name: <u>Shockwave, LLC</u>	Length of Storefront (ft): <u>13 Ft.</u>
Business Address/Location: <u>315 Broadway</u>	Width of Sidewalk along Storefront (ft); *1: <u>8 Ft.</u>
Phone Number/Email: <u>617-699-4006</u>	Length of Proposed Sidewalk Café (ft): <u>* Approximately 15 Ft.</u>
Business Representative's Name: <u>Christopher Furlong</u>	Width of Proposed Sidewalk Café (ft); *2: <u>* Approximately 18 Ft.</u>
Name & Address of Building Owner: <u>Triton Realty, P.O. Box 17004, Boston, MA 02117</u>	<u>* Includes 12 Ft. wide planter</u>

*1: Measure from front Building Wall to inside of sidewalk granite curb edge.

*2: Measure from front Building Wall to outside of Sidewalk Café surrounding border fencing/barrier.

Application Submittal Requirements:

- 1.) Fee: An annual permit fee of **\$50.00** payable to the Town of Arlington filed with the Selectmen's Office. The Board may prorate its fee for applicants in their initial term to reflect the number of months the permit sought will be held.
- 2.) Site Plan: Furnish a **Site Plan** (scale diagram) showing the location of tables, chairs, umbrellas, trash receptacles, heaters, barricades, as well as a **picture or photograph of the proposed furniture** in compliance with the following requirements:
- No person or entity shall cause to be placed within the public ways any furniture without applying for a permit and receiving approval from the Board of Selectmen of the Town. This permit shall be considered separate and distinct from others issued by the Town, including those for common victuallers.
 - Ordinarily, the location of the sidewalk café must be directly in front of the business operating the café, and may not extend beyond the side property lines. It shall be sited as close to the building façade as practicable and in no event to exceed twelve (12) feet from the food service door of the establishment.
 - Under limited circumstances, sidewalk café areas may be approved adjacent to a storefront, grouped at a distance from the storefronts, or allowed in both positions if a scaled plan showing dimensions clearly establishes:

- a) The requested location(s) create the least obstruction for pedestrian access to storefronts, crosswalks and pedestrian circulation, and/or
 - b) the location does not extend substantially beyond the side edges of the business (allowing for up to 10 feet of latitude where landscaping, public facilities, utility poles or adjacent seating areas obstruct the front of the business premises), and/or
 - c) no more than 256 square feet of the public way would be cordoned off for establishments serving liquor unless the Board determines from the scaled site plan (with dimensions shown) and photos that additional square footage for outdoor seating would not leave less than 36" to the nearest barrier, would not impede circulation, and would not preclude other allowed desirable uses for the public space, and
 - d) in every case, the additional seating does not violate zoning, building, or other code as determined by the Director of Inspectional Services.
- Further, Tables, chairs, benches, food equipment shall be located so that they do not impede, endanger or interfere with pedestrian traffic, with a minimum width of three (3) feet and a recommended width of four (4) feet of unobstructed passage for pedestrian traffic.
 - In addition, no sidewalk café furniture shall be affixed, erected, installed, placed, used or maintained **within five (5) feet** of any marked or unmarked crosswalk or handicapped ramp; or within five (5) feet of any fire hydrant, fire lane, call box, or bus stop.
 - Unlicensed furniture within the public ways of the Town will be subject to removal with the cost thereof to be borne entirely by the owner. In addition, fines may be imposed by the Board of Selectmen not to exceed \$100 for removal, storage or destruction.
 - No fixtures or devices on which food or beverages are sold or consumed shall be attached to the sidewalk or other public area. The property owner is responsible for the restoration of the sidewalk or public-right-of-way if any damage is caused by the sidewalk café. Physical barriers bordering/framing a sidewalk café may not exceed four (4) feet in height.
 - Lighting for sidewalk cafes is subject to approval during the permitting process. Tabletop lighting may include candles and battery-operated fixtures.
 - Well-designed physical barricades surrounding/framing sidewalk cafés are **strongly encouraged**.

3.) Insurance: The applicant restaurant-owner shall furnish a **certificate of insurance** providing commercial insurance coverage for bodily injury, death, disability, and property damage liability in the following amounts:

- **At least \$1,000,000 per occurrence and \$3,000,000 annual aggregate for any restaurant serving alcohol as part of its use of sidewalk café space; or**

- **At least \$300,000 per occurrence and \$900,000 annual aggregate for restaurants which are either not licensed to serve alcohol or restaurants which attest that they will not serve alcohol as part of their use of sidewalk café space.**

The Town of Arlington shall be named as an additional insured on a primary, noncontributory basis for any liability arising directly or indirectly from the operation of a sidewalk café. In the event the insurance is cancelled, the permit holder has 24 hours to reinstate the insurance or the permit shall be revoked. The permit holder shall immediately inform the Selectmen's Office if insurance under this provision is revoked and shall not operate the sidewalk café until insurance is restated in accordance with this requirement. An insurance certificate naming the Town as an additional insured must be provided to the Office of the Board of Selectmen before any Sidewalk Café/Outdoor Seating Area will be issued.

4.) Indemnification and Acknowledgement of Rights: The applicant restaurant-owner shall also furnish a signed agreement to indemnify the Town of Arlington for its use of public property as a sidewalk café/outdoor seating from any and all claims that may be brought against the Town in connection with such use. Such a signed agreement shall also acknowledge the Town's rights with respect to its property and the limitations of the permit (attached hereto).

5.) Compliance Requirements: By signing this application, the Applicant agrees to accept and comply with the following requirements:

- All services provided to sidewalk café customer and customer activity must occur within the designated sidewalk café area.
- Permit holder is responsible for proper supervision of the sidewalk café in order to ensure the requirements of this section are met.
- Permit holders must ensure that the requirements for operation are met. These include:
 - Patrons must wear shoes and shirts at all times.
 - All sidewalk cafes must maintain at least one opening for ingress and egress at all times. All sidewalk cafes shall abide by all requirements of the currently adopted International Building Code and the American's with Disabilities Act.
 - To the extent applicable, sidewalk cafes must adhere to all regulations pertaining to food and beverage enforced by the Board of Health and Board of Selectmen.
 - All areas within and surrounding a sidewalk café must be maintained in a clean, neat, and sanitary condition.
 - All permit holders shall be required to abide by all federal, state, and local laws.
 - Outdoor alcohol service (and food service when alcohol is served outdoors) shall conclude at or before 10:00 p.m. Sunday through Thursday, and at or before 11:00 p.m. Friday and Saturday.

6.) Other Regulations: By receiving a sidewalk café/outdoor seating permit, restaurants are not exempted from other federal, state, and local laws and regulations. Among other regulations, permit holders must comply with local zoning and state building code requirements and Board of Selectmen alcohol service regulations. Applicants are strongly advised to ensure their plans comply with zoning and state building requirements by contacting Inspectional Services.

7.) Revocation: The sidewalk café permit may be revoked for failure to maintain the standards required for the initial permit. A notice of intent to revoke a sidewalk café permit shall be given in writing 10-days prior to actual revocation and shall specify the area or areas of failure to meet requirements and maintain conditions the Town may have imposed. If, during that period, proof of compliance is made to the satisfaction of designated Town Inspectors by the holder of the permit, the permit shall be continued in force.

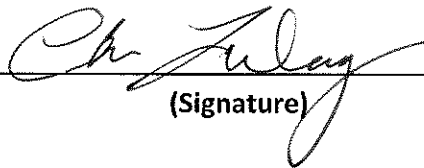
- Applicant certifies that all current property taxes due on its licensed premises are paid if property is owned by the Applicant.
- Applicant agrees to permit the Town to periodically verify the accuracy of information contained in this Application and agrees to provide information requested to verify the accuracy of the information and the Certifications contained in this Application.

8.) Term & Non-Transferability: Each Sidewalk Café Permit is valid for one calendar year from the January 1st through December 31st and is non-transferable.

I have read and fully understand the above rules and regulations applying to the approval of this permit.

Dated March 17, 20 17

By: _____



(Signature)

(Print Name & Address) _____

Christopher Furlong
31 Franklin Road
Winchester, MA 01890

NOTE:

No sales or consumption of any alcoholic beverages can be allowed by the license holder in the patio area unless and until the changes to their location are approved by both the LLA, the ABCC and a new amended license (with the approved changes added to the description of premises) is issued.

Go to: www.mass.gov/abcc website for the ABCC application - Alteration of Premises and return with this application.

OFFICE OF THE BOARD OF SELECTMEN



TOWN OF ARLINGTON

SIDEWALK CAFÉ INDEMNIFICATION AGREEMENT & ACKNOWLEDGEMENT

On behalf of the business applying for a Sidewalk Café (Outdoor Seating) license from the Town of Arlington Board of Selectmen, I, as a duly authorized agent of Shockwave, LLC, a licensed restaurant operating within the Town of Arlington, acknowledge that I seek permission to use a portion of the public sidewalk in front of (or where permitted, adjacent to) the business premises to operate a sidewalk café/outdoor seating area. I understand that a Sidewalk Café permit does not give my business any right, title, or interest in any part of the sidewalk space approved for use.

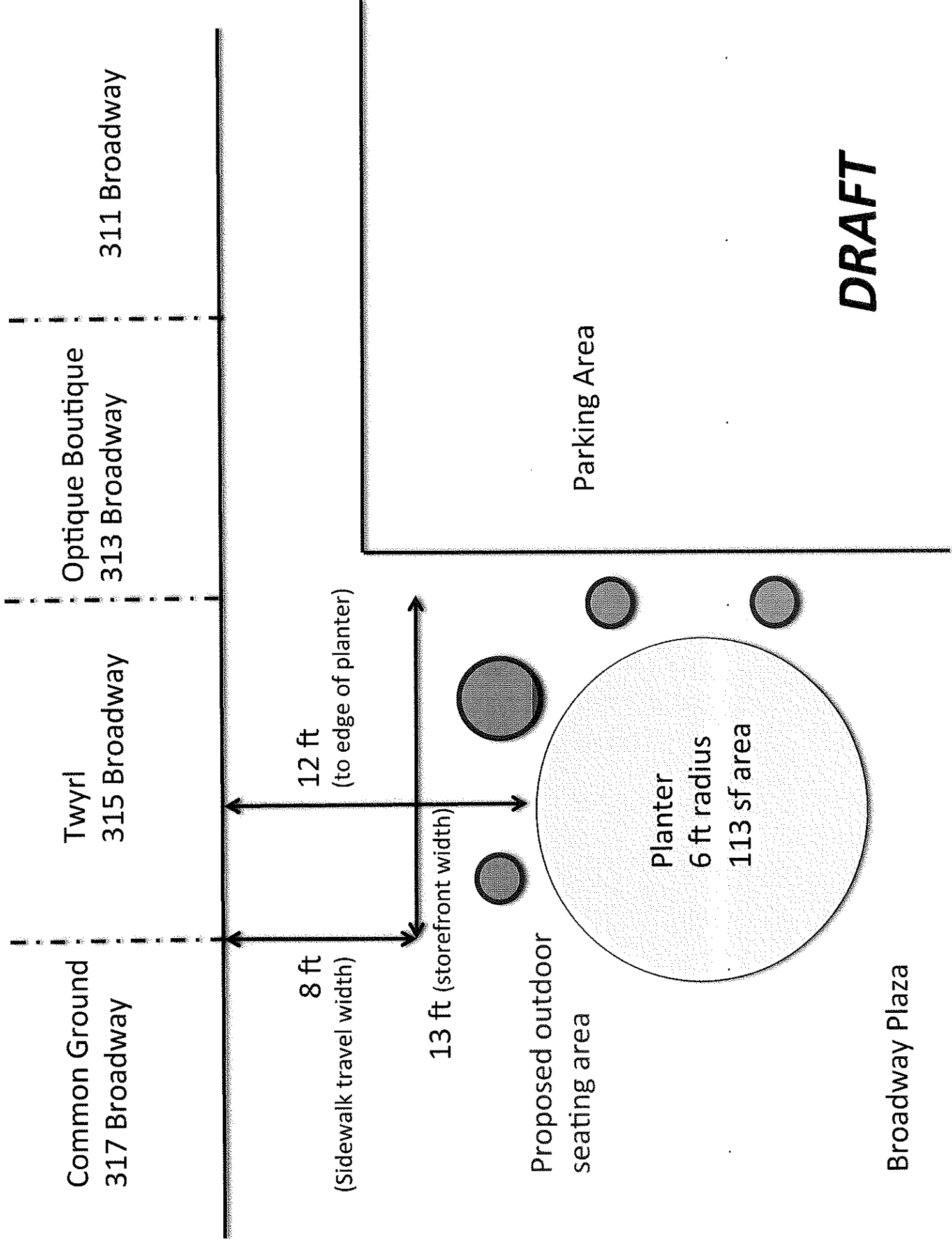
Furthermore, I, as a duly authorized agent of Shockwave, LLC, agree to hold harmless the Town of Arlington, its officers and employees, for any loss or damage arising from the use of the public sidewalk or the discontinuance of use resulting from an order, demand, or notice of any governmental agency with jurisdiction.

I understand that Board of Selectmen and/or any government agency with jurisdiction may revoke my permit to use public sidewalk space at any time for any reason whatsoever. The permit can be revoked for failure to comply with any terms and conditions of the permit or any agreements between my business and the Town of Arlington or for violation of any of the rules and regulations enforced by Board of Selectmen, the Department of Inspectional Services, the Police Department, or the Board of Health. I understand there will be no refund of any fees or compensation paid to the Town of Arlington.

I further agree to promptly remove any property placed on the sidewalk space or reimburse the Town of Arlington for the cost of moving my business' property upon receipt of any written notice, demand, or order to vacate the sidewalk space from a governmental agency with jurisdiction.

I certify that I have read and agree with the terms and conditions outlined both here and within the Sidewalk Café Permit Application.

Signature Christopher Furlong Date March 17, 2017



DRAFT

