

SELECTMEN'S MEETING AGENDA*

Donn B. Griffin Room, Town Hall

732 Main Street, Harwich, MA

Regular Meeting 6:30 P.M.

Monday, June 3, 2019

**REVISED AGENDA – Removal of “Executive Session 6:15 P.M. from Heading above
Original Posting – May 30, 2019 @ 11:59 A.M.**

**As required by Open Meeting Law, you are hereby informed that the Town will be video and audio taping as well as live broadcasting this public meeting. In addition, anyone in the audience who plans to video or audio tape this meeting must notify the Chairman prior to the start of the meeting.*

I. CALL TO ORDER

II. PLEDGE OF ALLEGIANCE

III. REORGANIZATION OF THE BOARD

IV. WEEKLY BRIEFING

V. PUBLIC COMMENTS/ANNOUNCEMENTS

VI. CONSENT AGENDA

- A. Vote to approve recommendation of the Jim Noonan Human Services Grant Review Team to award FY20 Human Services Grants – Emily Mitchell
- B. SEMCSports application for Road Race – for Family Food Pantry to be held on 11/16/19
- C. Vote to approve the 10th Annual Chamber of Commerce Charitable Foundation Road Race to be held on Saturday, June 22, 2019
- D. Vote to approve the recommendation of the Assistant Town Administrator to approve the installation of approximately 40' of conduit under the town road to provide service to customer at 22 Vacation Lane in Harwich.

VII. PUBLIC HEARINGS/PRESENTATIONS (Not earlier than 6:30 P.M.)

- A. Public Hearing – Application by First Crush Winery Cape Cod for Annual, On Premises, Farmer Series Pouring Permit for Wines, Frank Puzio, Manager

VIII. NEW BUSINESS

- A. Reminder - The Community Center's closing hours at 9:00 PM will begin 7/1/19
- B. Selectmen's Summer meeting schedule and Non-Resident Taxpayer's Meeting discussion

IX. CONTRACTS

X. OLD BUSINESS

XI. TOWN ADMINISTRATOR'S REPORTS

- A. Department Reports
- B. Water Department – Monthly Activity Report

XII. SELECTMEN'S REPORT

XIII. ADJOURNMENT

**Per the Attorney General's Office: The Board of Selectmen may hold an open session for topics not reasonably anticipated by the Chair 48 hours in advance of the meeting following "New Business." If you are deaf or hard of hearing or a person with a disability who requires an accommodation contact the Selectmen's Office at 508-430-7513.*

Authorized Posting Officer:

Posted by: _____
Town Clerk

Patricia Macura, Admin. Secretary

Date: _____
May 30, 2019

**Town of Harwich
Human Services Grant Review Team**

May 17, 2019

To: Christopher Clark, Town Administrator
Cc: Harwich Board of Selectmen
From: Harwich Human Services Grant Review Team
Re: FY 20 Harwich Human Services Grant

The FY 20 Harwich Human Services Grant Request for Proposals (RFP) was prepared by staff in the Administrator's Office and was announced on February 21, 2019. Grant applications had to be received in the Town Administrator's Office by March 29, 2019 at 4:00 PM. The anticipated funds available for grant awards totaled \$82,250. This year, 18 applications were submitted (1 more than last year), with total requests equaling \$117,236. The requests exceeded the funds available by \$34,986.

The Harwich Human Services Grant Review Team was made up of five members: Emily Mitchell, Council on Aging Director, Susanna Keith, Council on Aging Social Services Coordinator, Lee Culver, Emergency Management Director, Sheila House, Youth Counselor, and Meggan Eldredge, Health Director. All team members reviewed the applications individually using a standardized score sheet. On April 26, 2019, the Review Team met as a group to make a final recommendation based on the merits of the applications, the history and capacity of the requesting organizations, and the needs to be addressed with requested funding. After lengthy and thoughtful discussion by all Team members, we respectfully submit the following recommendations for FY 20 Harwich Human Services Grant funding:

<u>Requesting Organization</u>	<u>FY 19 Awarded</u>	<u>FY 20 Requested Amount</u>	<u>FY 20 Recommendation</u>
Harwich Ecumenical Council for Housing	\$ 5,000.00	\$ 10,000.00	\$ 5,000.00
Gosnold	\$ 7,500.00	\$ 9,990.00	\$ 8,450.00
Outer Cape Health Services	\$ 5,000.00	\$ 10,000.00	\$ 6,000.00
Independence House	\$ 6,000.00	\$ 6,000.00	\$ 6,000.00
Cape Cod Child Development Program	\$ 2,800.00	\$ 2,800.00	\$ 2,800.00
Family Pantry of Cape Cod	\$ 10,000.00	\$ 10,000.00	\$ 10,000.00
AIDS Support Group of Cape Cod	\$ 5,000.00	\$ 5,000.00	\$ 5,000.00
Lower Cape Outreach Council	\$ 8,000.00	\$ 10,000.00	\$ 8,000.00
WE CAN	\$ 3,500.00	\$ 7,946.00	\$ 3,500.00
Food 4 Kids - Church of the Holy Spirit	\$ 1,000.00	\$ 4,000.00	\$ -
Homeless Prevention Council	\$ 8,000.00	\$ 10,000.00	\$ 8,000.00
South Coastal Counties Legal Services, Inc.	\$ 3,900.00	\$ 4,000.00	\$ 2,500.00
Alzheimer's Family Support Center	\$ 6,380.00	\$ 9,000.00	\$ 9,000.00
Cape Abilities	\$ 3,000.00	\$ 6,000.00	\$ 3,000.00
Duffy Health Center	\$ 2,000.00	\$ 1,000.00	\$ 1,000.00
Duffy Health Center - In From the Streets	\$ 2,000.00	\$ 1,000.00	\$ 1,000.00
Sight Loss Services	\$ 2,500.00	\$ 4,500.00	\$ 3,000.00
Cape Mediation	No application	\$ 6,000.00	\$ -
Total:	\$ 81,580.00	\$ 117,236.00	\$ 82,250.00

For the first time in recent years, the Review Team is recommending \$0 in funding for two requesting organizations. The Food 4 Kids – Church of the Holy Spirit organization provides valuable services in our community. However, they are a religious entity and not a registered non-profit organization as required per the published RFP. All Team members shared reservations about providing funding for Cape Mediation. Council on Aging Director Emily Mitchell had direct knowledge that Cape Mediation abruptly and without explanation reduced their services at the Harwich and other Cape Councils on Aging from monthly to bimonthly in the last year, while their application states that they still offer monthly services at these locations. Further, their planned grant budget allocates 75% of their requested funds towards salaries, though the majority – if not all – services provided to Harwich residents are provided by volunteers. These are two of a number of reservations held by Team members regarding funding for Cape Mediation and so we recommend allocating \$0 of available Human Services Grant funds for this organization.

The Team would like to offer a few additional comments regarding the overall grant application and review process. All members agreed that it is imperative in future years that requesting organizations submit their full organization budget in addition to their project budget. It is impossible to evaluate the need and capacity of the organization, as well as the reasonableness of the proposed project budget, in a vacuum. It is essential to evaluate the project and requested funds in the context of the larger organization budget.

Several Team members also requested that the application process begin earlier in the year. There is a relatively fast turnaround time between when the applications are available for Team members to pick up and when the Team must come together as a group to make final recommendations. It takes a good deal of time for Team members to individually review the applications with the required depth and thoughtfulness. It would be beneficial to allow more time for Team members, who work full time for the Town in other capacities, to review the applications.

Lastly, as was recommended by the FY 19 Grant Review Team, it may be beneficial to have a Human Services Grant Committee. This would provide a venue for people in Town to provide input regarding what services they need most. This would also allow service providers and grant applicants the opportunity to share the resources and services they offer to the public and to provide more information about their requests during the grant review process. The Committee could review the applications, notify and communicate with recipients, and oversee the year-round quarterly payment process and final report submission. Requests continue to grow, both in terms of number of applicants and amount of funds requested. As the process grows more involved and more time-consuming, it would be beneficial to have a committee dedicated to this purpose.

FYI ✓

Sandy Robinson

From: Emily Mitchell
Sent: Friday, May 17, 2019 12:32 PM
To: Christopher Clark
Cc: Sandy Robinson; Patti Macura
Subject: Harwich Human Services Grant Recommendations
Attachments: FY 20 Harwich Human Services Grant Review Team Recommendations.docx

Jim Noonan

Hi Chris,

I am attaching the final recommendations of the Harwich Human Services Grant Review Team for the FY 20 grant requests. This document includes additional comments and explanations from the Team.

It is my understanding that you would like me to take point on notifying the recipients. Do you and/or the Board of Selectmen need to approve the recommendations before that happens? If the Board needs to approve them, should I be the one going through the process to get this on an upcoming agenda for a Selectmen's meeting or will you do that?

Let me know how you would like me to proceed.

Thank you and I hope you have a nice weekend.

Best,
Emily

Emily Mitchell
Director, Harwich Council on Aging
100 Oak Street
Harwich, MA 02645
Phone: 508-430-7550
Email: emitchell@town.harwich.ma.us



OFFICE OF THE SELECTMEN
732 MAIN STREET
HARWICH, MA 02645
Telephone: (508) 430-7513



APPLICATION FOR LICENSE/PERMIT

PLEASE CHECK

ROAD RACE

CRAFT FAIR

OTHER

IN ACCORDANCE WITH THE PROVISIONS OF THE STATUTES RELATING THERETO, APPLICATION AS STATED ABOVE IS HEREBY MADE BY:

NAME OF BUSINESS SEMCSports PHONE 508-284-7943

BUSINESS ADDRESS PO Box 2717

MAILING ADDRESS Cotuit, MA 02635

PLEASE STATE THE PURPOSE FOR WHICH LICENSE/PERMIT IS REQUESTED

To hold [redacted] fundraiser for Family Food
Pantry

DESCRIPTION OF ROAD RACE/CRAFT FAIR/OTHER EVENT TO BE LICENSED, PLEASE LIST DATE, TIME, LOCATION/ROUTE, ETC.

DATE November 15, 2019

TIME 10:00 a.m.

ROUTE/LOCATION See attached

(please use reverse side if necessary)

[Signature]
Signature of Applicant

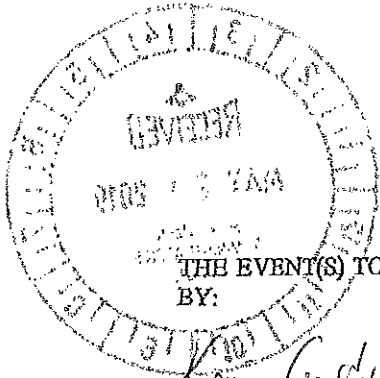
5/15/2019
Title

370-50-6322
Social Security Number of Federal Identification Number

Tax Exempt ID (for non-profit organizations)

[Signature]
Signature of Individual or Corporate Name

By Corporate Officer (if applicable)



REGULATORY COMPLIANCE FORM

THE EVENT(S) TO BE LICENSED AS DESCRIBED HEREIN HAVE BEEN REVIEWED AND APPROVED BY:

Kevin Cardin 5/21/19
Police Department Date

[Signature] 5/21/19
Building Commissioner Date

Recreation & Youth Commission Date

[Signature] 5/20/19
Board of Health Date

[Signature] 5/21/19
Fire Department Date

***Required signatures are to be obtained by the Applicant prior to submission of application with the Selectmen's Office.

For Office Use Only

FEE _____ CASH _____ CHECK _____

FOR _____

REVIEWED BY _____

DATE LICENSE ISSUED _____

REGULATORY COMPLIANCE FORM

THE EVENT(S) TO BE LICENSED AS DESCRIBED HEREIN HAVE BEEN REVIEWED AND APPROVED BY:

Police Department Date
[Signature] 5-24-19
Recreation & Youth Commission Date

Building Commissioner Date
[Signature] 5/21/19

Board of Health Date
[Signature] 5/20/19

Fire Department Date

***Required signatures are to be obtained by the Applicant prior to submission of application with the Selectmen's Office.

For Office Use Only
FEE _____ CASH _____ CHECK _____
FOR _____
REVIEWED BY _____
DATE LICENSE ISSUED _____

Current Membership #

Log In

Don't know your current membership number or password?

Join/Renew Now

USATF STORE



Family Pantry almost 5K

Distance: 3.13 miles / 5.04 km
Location: Start: Second Chance
Harwich, MA, US
Attributes: loop, mostly flat, roads
Description: Through scenic village of Harwich, MA



Added by W Patrick Lentell on 5/21/2019

DISCLAIMER: USATF and the author of this route make no warranties as to the conditions, safety, distance accuracy, or suitability for running of this route. Run at your own risk!



About

- Associations
- Bylaws & Regulations
- Employment & Internships
- Organizational Directory
- Annual Report
- Event Sanctions
- Memberships
- Course Certification

News

- Athlete Bios
- Stats
- Records
- Top-Marks Lists
- Committees
- Hall of Fame

Sports

- Track & Field
- Cross Country
- Road Running
- Race Walking
- Mountain / Ultra / Trail

Groups

- Youth Athletes
- Masters Athletes
- Elite Athletes
- Athlete Alumni
- Coaches
- Officials
- Athlete Representatives
- Event Directors
- Media

Events

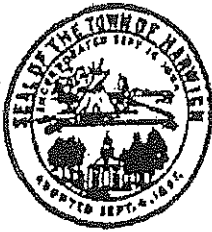
- Search the Calendar
- Team USA Events
- National Championships
- USA Running Circuit
- USATF Championship Series
- Television Schedule
- USATF Annual Meeting

Customer Service

- Log In
- Individual Memberships
- Club Memberships
- Store Returns & Exchanges
- Store Affiliate Program
- Contact Us
- Privacy & Other Policies

Cue Sheet: Family Pantry 5K

1. Start on Main Street by Second Chance
2. Follow Main Street to Earle and turn left
3. Take Earle to Lower Count and turn right
4. Take lower County to Pleasant and turn right
5. Take Pleasant to Shaggy Pine and turn left
6. Take Shaggy Pine to Chase and Turn Left
7. Take Chase to Lower County and turn left
8. Take Lower County to Pleasant and turn right
9. Take Pleasant to Shore Road and left
10. Take Shore Road to Grey's Neck and turn left
11. Take Grey's Neck to Lower County and turn right
12. Take Lower County to Brooks Road and turn left
13. Take Brooks to Main Street and turn left
14. Return to Second Chance



FORM #7

OFFICE OF THE SELECTMEN
732 MAIN STREET
HARWICH, MA 02645
Telephone: (508) 430-7513

APPLICATION FOR LICENSE/PERMIT

PLEASE CHECK

ROAD RACE CRAFT FAIR OTHER

IN ACCORDANCE WITH THE PROVISIONS OF THE STATUTES RELATING THERETO, APPLICATION AS STATED ABOVE IS HEREBY MADE BY:

NAME OF BUSINESS Harwich 5K Road Race 508-430-1165
PHONE

BUSINESS ADDRESS Harwich Chamber of Commerce Charitable Foundation
c/o Harwich Chamber of Commerce - 1 Schoolhouse Road
MAILING ADDRESS

Harwich, MA 02646

PLEASE STATE THE PURPOSE FOR WHICH LICENSE/PERMIT IS REQUESTED 10th Annual
Harwich 5K Road Race

DESCRIPTION OF ROAD RACE/CRAFT FAIR/OTHER EVENT TO BE LICENSED, PLEASE LIST DATE, TIME, LOCATION/ROUTE, ETC.

DATE Saturday - June 22, 2019

TIME 9:30 am

ROUTE/LOCATION See attached

(please use reverse side if necessary)

Cyndi Williams
Signature of Applicant

Executive Director Harwich Chamber
Title

Social Security Number of Federal Identification Number

27-210610
Tax Exempt ID (for non-profit organizations)

Signature of Individual or Corporate Name

By Corporate Officer (if applicable)

Harwich Recreation Department Youth, Park, Beach, & Commission



USE OF FACILITY FORM

DATE 5/23/19

Schoolhouse Road
Parking Lot BEACH or PARK

LOCATION REQUEST

BROOKS PARK & GAZEBO
 BROOKS FIELD / COURT
 VETERAN'S MEMORIAL FIELD COMPLEX
 BASEBALL SOFTBALL MULTI

SR MEMORIAL FIELD
 WHITEHOUSE FIELD
 J McPHEE SOCCER FIELD
 POTTER SOFTBALL FIELD
 NON-PROFIT N

CONTACT PERSON Cyndie Williams ORGANIZATION HCC Charitable Foundation

MAILING ADDRESS 1 Schoolhouse Road CITY, ST, ZIP Harwich Port, MA 02646

EMAIL Cyndie@harwichhcc.com CELL PHONE 508-430-1165

PURPOSE OF REQUEST 10th Annual Road Race # OF ATTENDEES 1000

DATE(S) REQUESTED* June 22, 2019

*ALL DATES ARE SUBJECT TO AVAILABILITY

HOURS OF USE 6am - 12noon AREA REQUESTED Schoolhouse Rd. Parking Lot

SPECIAL REQUESTS OR NEEDS

- ❖ Use of temporary tents larger than 12'x12' require location approval and a separate Town TENT PERMIT
- ❖ Use of tent stakes over 8" requires ADDITIONAL PERMISSIONS
- ❖ Activities dispensing food to the PUBLIC requires Harwich Board of Health PERMIT
- ❖ Approval pending all other required Town permits and approvals
- ❖ APPLICATION DEADLINE FOR FIELD USE FOR ANY YEAR IS FEBRUARY 1ST

USE	FEE	CAP	REFUNDABLE DEPOSIT	TOTAL DUE
FIELD OR COURT USE - ONE GAME	\$20.00	\$1000	\$50.00*	_____
WHITEHOUSE FIELD USE - ONE GAME	\$50.00	\$1000	\$50.00*	_____
FIELD/WHF MULTI DAY USE	\$150/FIELD/DAY		\$50.00-\$500*	_____
PARK OR BEACH USE - FULL DAY, WEDDING, FAMILY FUNCTION, OR SPECIAL EVENT	\$150.00		\$50.00-\$500*	_____
USE OF ELECTRICITY - PARKS	\$25/DAY		\$50.00*	_____
FIELD, PARK, BEACH USE - MULTI DAY EVENT	\$150.00/DAY		\$50.00-\$500*	_____
WHF LIGHT USAGE CHARGE/PER USE (BILLABLE IN 1/4 HOUR INCREMENTS)	\$65.00/HOUR		\$500.00*	_____
BEACH COOK FIRE	\$ 20.00		\$50.00*	_____

* <100 people \$50 deposit required, >100 people \$100 deposit required, >200 people \$300 deposit required, > 500 people \$500 deposit required. DEPOSITS WILL BE REFUNDED AFTER A SITE INSPECTION HAS BEEN COMPLETED AND/OR APPLIED TO USE OF FACILITY INVOICES WITH ANY UNUSED BALANCE RETURNED.



I HAVE READ THE ATTACHED RULES AND REGULATIONS REGARDING USE OF THIS RECREATION FACILITY AND AGREE THAT I/OUR ORGANIZATION WILL ABIDE BY THEM.

Initials

APPLICANT SIGNATURE: Cyndie Williams

TITLE Executive Director

BY: [Signature]
RECREATION REPRESENTATIVE

DATE 5/23/19

REGULATORY COMPLIANCE FORM

THE EVENT(S) TO BE LICENSED AS DESCRIBED HEREIN HAVE BEEN REVIEWED AND APPROVED BY:

[Signature] 8/02/19
Police Department Date

Building Commissioner Date

[Signature] 5/30/19
Recreation & Youth Commission Date

Board of Health Date

[Signature] 5/25/19
Fire Department Date

***Required signatures are to be obtained by the Applicant prior to submission of application with the Selectmen's Office.

For Office Use Only

FEE _____ CASH _____ CHECK _____

FOR _____

REVIEWED BY _____

DATE LICENSE ISSUED _____



Harwich 5K Road Race- Saturday *June 23, 2019* Location Harwich Port 3.34 miles

Start: In front of Georges Pizza 564 Main St., Harwichport.

- Take Main St. (rt.28) to South Street and take a right onto South.
- Follow South to Sisson Road and take a right onto Sisson.
- Follow Sisson to Forest Road and take a right onto Forest.
- Forest will merge with South Street and then turns into South Street.
- Take South Street 10 yards and then take a hard left onto Miles Street.
- Follow Miles until Cross Street and take a right onto Cross.
- Take Cross until Pleasant Street and take a right onto Pleasant
- Go 100 yards and take a left into the back entrance of the Municipal parking lot where the race will finish.

OFFICE OF THE TOWN ADMINISTRATOR

Phone (508) 430-7513

Fax (508) 432-5039

Christopher Clark, *Town Administrator*
Joseph Powers, *Assistant Town Administrator*

732 MAIN STREET, HARWICH, MA



MEMO

TO: Board of Selectmen

FROM: Joseph Powers, *Assistant Town Administrator*

RE: Utility Hearing May 30, 2019
NSTAR Electric dba Eversource Electric
22 Vacation Lane

DATE: May 30, 2019

A Utility Hearing was held on Thursday, May 30, 2019 at 11:00 am in Harwich Town Hall, at the request of NSTAR/Eversource for the purpose of the installation of approximately 40' (feet) conduit under town road and to locate poles, wires, cables and fixtures, including the necessary anchors, guys and other such sustaining and protecting fixtures to be owned and used in common by our petitioners along and across the following public way or ways.

Legal ads were published and notifications were given. There were no abutters present. There were no objections of the placement of the 40' (feet) conduit under town road.

There were no other questions, concerns or objections and the Hearing was adjourned at 11:03 AM. After careful review, I recommend that the Board approve Eversource Plan No. 2321662 Dated April 4, 2019.

MINUTES
Utility Hearing – Brewster/Chatham Road
Thursday, May 30, 2019

THOSE IN ATTENDANCE: Joseph Powers, Assistant Town Administrator, Patti Macura, Administrative Secretary, Marian Skowronski, owner 22 Vacation Lane, Representatives from Eversource; Jessica Elder and Ted Hooker-Humphries. There were no abutters.

The Assistant Town Administrator called the hearing to order at 11:00 A.M. and read the Utility Hearing Notice.

Jessica Elder confirmed the work to be performed. Ms. Marian Skowronski, owner of 22 Vacation Lane, Harwich had no objections to the installation of approximately 40' (feet) conduit under town road and to locate poles, wires, cables and fixtures, including the necessary anchors, guys and other such sustaining and protecting fixtures to be owned and used in common by our petitioners along and across the following public way or ways.

The hearing was adjourned at 11: 03 A.M.

Submitted by:
Patricia Macura
Administrative Secretary

Attachments

April 19, 2019

Town Administrators
732 Main Street
Harwich, MA 02653

Dear Board Members:

Enclosed is a petition to install approximately 40 +/- feet of conduit/cable under the public road in Vacation Lane, Harwich.

This proposed location is necessary to provide electrical service to customer at 22 Vacation Lane. This petition will require a notice to abutters and a hearing.

Will you please present this petition before the Board for customary action and approval?

If you have any questions, feel free to contact me at 508-790-9022 or the email address provided below.

Warm Regards,



Jessica Elder
Right of Way Agent
Jessica.Elder@Eversource.com
NSTAR Electric
d/b/a Eversource Energy

Please return 1 signed copy to: **Eversource-484 Willow Street-W. Yarmouth, MA 02673 Attn Jessica Elder**

**PETITION FOR
UNDERGROUND CABLE AND CONDUIT LOCATIONS**

WO#2321662

Barnstable, Massachusetts

April 19, 2019

To the Board of Selectmen for the Town of Harwich, Massachusetts.

NSTAR ELECTRIC COMPANY d/b/a EVERSOURCE ENERGY

request permission to locate underground cables, conduits and manholes, including the necessary sustaining and protecting fixtures, in, under, along and across the following public way or ways:

22 Vacation Lane, Harwich

To install approximately 40' of conduit and cable under town road.

Wherefore it prays that after due notice and hearing as provided by law, it be granted a location for and permission to install and maintain underground cables, conduits, and manholes, together with such sustaining and protecting fixtures as it may find necessary, said underground cables, conduits, and manholes to be installed in accordance with the plan files herewith marked Plan No. 2321662 Dated April 6, 2019.

NSTAR ELECTRIC COMPANY d/b/a EVERSOURCE ENERGY

By



**Right of Way Agent
Jessica S. Elder**

TOWN OF HARWICH
NOTICE OF PUBLIC HEARING
May 30, 2019

Pursuant to M.G.L. Ch. 166, § 22, the Town Administrator will hold a Public Hearing at **11:00 AM on Thursday, May 30, 2019** in the Harwich Town Hall Library, 732 Main Street, Harwich, MA in reference to the following matter:

A petition by NSTAR ELECTRIC dba EVERSOURCE ELECTRIC COMPANY requesting permission to locate poles, wires, cables and fixtures, including the necessary anchors, guys and other such sustaining and protecting fixtures to be owned and used in common by our petitioners along and across the following public way or ways:

22 VACATION LANE, HARWICH

PROPOSED: Installing approximately 40' (feet) conduit under town road to provide service to customer at 22 Vacation Lane.

All abutters and other interested persons are invited to attend. For further information, please call the Town Administrator's Office at (508) 430-7513 or stop by Town Hall, 732 Main Street, Harwich where the information is on file.

Christopher Clark
Town Administrator

Cape Cod Chronicle
May 9, 2019

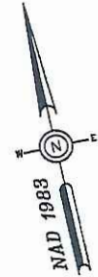
Plan to accompany petition of EVERSOURCE ENERGY
 To install approximately 40'± of conduit in public road from 270/4
 to provide electric service for customer at 22 VACATION LN.

#20

72-L274-0
 #20 VACATION LN
 N/F
 SCOPPA JOSEPHINE
 H ET ALS
 SUPINO YVONNE

72-L275-0
 #22 VACATION LN
 N/F
 SKOWRONSKI RICHARD M &
 SKOWRONSKI MARIAN G

72-L276-0
 #26 VACATION LN
 N/F
 STEFKOVICH NICHOLAS
 TRS ET AL
 STEFKOVICH LISA TRS



270/H4B ⊕

EDGE OF PAVEMENT

EDGE OF PAVEMENT

1-3" SHED 80 CONDUIT
 LF=40'±

EDGE OF PAVEMENT

EDGE OF PAVEMENT

LEGEND

- ⊕ Proposed Hand Hole
- ⊗ Existing Hand Hole
- Proposed Conduit
- - Existing Conduit
- Proposed Pole
- Existing Pole
- Ⓜ Proposed Multitap
- Ⓢ Proposed Manhole

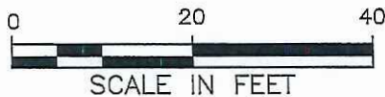
270/H4A ⊕ ● 270/4

VACATION LN

APPROX. 589'
 LAKESIDE TER. →

72-L294-0
 #27 VACATION LN
 N/F
 BROWN JO ANNE S TRS
 THE JO ANNE S BROWN TR
 OF 2004

#27



BY YOUR USE OF THE INFORMATION CONTAINED IN THIS MAP, YOU AGREE THAT NO WARRANTY OF ANY KIND, EXPRESS OR IMPLIED, IS GIVEN WITH RESPECT TO THE INFORMATION. NEITHER NSTAR ELECTRIC COMPANY, NSTAR GAS COMPANY NOR ITS PARENTS, AFFILIATES, OFFICERS, DIRECTORS, SHAREHOLDERS, EMPLOYEES OR AGENTS (COLLECTIVELY THE "NSTAR ENTITIES") SHALL BE LIABLE FOR ANY LOSS OR INJURY CAUSED IN WHOLE OR IN PART BY USE OF THIS INFORMATION OR IN RELIANCE UPON IT, TO THE MAXIMUM EXTENT ALLOWED BY LAW, YOU AGREE BY YOUR ACCEPTANCE OF THE INFORMATION TO RELEASE, INDEMNIFY AND HOLD THE NSTAR ENTITIES HARMLESS FROM ANY SUCH LOSS OR INJURY.

THE INFORMATION MAY NOT REPRESENT A SURVEY, MAY NOT BE THE MOST COMPLETE AND IS SUBJECT TO CHANGE WITHOUT NOTICE. NO LIABILITY IS ASSUMED FOR THE ACCURACY OF THE INFORMATION, EITHER EXPRESSED OR IMPLIED, UNAUTHORIZED ATTEMPTS TO MODIFY THE INFORMATION OR USE THE INFORMATION FOR OTHER THAN ITS INTENDED PURPOSES ARE PROHIBITED.

MASS. LAW

REQUIRES 72 HOURS ADVANCE NOTICE TO UTILITY COMPANIES
 BEFORE DIGGING BY ANYONE. CALL DIG-SAFE 1-888-344-7233

Plan #	2321662	NSTAR EVERSOURCE ELECTRIC d/b/a 1165 MASSACHUSETTS AVE. DORCHESTER, MASS. 02125
Ward #	-	
Work Order #	2321662	Plan of VACATION LANE, HARWICH
Surveyed by:	-	
Research by:	PG	
Plotted by:	GC	Showing PROPOSED CONDUIT LOCATION
Proposed Structures:	TL	
Approved:	A DEBENEDICTIS	Scale 1"=20' Date 04/06/2019
P#		SHEET 1 of 1

JG

**TOWN OF HARWICH
NOTICE OF PUBLIC HEARING
MAY 30, 2019**

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All abutters and other interested persons are invited to attend. For further information, please call the Town Administrator's Office at (508) 430-7513 or stop by Town Hall, 732 Main Street, Harwich where the information is on file.

The Christopher Clark
Town Administrator

The Cape Cod Chronicle
May 9, 2019



HARWICHPolice

DEPARTMENT

183 Sisson Road, Harwich, MA 02645

Tel 508-430-7541 Fax 508-432-2530



DAVID J. GUILLEMETTE

Chief of Police

KEVIN M. CONSIDINE

Deputy Chief

Memorandum

TO: Board of Selectmen

Christopher Clark
Town Administrator

FROM: David J. Guillemette
Chief of Police

A handwritten signature in blue ink, appearing to read "D. Guillemette", is written over the printed name of the Chief of Police.

DATE: May 28, 2019

SUBJECT: Application for an On-Premises Farmer Series Pouring Permit for Wine by First Crush Winery Cape Cod LLC. Frank Puzio Manager.

The Police Department has no objections regarding the Application for the above listed license application. A background investigation of the proposed individual(s) indicates no liquor code violations or disqualifying history.

If you have any questions or need further clarification, please feel free to contact me at your earliest convenience.

Patti Macura

From: Sandy Robinson
Sent: Tuesday, May 28, 2019 2:55 PM
To: Patti Macura
Subject: FW: Liquor License Application
Attachments: Liquor Lic memo re First Crush.pdf

*Sandra Robinson
Selectmen/Administrator's Office
Town of Harwich
srobinson@town.harwich.ma.us
(508) 430-7513 ext. 3320*

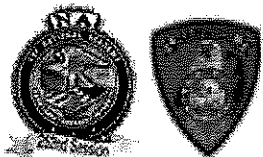
From: Chief David J. Guillemette
Sent: Tuesday, May 28, 2019 2:46 PM
To: Ann Steidel <asteidel@town.harwich.ma.us>; Sandy Robinson <srobinson@town.harwich.ma.us>
Subject: RE: Liquor License Application

Ann and Sandy,

Please see attached memo re the First Crush Winery application.

Thanks,

David J. Guillemette
Chief of Police



Harwich Police Department
183 Sisson Road
Harwich, MA 02645

Office: 508-430-7541

From: Ann Steidel
Sent: Saturday, May 18, 2019 3:13 PM
To: Chief David J. Guillemette <dguillemette@harwichpolice.com>
Cc: Sandy Robinson <srobinson@town.harwich.ma.us>
Subject: Liquor License Application
Importance: High

Chief,

Attached please find an application for an On-Premises Farmer Series Pouring Permit for Wine by First Crush Winery Cape Cod LLC. The applicant currently offers wine tastings but would like to be able to offer glasses of wine as well. The hearing will likely be held on June 3rd. Please let me know if you have any issues with the application.

*Ann Steidel
Support Staff Supervisor
Board of Selectmen/Town Administrator's Office
Town of Harwich
732 Main Street
Harwich, MA 02645
Phone 508-430-7513 x2
Fax 508-432-5039*

NOTICE OF PUBLIC HEARING
TOWN OF HARWICH
BOARD OF SELECTMEN
APPLICATION FOR LIQUOR LICENSE

Notice is hereby given under Chapter 138 of the General Laws as amended that application has been made to this Board for an Annual, On-Premises, Farmer Series Pouring Permit for Wines by First Crush Winery Cape Cod LLC on the following described premises located at 527 Main Street, Harwich, MA 02645, Frank Puzio, Manager:

First Crush Winery is all on one floor within two contiguous industrial buildings, consisting of three basic rooms or areas. We have two bathrooms, and one is handicap accessible. Our winery's tasting area is in a portion of our premises. The total winery area is 3,000 square feet. The current tasting area comprises approximately 600 square feet, outlined in yellow on enclosed floor plan diagram. A proposed tented outdoor tasting area would comprise approximately 480 square feet, also outlined in yellow on the enclosed diagram. Also enclosed is a photograph of our current indoor tasting area.*

*Please note that documents are available for viewing at the Board of Selectmen's Office at the address below.

The Board of Selectmen will hold a hearing upon the application on Monday, June 3, 2019, no earlier than 6:30 p.m. in the Donn B. Griffin Room at Town Hall, 732 Main Street, Harwich, at which time all interested parties will be heard.

Board of Selectmen
Local Licensing Authority

Cape Cod Times
May 23, 2019

Cape Cod Chronicle
May 23, 2019



*Commonwealth of Massachusetts
Department of the State Treasurer
Alcoholic Beverages Control Commission
239 Causeway Street
Boston, MA 02114*

Deborah B. Goldberg
Treasurer and Receiver General

Kim S. Gainsboro, Esq.
Chairman

**ALCOHOLIC BEVERAGES CONTROL COMMISSION (“ABCC”) ADVISORY
REGARDING EXTENSION OF FARMER-SERIES POURING PERMIT PREMISES AND
NEW § 19H POURING PERMIT**

On August 10, 2016, Governor Baker signed into law H4569, “An Act relative to job creation and workforce development.” This legislation makes several changes to the Farmer-Series pouring permits.

Farmer-Series Pouring Permit Updates

Farmer-series licensees may now obtain pouring permits issued under § 19B(n) (for farmer-wineries), § 19C(n) (for farmer-breweries), and § 19E(o) (for farmer-distilleries) that permit them to sell for consumption not only on their licensed premises, but also on the farmland or vineyard that operates appurtenant and contiguous, and in conjunction with, the licensed premises. This means that a farmer-winery, for example, may sell its own wine by the glass not only inside its licensed winery, but also on its adjacent vineyard property.

For farmer-series licensees that already have a pouring permit but would like to add their adjacent farmland or vineyards to their pouring permit, please complete an Alteration of Licensed Premises application and submit it to your Local Board.

For farmer-series licensees that do not currently have a pouring permit but would like to obtain one, please complete a Farmer Series Pouring Permit application and submit it to your Local Board.

The New “19H” Pouring Permit

The legislature also created a new type of farmer-series pouring permit under § 19H. Previously, a farmer-series licensee could only sell its own license’s products on its premises. This meant, for example, that if a licensee owned a farmer-winery and a farmer-brewery, it was limited to selling its wines on its farmer-winery’s premises, and could not sell its brewery’s products on the farmer-winery’s premises.

Now under § 19H, if a licensee owns more than one type of farmer-series license, it can apply for a § 19H pouring permit that will permit any and all alcohol produced by it (or for it and sold under its brand name) to be sold for on-premises consumption on any of its farmer-series premises and vineyards/farmlands, so long as the licensee’s vineyards/farmlands are operated as appurtenant and contiguous to each other. For example, if a licensee owns a § 19B farmer-winery and a § 19C farmer-brewery that are on vineyards/farms adjacent and contiguous to each other, it may obtain a § 19H pouring permit that allows it to sell its winery products on the brewery’s premises, and its brewery’s products on its winery’s premises.

In order to apply for a § 19H pouring permit a licensee must complete the Farmer Series Pouring Permit application. In Section 3(b) of the application, the licensee must check all types of farmer-series licenses for which it seeks to have a § 19H pouring permit. For example, if a licensee has a farmer-winery and a farmer-brewery and would like to sell its winery products on its brewery premises, the licensee must check the boxes for “Farmer Brewery” and “Farmer Winery,” but not the “Farmer Distillery” box. **Please be aware that if the farmer-series licenses are not on lands appurtenant and contiguous to each other the application for a § 19H pouring permit will be denied.**

As with all farmer-series pouring permits, these permits only permit the farmer-series licensees to sell their own products, or products produced for them and sold under their brand name. No other alcoholic beverages may be sold anywhere covered under the pouring permit.

Finally, please be aware that nothing has changed about the prohibition against a licensee owning both a § 12 license and any farmer-series license issued under § 19B, §19C, and § 19E.

As a reminder, all licensees must ensure that they are in compliance with the Laws of the Commonwealth of Massachusetts and that sale of alcoholic beverages take place only as authorized by applicable law.

(Issued August 11, 2016)

Ann Steidel

From: Brian Riley <BRiley@k-plaw.com>
Sent: Tuesday, May 14, 2019 3:06 PM
To: Ann Steidel
Cc: John Giorgio
Subject: RE: Request for Pouring License
Attachments: 2960_001.pdf; ABCC retail application.pdf

Hi, Ann, following up on this. As you know, a farmer-winery license is only issued by the ABCC and the Town does not have a role in it. A few years ago, however, the General Court added the following paragraph to G.L. c.138, §19B:

(n) Notwithstanding section 17, a local licensing authority, subject to the approval of the commission, may grant a license to sell wine for consumption on the premises of a location that it deems reasonable and proper, and approves in writing, on the grounds of a farmer-winery licensed under this section and on the grounds of the vineyards operated as appurtenant and contiguous to, and in conjunction with, the farmer-winery; provided, however, that a licensee may sell, for on-premises consumption only, wines produced by the winery or produced for the winery and sold under the winery brand name. Section 15A shall apply to the granting of a license under this subsection.

This is essentially like a §12 pouring license, except it does not count against the Town's quota for pouring licenses. As noted, §15A applies to this license – this is the section that details the procedures required for a new alcoholic beverages license application and hearing, notice to abutters, etc. If approved by the Board, the ABCC must also approve it.

I have attached a short advisory form the ABCC regarding farmer series licenses. I have also attached the ABCC's retail application form, which would be used for this pouring permit. If there are further questions, please let me know.

Brian

Brian W. Riley, Esq.
KP | LAW
101 Arch Street, 12th Floor
Boston, MA 02110
O: (617) 654 1722
F: (617) 654 1735
C: (617) 909 9084
briley@k-plaw.com
www.k-plaw.com

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From: Brian Riley
Sent: Monday, May 13, 2019 3:46 PM
To: Ann Steidel (asteidel@town.harwich.ma.us) <asteidel@town.harwich.ma.us>
Cc: John Giorgio <JGiorgio@k-plaw.com>
Subject: RE: Request for Pouring License

Hi, Ann – I may not have sent you a response to this one; I sent you an opinion at this same time on “Mobile Mixers,” the bar on wheels, but not a winery. Is this business a “farmer-winery” licensed by the state? I can send you a detailed response tomorrow, but in short, a farmer-winery may be licensed by the city or town to serve its own product on premises, and that is not related to the Town’s quota for restaurant licenses.

Brian W. Riley, Esq.
KP | LAW
101 Arch Street, 12th Floor
Boston, MA 02110
O: (617) 654 1722
F: (617) 654 1735
C: (617) 909 9084
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www.k-plaw.com

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From: Ann Steidel [<mailto:asteidel@town.harwich.ma.us>]
Sent: Monday, May 13, 2019 3:27 PM
To: John Giorgio <JGiorgio@k-plaw.com>
Subject: Re: Request for Pouring License

Hi John,
Can you please ask Brian Riley to send me his opinion on this. Not sure if I just can’t find it or I never received it. Thanks
Ann

From: John Giorgio <JGiorgio@k-plaw.com>
Sent: Thursday, January 24, 2019 11:48:57 AM
To: Ann Steidel
Cc: Christopher Clark; Sandy Robinson; Julie Kavanagh; Chief David J. Guillemette
Subject: RE: Request for Pouring License

Thanks Ann. I have asked Brian Riley to respond to your question.

John

John W. Giorgio, Esq.
KP | LAW
101 Arch Street, 12th Floor
Boston, MA 02110
O: (617) 556 0007
D: (617) 654 1705
F: (617) 654 1735
C: (617) 785 0725
jgiorgio@k-plaw.com
www.k-plaw.com

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From: Ann Steidel [<mailto:asteidel@town.harwich.ma.us>]

Sent: Thursday, January 24, 2019 11:46 AM

To: John Giorgio <JGiorgio@k-plaw.com>

Cc: Christopher Clark <cclark@town.harwich.ma.us>; Sandy Robinson <srobinson@town.harwich.ma.us>; Julie Kavanagh <jkavanagh@townofharwich.us>; Chief David J. Guillemette <dguillemette@harwichpolice.com>

Subject: FW: Request for Pouring License

John,

We have a winery in Town and the owner is seeking a pouring license for his patrons. This would be beyond tastings. He also has had requests for events to be held at his establishment. I have informed him that the Town only has quota for Common Victualler, Innholders, Club and Package Stores and that if he were to pour at the winery he would need to apply to the state. He has responded to me that he has checked with another MA town who said they needed to get both a state and town license. Can you provide guidance as to what is required for him to pour at his location?

Ann Steidel

Support Staff Supervisor

Board of Selectmen/Town Administrator's Office

Town of Harwich

732 Main Street

Harwich, MA 02645

Phone 508-430-7513 x2

Fax 508-432-5039

From: info@firstcrushwinery.com [<mailto:info@firstcrushwinery.com>]

Sent: Thursday, January 17, 2019 2:16 PM

To: Ann Steidel <asteidel@town.harwich.ma.us>

Subject: RE: Request for Pouring License

Ann,

One of our MA wineries gave me the procedure he had to follow. This is his reply to my question. I will contact ABCC and let you know when I hear from them,

Frank

Hi Frank, I had to apply for a pouring license which is both an application at ABCC level as well as a town liquor license. I would say the one thing you have to be careful of is that the fees for this can be a bit exorbitant, because a typical bar or restaurant with a similar license is going to do way more volume in pours than you will do in your tasting room. So the other wineries and brewers with tasting rooms in Ipswich had to fight for a lower yearly cost for the license, which had already been set around 800/yr. This ended up being reduced to 100/year and is based on expected volume of sales. Note I am differentiating between "tastings" which is already allowed by the state (5 oz, 5 samples) versus selling a glass of wine, which is what the pouring permit allows.

Frank Puzio, Winemaker ~ Founder

First Crush Winery ~ Cape Cod

Cape Cod's Premier Winery

Learn More... <https://vimeo.com/99639999>

The Olde Depot

527 Main Street, Harwich MA

Website: FirstCrushWinery.com

Email: info@FirstCrushWinery.com

Voice: 508-737-6867



----- Original Message -----

Subject: Request for Pouring License

From: "Ann Steidel" <asteidel@town.harwich.ma.us>

Date: 1/17/19 11:28 am

To: "info@firstcrushwinery.com" <info@firstcrushwinery.com>

Cc: "Sandy Robinson" <srobinson@town.harwich.ma.us>

Mr. Puzio,

I was notified that you are interested in applying for a pouring license. Can you please give me more information as to what you are looking to do?

The Town only has quota for Common Victualler (restaurant), Innholders, Club, and Package Stores. If this is to pour at the winery, I believe you would need to apply to the state but I'll wait to hear what your plans are.

Regards,

Ann Steidel

Support Staff Supervisor

Board of Selectmen/Town Administrator's Office

Town of Harwich

732 Main Street

Harwich, MA 02645

Phone 508-430-7513 x2

Fax 508-432-5039



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

RETAIL ALCOHOLIC BEVERAGES LICENSE APPLICATION
 MONETARY TRANSMITTAL FORM

APPLICATION FOR A NEW LICENSE

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

ECRT CODE: RETA

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

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

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

ENTITY/ LICENSEE NAME

ADDRESS

CITY/TOWN

STATE

ZIP CODE

For the following transactions (Check all that apply):

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

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

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



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

APPLICATION FOR A NEW LICENSE

Municipality

1. LICENSE CLASSIFICATION INFORMATION

ON/OFF-PREMISES	TYPE	CATEGORY	CLASS
<input type="text" value="On-Premises-12"/>	<input type="text" value="Farmer Series Pouring Permit"/>	<input type="text" value="Wines"/>	<input type="text" value="Annual"/>

Please provide a narrative overview of the transaction(s) being applied for. On-premises applicants should also provide a description of the intended theme or concept of the business operation. Attach additional pages, if necessary.

We have been a commercial winery since 3/2012. We would like to offer another level of service to our customers. We have a lot of repeat customers who have tasted and enjoyed our wines and would like to just enjoy a glass of their favorite wine instead of doing a tasting. It is also a way to increase our revenue. All of our pourers will be Tips certified.

Is this license application pursuant to special legislation? Yes No Chapter Acts of

2. BUSINESS ENTITY INFORMATION

The entity that will be issued the license and have operational control of the premises.

Entity Name FEIN

DBA Manager of Record

Street Address

Phone Email

Alternative Phone Website

3. DESCRIPTION OF PREMISES

Please provide a complete description of the premises to be licensed, 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. You must also submit a floor plan.

First Crush Winery is all on one floor within two contiguous industrial buildings, consisting of three basic rooms or areas. We have two bathrooms, and one is handicap accessible. Our winery's tasting area is in a portion of our premises. The total winery area is 3000 square feet. The current tasting area comprises approximately 600 square feet, outlined in yellow on enclosed floor plan diagram. A proposed tented outdoor tasting area would comprise approximately 480 square feet, also outlined in yellow on the enclosed diagram. Also enclosed is a photograph of our current indoor tasting area.

Total Square Footage: Number of Entrances: Seating Capacity:

Number of Floors: Number of Exits: Occupancy Number:

4. APPLICATION CONTACT

The application contact is the person whom the licensing authorities should contact regarding this application.

Name: Phone:

Title: Email:

APPLICATION FOR A NEW LICENSE

5. CORPORATE STRUCTURE

Entity Legal Structure	<input type="text" value="LLC"/>	Date of Incorporation	<input type="text" value="01/27/2012"/>
State of Incorporation	<input type="text" value="Massachusetts"/>	Is the Corporation publicly traded? <input type="radio"/> Yes <input checked="" type="radio"/> No	

6. PROPOSED OFFICERS, STOCK OR OWNERSHIP INTEREST

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

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

Name of Principal	Residential Address	SSN	DOB
<input type="text" value="Frank D. Puzio"/>	<input type="text" value="83 Thacher Shore Road Yarmouth Port, MA 0267"/>	<input type="text" value="REDACTED"/>	<input type="text" value="07/16/1948"/>

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
<input type="text" value="Manager"/>	<input type="text" value="50"/>	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<input type="text" value="Diane M. Puzio"/>	<input type="text" value="83 Thacher Shore Road"/>	<input type="text" value="REDACTED"/>	<input type="text" value="09/21/1954"/>

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
<input type="text" value="Member"/>	<input type="text" value="50"/>	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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

Name of Principal	Residential Address	SSN	DOB
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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

Name of Principal	Residential Address	SSN	DOB
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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

Additional pages attached? Yes No

CRIMINAL HISTORY

Has any individual listed in question 6, and applicable attachments, ever been convicted of a State, Federal or Military Crime? If yes, attach an affidavit providing the details of any and all convictions. Yes No

MANAGEMENT AGREEMENT

Are you requesting approval to utilize a management company through a management agreement? Please provide a copy of the management agreement. Yes No

APPLICATION FOR A NEW LICENSE

6A. INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Does any individual or entity identified in question 6, and applicable attachments, have any direct or indirect, beneficial or financial interest in any other license to sell alcoholic beverages? Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality

6B. PREVIOUSLY HELD INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Has any individual or entity identified in question 6, and applicable attachments, ever held a direct or indirect, beneficial or financial interest in a license to sell alcoholic beverages, which is not presently held? Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality

6C. DISCLOSURE OF LICENSE DISCIPLINARY ACTION

Have any of the disclosed licenses listed in question 6A or 6B ever been suspended, revoked or cancelled? Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

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

7. OCCUPANCY OF PREMISES

Please complete all fields in this section. Please provide proof of legal occupancy of the premises.

- If the applicant entity owns the premises, a deed is required.
- 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.
- If the real estate and business are owned by the same individuals listed in question 6, either individually or through separate business entities, a signed copy of a lease between the two entities is required.

Please indicate by what means the applicant will occupy the premises

Own

Landlord Name

Landlord Phone

Landlord Email

Landlord Address

Lease Beginning Date

Rent per Month

Lease Ending Date

Rent per Year

Will the Landlord receive revenue based on percentage of alcohol sales?

Yes No

APPLICATION FOR A NEW LICENSE

8. FINANCIAL DISCLOSURE

A. Purchase Price for Real Estate	NA
B. Purchase Price for Business Assets	NA
C. Other * (Please specify below)	NA
D. Total Cost	NA

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

SOURCE OF CASH CONTRIBUTION

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

Name of Contributor	Amount of Contribution
Total:	

SOURCE OF FINANCING

Please provide signed financing documentation.

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

FINANCIAL INFORMATION

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

We have been a commercial winery since 3/2012. Our buildings and equipment are paid for in full. Our tasting room furniture is already in place. No further expenses will be acquired. Adding this pouring permit allows us to offer another level of customer service.

9. PLEDGE INFORMATION

Please provide signed pledge documentation.

Are you seeking approval for a pledge? Yes No

Please indicate what you are seeking to pledge (check all that apply) License Stock Inventory

To whom is the pledge being made?

10. MANAGER APPLICATION

A. MANAGER INFORMATION

The individual that has been appointed to manage and control the licensed business and premises.

Proposed Manager Name Date of Birth SSN

Residential Address

Email Phone

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

B. CITIZENSHIP/BACKGROUND INFORMATION

Are you a U.S. Citizen? Yes No *Manager must be a U.S. Citizen
If yes, attach one of the following as proof of citizenship US Passport, Voter's Certificate, Birth Certificate or Naturalization Papers.
Have you ever been convicted of a state, federal, or military crime? Yes No
If yes, fill out the table below and attach an affidavit providing the details of any and all convictions. Attach additional pages, if necessary, utilizing the format below.

Date	Municipality	Charge	Disposition

C. EMPLOYMENT INFORMATION

Please provide your employment history. Attach additional pages, if necessary, utilizing the format below.

Start Date	End Date	Position	Employer	Supervisor Name
03/2012	Present	Managing Member	First Crush Winery Cape Cod LLC	NA
09/1974	08/2016	Optometrist	Self	NA

D. PRIOR DISCIPLINARY ACTION

Have you held a beneficial or financial interest in, or been the manager of, a license to sell alcoholic beverages that was subject to disciplinary action? Yes No If yes, please fill out the table. Attach additional pages, if necessary,utilizing the format below.

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

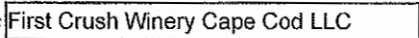
I hereby swear under the pains and penalties of perjury that the information I have provided in this application is true and accurate;

Manager's Signature Date

APPLICANT'S STATEMENT

I, 
Authorized Signatory

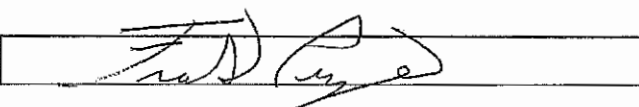
the: sole proprietor; partner; corporate principal; LLC/LLP manager

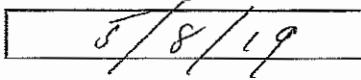
of 
Name of the Entity/Corporation

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

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

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

Signature: 

Date: 

Title: 

CORPORATE VOTE

The Board of Directors or LLC Managers of
Entity Name

duly voted to apply to the Licensing Authority of
City/Town and the

Commonwealth of Massachusetts Alcoholic Beverages Control Commission on
Date of Meeting

For the following transactions (Check all that apply):

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

"VOTED: To authorize
Name of Person

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

"VOTED: To appoint
Name of Liquor License Manager

as its manager of record, and hereby grant him or her with full authority and control of the premises described in the license and authority and control of the conduct of all business therein as the licensee itself could in any way have and exercise if it were a natural person residing in the Commonwealth of Massachusetts."

A true copy attest,

For Corporations ONLY
A true copy attest,


Corporate Officer /LLC Manager Signature

Corporation Clerk's Signature



Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street, First Floor
Boston, MA 02114

DEBORAH B. GOLDBERG
TREASURER AND RECEIVER GENERAL

CORI REQUEST FORM

JEAN M. LORIZIO, ESQ.
CHAIRMAN

The Alcoholic Beverages Control Commission ("ABCC") has been certified by the Criminal History Systems Board to access conviction and pending Criminal Offender Record Information ("CORI"). For the purpose of approving each shareholder, owner, licensee or applicant for an alcoholic beverages license, I understand that a criminal record check will be conducted on me, pursuant to the above. The information below is correct to the best of my knowledge.

ABCC LICENSE INFORMATION

ABCC NUMBER: <small>(IF EXISTING LICENSEE)</small>	FW-81	LICENSEE NAME:	First Crush Winery Cape Cod, LLC	CITY/TOWN:	Harwich
---	-------	----------------	----------------------------------	------------	---------

APPLICANT INFORMATION

LAST NAME:	Puzio	FIRST NAME:	Diane	MIDDLE NAME:	M
MAIDEN NAME OR ALIAS (IF APPLICABLE):	[REDACTED]	PLACE OF BIRTH:	Cleveland, Ohio		
DATE OF BIRTH:	[REDACTED]	SSN:	[REDACTED]	ID THEFT INDEX PIN (IF APPLICABLE):	
MOTHER'S MAIDEN NAME:	[REDACTED]	DRIVER'S LICENSE #:	[REDACTED]	STATE LIC. ISSUED:	Massachusetts
GENDER:	FEMALE	HEIGHT:	[REDACTED]	WEIGHT:	[REDACTED]
				EYE COLOR:	Brown
CURRENT ADDRESS:	83 Thacher Shore Road				
CITY/TOWN:	Yarmouth Port	STATE:	MA	ZIP:	02675
FORMER ADDRESS:					
CITY/TOWN:		STATE:		ZIP:	

PRINT AND SIGN

PRINTED NAME:	Diane M Puzio	APPLICANT/EMPLOYEE SIGNATURE:	<i>Diane M Puzio</i>
---------------	---------------	-------------------------------	----------------------

NOTARY INFORMATION

On this 5/11/19 before me, the undersigned notary public, personally appeared Diane M. Puzio
(name of document signer), proved to me through satisfactory evidence of identification, which were MALIC
to be the person whose name is signed on the preceding or attached document, and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose.

Carolyn Kriehn
NOTARY

Carolyn C Kriehn



DIVISION USE ONLY

REQUESTED BY:	[REDACTED]
	SIGNATURE OF CORI-AUTHORIZED EMPLOYEE

The DCII Identify Theft Index PIN Number is to be completed by those applicants that have been issued an Identify Theft PIN Number by the DCII. Certified agencies are required to provide all applicants the opportunity to include this information to ensure the accuracy of the CORI request process. ALL CORI request forms that include this field are required to be submitted to the DCII via mail or by fax to (617) 660-4614.



Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street, First Floor
Boston, MA 02114

DEBORAH B. GOLDBERG
TREASURER AND RECEIVER GENERAL

CORI REQUEST FORM

JEAN M. LORIZIO, ESQ.
CHAIRMAN

The Alcoholic Beverages Control Commission ("ABCC") has been certified by the Criminal History Systems Board to access conviction and pending Criminal Offender Record Information ("CORI"). For the purpose of approving each shareholder, owner, licensee or applicant for an alcoholic beverages license, I understand that a criminal record check will be conducted on me, pursuant to the above. The information below is correct to the best of my knowledge.

ABCC LICENSE INFORMATION

ABCC NUMBER: <small>(IF EXISTING LICENSEE)</small>	FW-81	LICENSEE NAME:	First Crush Winery Cape Cod LLC	CITY/TOWN:	Harwich
---	-------	----------------	---------------------------------	------------	---------

APPLICANT INFORMATION

LAST NAME:	Puzio	FIRST NAME:	Frank	MIDDLE NAME:	D
MAIDEN NAME OR ALIAS (IF APPLICABLE):		PLACE OF BIRTH:	Bronx, NY		
DATE OF BIRTH:	[REDACTED]	SSN:	[REDACTED]	ID THEFT INDEX PIN (IF APPLICABLE):	
MOTHER'S MAIDEN NAME:	[REDACTED]	DRIVER'S LICENSE #:	[REDACTED]	STATE LIC. ISSUED:	Massachusetts
GENDER:	MALE	HEIGHT:	[REDACTED]	WEIGHT:	[REDACTED]
				EYE COLOR:	Brown
CURRENT ADDRESS:	83 Thacher Shore Road				
CITY/TOWN:	Yarmouth Port	STATE:	MA	ZIP:	02675
FORMER ADDRESS:					
CITY/TOWN:		STATE:		ZIP:	

PRINT AND SIGN

PRINTED NAME:	Frank Puzio	APPLICANT/EMPLOYEE SIGNATURE:	
---------------	-------------	-------------------------------	--

NOTARY INFORMATION

On this 5/11/19 before me, the undersigned notary public, personally appeared Frank D. Puzio
(name of document signer), proved to me through satisfactory evidence of identification, which were MA LIC
to be the person whose name is signed on the preceding or attached document, and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose.

NOTARY
Carolyn Kriehn



DIVISION USE ONLY

REQUESTED BY:	
<small>SIGNATURE OF CORI-AUTHORIZED EMPLOYEE</small>	

The DCJI Identify Theft Index PIN Number is to be completed by those applicants that have been issued an Identity Theft PIN Number by the DCJI. Certified agencies are required to provide all applicants the opportunity to include this information to ensure the accuracy of the CORI request process. ALL CORI request forms that include this field are required to be submitted to the DCJI via mail or by fax to (617) 660-4614.

D

The Commonwealth of Massachusetts

William Francis Galvin

Secretary of the Commonwealth

One Ashburton Place, Room 1717, Boston, Massachusetts 02108-1512

**Limited Liability Company
Certificate of Organization
(General Laws Chapter 156C, Section 12)**

Federal Identification No.: _____

- (1) The exact name of the limited liability company:

First Crush Winery~Cape Cod, LLC

- (2) The street address of the office in the commonwealth at which its records will be maintained:

83 Thatcher Shore Road, Yarmouthport, MA 02675-1127

- (3) The general character of the business:

To operate a winery for sale of wine and other goods.

- (4) Latest date of dissolution, if specified: None, at this time.

- (5) The name and street address, of the resident agent in the commonwealth:

NAME

ADDRESS

Frank D. Puzio

83 Thatcher Shore Road, Yarmouthport, MA
02675-1127

- (6) The name and business address, if different from office location, of each manager, if any:

NAME

ADDRESS

FILED
JAN 27 2012
SECRETARY OF THE COMMONWEALTH
CORPORATIONS DIVISION

As/KC
3

- (7) The name and business address, if different from office location, of each person in addition to manager(s) authorized to execute documents filed with the Corporations Division, and at least one person shall be named if there are no managers:

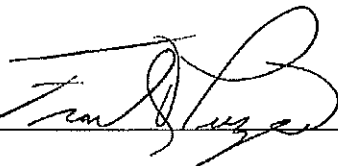
NAME	ADDRESS
Frank D. Puzio	83 Thatcher Shore Road, Yarmouthport, MA 02675-1127
Diane Puzio	83 Thatcher Shore Road, Yarmouthport, MA 02675-1127
John A. Grant, Attorney at Law	161 Main Street, Yarmouthport, MA 02675-1713

- (8) The name and business address, if different from office location, of each person authorized to execute, acknowledge, deliver and record any recordable instrument purporting to affect an interest in real property recorded with a registry of deeds or district office of the land court:

NAME	ADDRESS
------	---------

- (9) Additional matters:

Signed by (by at least one authorized signatory):

 1/12/12

Consent of resident agent:

I Frank D. Puzio,
resident agent of the above limited liability company, consent to my appointment as resident agent pursuant to G.L. c 156C § 12*

*or attach resident agent's consent hereto.

SECRETARY OF THE COMMONWEALTH OF MASSACHUSETTS

1053

2012 JAN 27 PM 2:01
One Ashburton Place, Boston, Massachusetts 02108-1512

CORPORATIONS DIVISION
Limited Liability Company Certificate
(General Laws Chapter 156C, Section 12)

I hereby certify that upon examination of this limited liability company certificate, duly submitted to me, it appears that the provisions of the General Laws relative thereto have been complied with, and I hereby approve said application; and the filing fee in the amount of \$500 having been paid, said application is deemed to have been filed with me this 27th day of January, 2012, at 2:01 p.m.

1163289

Effective date: _____

William Francis Galvin
WILLIAM FRANCIS GALVIN
Secretary of the Commonwealth

FILED
JAN 27 2012
SECRETARY OF THE COMMONWEALTH
CORPORATIONS DIVISION

Filing fee: \$500

TO BE FILLED IN BY LIMITED LIABILITY COMPANY
Contact Information:

Frank D. Puzio

First Crush Winery~Cape Cod, LLC

83 Thatcher Shore Road, Yarmouthport, MA 02675-1127

Telephone: 508-362-2423

Email: drfpuzio@gmail.com

Upon filing, a copy of this filing will be available at www.sec.state.ma.us/cor.
If the document is rejected, a copy of the rejection sheet and rejected document will be available in the rejected queue.

MASSACHUSETTS STATE EXCISE TAX
BARNSTABLE COUNTY REGISTRY OF DEEDS
Date: 04-02-2012 @ 03:48pm
Ct1#: 1574 Doc#: 18006
Fee: \$1,385.10 Cons: \$405,000.00

CONDOMINIUM DEED

SCHOOLHOUSE LIMITED PARTNERSHIP, a Massachusetts Limited Partnership, with an address of P.O. Box 1577, Harwich MA 02645, for consideration paid and in full consideration of FOUR HUNDRED FIVE THOUSAND (\$405,000.00) DOLLARS

GRANTS to Frank D. Puzio and Diane M. Puzio, Husband and Wife as Tenants by the Entirety, of 83 Thatcher Shore Road, Yarmouthport, MA 02675

BARNSTABLE COUNTY EXCISE TAX
BARNSTABLE COUNTY REGISTRY OF DEEDS
Date: 04-02-2012 @ 03:48pm
Ct1#: 1574 Doc#: 18006
Fee: \$1,093.50 Cons: \$405,000.00

with **QUITCLAIM COVENANTS**,

the following described Units in the Condominium known as **OLDE DEPOT INDUSTRIAL CONDOMINIUM**, created by Master Deed, dated July 31, 2009, recorded August 13, 2009, in the Barnstable County Registry of Deeds, Book 23962, Page 241, as it may be or has been lawfully amended under the provisions of General Laws Chapter 183A, being located in Harwich, Barnstable County, Massachusetts:

Condominium Unit Nos. 17 and 18 in Building C at 527 Main Street, Harwich, Massachusetts.

Reference is made to the Site Plan recorded in Barnstable Registry of Deeds, Plan Book 631, Page 55, and to the floor plans recorded herewith in Plan Book 643, Page 100 for a more detailed description of the Units.

Said Units are conveyed together with the exclusive right and easement to use, subject to and in accordance with the provisions of the Master Deed, one parking space which is adjacent to each of the units conveyed herein.

Together with the undivided interest in the common areas and facilities of the Condominium, for Unit 17 and Unit 18, all as set forth in the Master Deed, as it may be or has been lawfully amended under the provisions of General Laws Chapter 183A. The interests in the common areas and facilities is subject to change in the event the Master Deed is amended by the addition of subsequent phases of the Condominium, all as provided in the Master Deed.

Together with the benefit of and subject to restrictions upon and conditions, rights and obligations of a Unit Owner as set forth in said Master Deed and the provisions of the By-Laws of **OLDE DEPOT CONDOMINIUM TRUST**, an organization formed in accordance with Section 10 of Chapter 183A under a Declaration of Trust dated July 31, 2009, and recorded in the Barnstable County Registry of Deeds in Book 23962, Page 260, and as it may be or has been lawfully amended.

The Units are conveyed together with the benefit of and subject to all other rights, easements,

privileges, restrictions and reservations of record, insofar as the same may now be in force and applicable.

The post office address of the condominium is P. O. Box 1577, Harwich MA 02645.

The Units are conveyed subject to the provisions of Massachusetts General Laws Chapter I83A.

For title reference see deed from Dye Properties Limited Liability Company dated February 18, 2008, and recorded with the Barnstable Registry of Deeds in Book 22690, Page 101; see also Master Deed recorded in Book 23962 Page 241, as amended by First Amendment recorded in Book 24420, Page 272, and Second Amendment recorded herewith.

PROPERTY ADDRESS: 527 Main Street, Harwich MA 02645

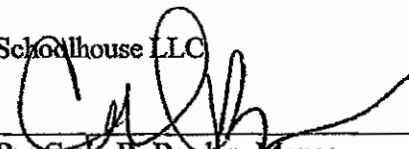
In Witness Whereof, Craig R. Borden and Craig R. Borden and Terrie Borden, Managers of Schoolhouse, LLC, as General Partners of Schoolhouse Limited Partnership, hereunto set their hands and seals this 2nd day of April, 2012.

Schoolhouse Limited Partnership
By its General Partners

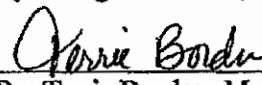


Craig R. Borden

Schoolhouse LLC



By: Craig R. Borden, Manager

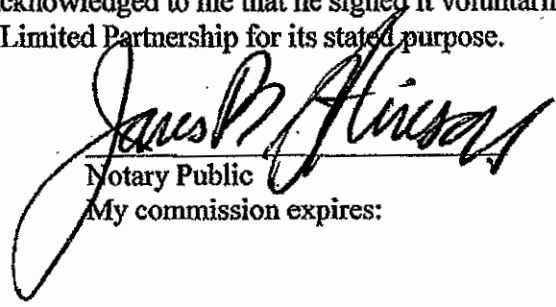


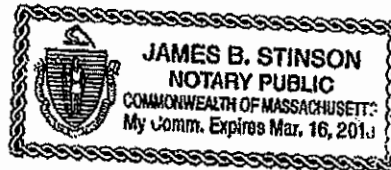
By: Terrie Borden, Manager

COMMONWEALTH OF MASSACHUSETTS

Barnstable, ss

On this the 2ND day of APRIL, 2012, before me, the undersigned notary public, personally appeared CRAIG R. BORDEN, Manager of Schoolhouse LLC, as General Partner of Schoolhouse Limited Partnership, proved to me through satisfactory evidence of identification, which was current Mass. driver's license, to be the person whose name is signed on the preceding or attached document, and acknowledged to me that he signed it voluntarily and it is the free act and deed of the Schoolhouse Limited Partnership for its stated purpose.


Notary Public
My commission expires:





The Commonwealth of Massachusetts

Secretary of the Commonwealth

State House, Boston, Massachusetts 02133

William Francis Galvin
Secretary of the
Commonwealth

March 29, 2012

TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of a Limited Liability Company was filed in this office by

SCHOOLHOUSE, LLC

in accordance with the provisions of Massachusetts General Laws Chapter 156C on November 20, 2001.

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation or withdrawal; and that said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are: **CRAIG R. BORDEN, TERRIE BORDEN**

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: **CRAIG R. BORDEN, TERRIE BORDEN**

The names of all persons authorized to act with respect to real property listed in the most recent filing are: **CRAIG R. BORDEN, TERRIE BORDEN**

In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth



Processed By: jbm



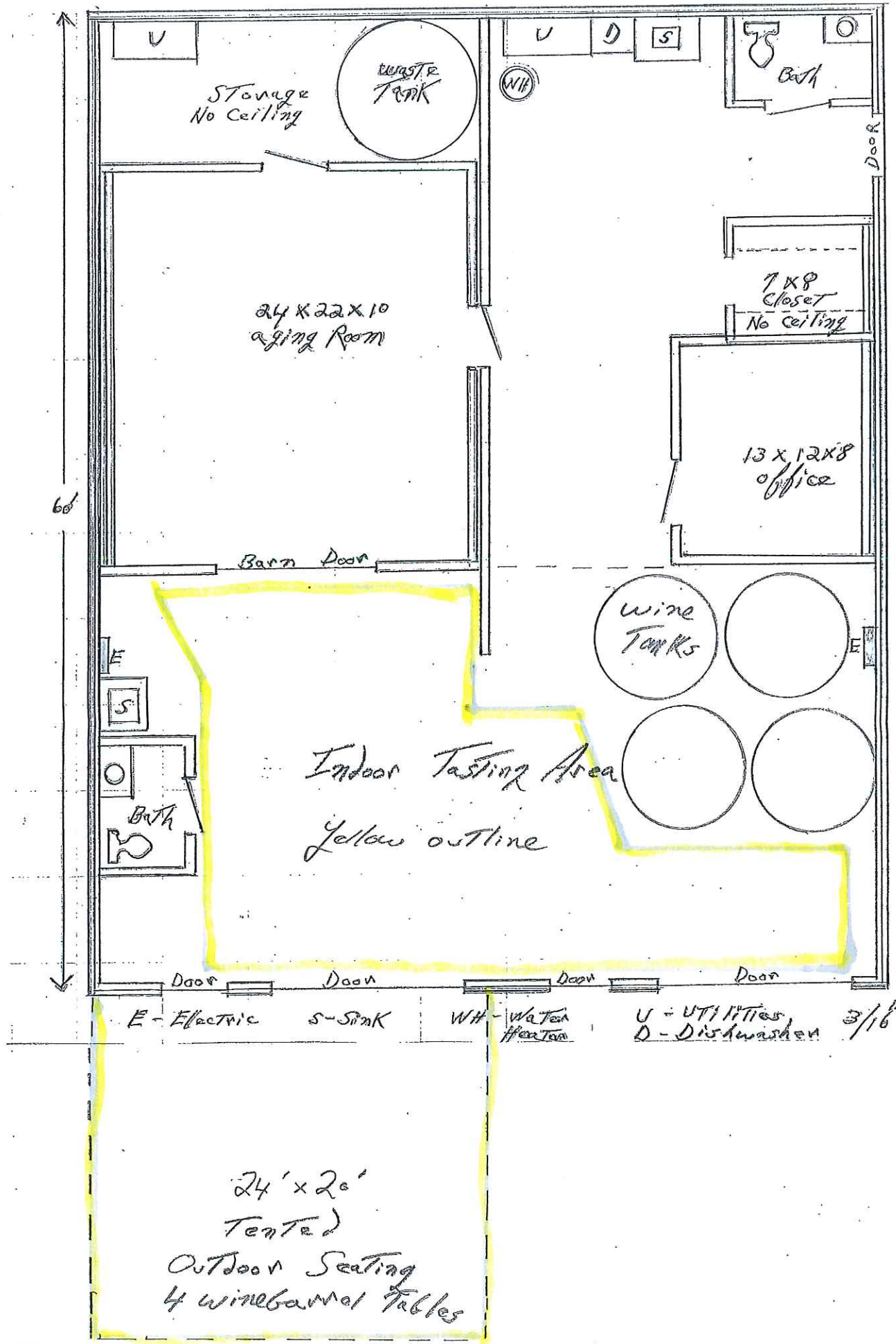
NEW LICENSE

To apply for an alcoholic beverages retail license, you will need the following:

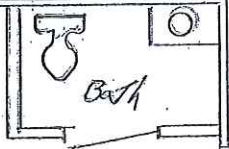
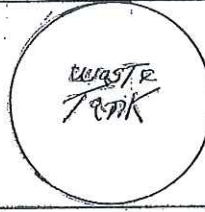
- **New Retail Application**
- **Business Structure Documents**
 - If Sole Proprietor, **Business Certificate**
 - If partnership, **Partnership Agreement**
 - If corporation or LLC, **Articles of Organization** from the Secretary of the Commonwealth
- **CORI Authorization Form** Complete one for each individual with financial or beneficial interest in the entity that is applying AND one for the proposed manager of record. *This form must be notarized with a stamp or raised seal.*
- **Manager Application**
- **Proof of Citizenship** for the proposed Manager of Record.
- **Vote of the Corporate Board**
- **Supporting Financial Records** for all financing and or loans, including pledge documents, if applicable.
- **Legal Right to Occupy**, a lease or deed.
- **Floor Plan**
- **Abutter's Notification**
- **Advertisement**
- **Monetary Transmittal Form**
- **\$200 Fee** paid online through our online payment portal, ePay
- **Payment Receipt**
- **Additional information, if necessary, utilizing the formats provided and or any affidavits.**
- **Management Agreement**, if applicable

Please Note: you may be requested to submit additional supporting documentation if necessary.



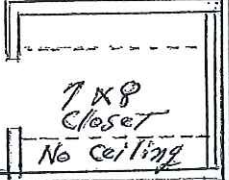


Storage
No Ceiling



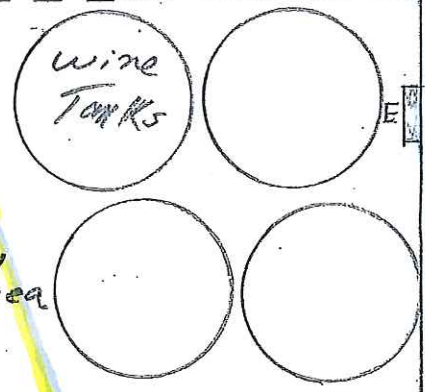
Door

24 X 22 X 10
aging Room

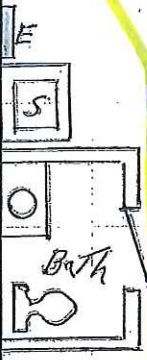


60'

Barn Door



Indoor Tasting Area
Yellow outline



Door Door Door Door
E - Electric S - Sink WH - Water Heater U - Utilities D - Dishwasher 3/16

24' x 20'
Tented
Outdoor Seating
4 winebarrel Tables



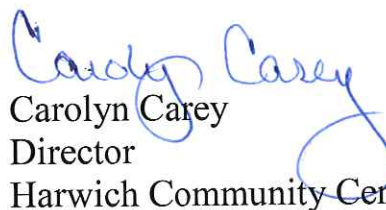
May 23, 2019

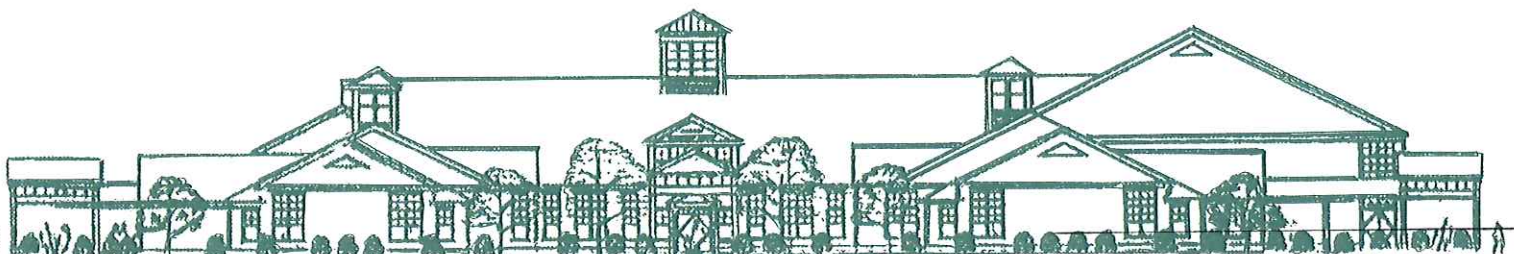
Dear Selectmen,

After careful review of the building and room rentals in the Harwich Community Center, I have determined that there is only one group that remains in the building after 9:00 pm. Additionally, I have studied the door count software data and the numbers confirm that there is little to no foot traffic after 9:00pm. With this in mind it is my recommendation that the building close at 9:00pm rather than 10:00 pm, Monday through Friday. This change is a fiscally responsible response to the current scheduling needs of our renters and the Community we serve. An accommodation for the one group currently in the building until 9:30pm will be made by closing the building at 9:00pm, but allowing them to depart at 9:30pm. I have spoken with Sean Libby and he is able to facilitate this change in the building's hours within his staffing schedule

Thank you for your consideration of this matter. I welcome any questions or comments.

Sincerely,


Carolyn Carey
Director
Harwich Community Center



2019

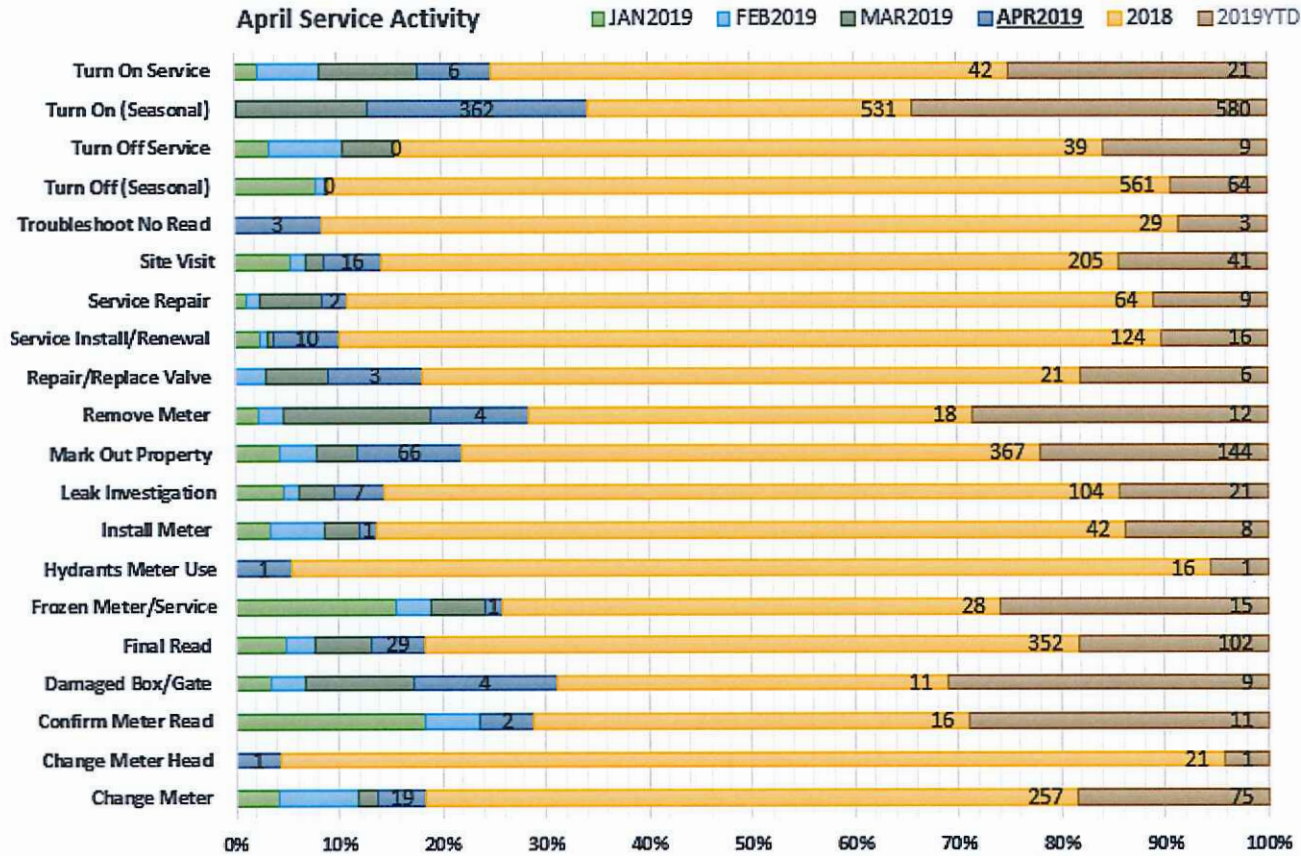
JANUARY							FEBRUARY							MARCH						
S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S
		1	2	3	4	5						1	2						1	2
6	7	8	9	10	11	12	3	4	5	6	7	8	9	3	4	5	6	7	8	9
13	14	15	16	17	18	19	10	11	12	13	14	15	16	10	11	12	13	14	15	16
20	21	22	23	24	25	26	17	18	19	20	21	22	23	17	18	19	20	21	22	23
27	28	29	30	31			24	25	26	27	28			^{24/31}	25	26	27	28	29	30
APRIL							MAY							JUNE						
S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S
	1	2	3	4	5	6				1	2	3	4							1
7	8	9	10	11	12	13	5	6	7	8	9	10	11	2	3	4	5	6	7	8
14	15	16	17	18	19	20	12	13	14	15	16	17	18	9	10	11	12	13	14	15
21	22	23	24	25	26	27	19	20	21	22	23	24	25	16	17	18	19	20	21	22
28	29	30					26	27	28	29	30	31		^{23/30}	24	25	26	27	28	29
JULY							AUGUST							SEPTEMBER						
S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S
	1	2	3	4	5	6					1	2	3	1	2	3	4	5	6	7
7	8	9	10	11	12	13	4	5	6	7	8	9	10	8	9	10	11	12	13	14
14	15	16	17	18	19	20	11	12	13	14	15	16	17	15	16	17	18	19	20	21
21	22	23	24	25	26	27	18	19	20	21	22	23	24	22	23	24	25	26	27	28
28	29	30	31				25	26	27	28	29	30	31	29	30					
OCTOBER							NOVEMBER							DECEMBER						
S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S
		1	2	3	4	5						1	2	1	2	3	4	5	6	7
6	7	8	9	10	11	12	3	4	5	6	7	8	9	8	9	10	11	12	13	14
13	14	15	16	17	18	19	10	11	12	13	14	15	16	15	16	17	18	19	20	21
20	21	22	23	24	25	26	17	18	19	20	21	22	23	22	23	24	25	26	27	28
27	28	29	30	31			24	25	26	27	28	29	30	29	30	31				

● yellow — No meeting

● pink — Holidays

● green — Non-Resident Taxpayers Mtg

April Service Activity

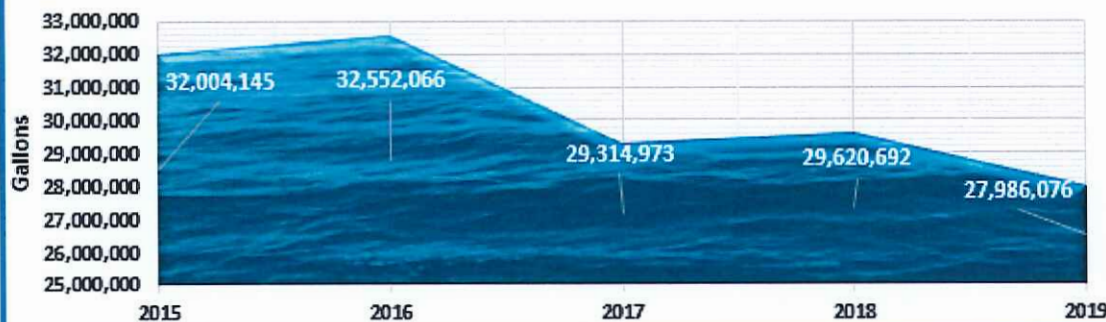


Water Samples Taken
55

Monthly Change in Pumping
16.80%

YTD Change 2018 vs. 2019
-7.60%

April Pumping



Calendar Highlights for April

- Hydrant Flushing 4/1-4/30
- Annual Water Quality Report
- BOWC member Wastewater Tour
- Wastewater/customer Appts. (2)
- Meter reading for 3rd Qtr Billing
- Paving Project - Main and NW Gate
- BOWC Meetings 4/9, 4/26
- Lothrop Project Pre-Bid/Bid Opening
- Voter Information Meeting
- Nat'l Grid Meeting

Inches of Rainfall - April Comparison

