

TOWN OF FALMOUTH, MAINE 2008
APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE



Business or Trade Name: European Bakery Inc.

Business Address: 395 US Rte 1

Name of Owner of Business: Helen + Emil Budri

Address of Owner of Business: 11 Country Lane

Manager at Establishment: Emil Manager's Phone: 233 6619

Contact Person: Emil Phone # (207) 781 3541

Business Phone: 781-3541

Check the proper category for the license requested:

- (a) Restaurant or victualer NOT serving malt beverages on the premises and seating capacity of less than 50. \$25.00 _____
- (b) Same as (a) except where the total seating capacity is more than 50. \$50.00 _____
- (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. \$25.00 _____
- (d) Same as (c) except where the total seating capacity is more than 50. \$50.00 _____
- (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. \$50.00 _____
- ☒ (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. \$25.00 25.-
- (g) Same as (f) except where the total area of the establishment is more than 10,000 square feet. \$50.00 _____
- (h) Establishments operated by non-profit organizations. \$25.00 _____
- (i) Vendor/Cart \$10.00 _____

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

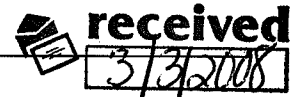
Brief Description of Business: Retail Bakery

Have you received State approval? ☒ Yes ☐ NO

Signature of Applicant: Ruth Kazantzides Date: 3/5/08

TOWN OF FALMOUTH, MAINE 2008
APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE

TOWN LANDING MARKET
200 FORESIDE ROAD
FALMOUTH, ME 04105



Business or Trade Name: _____

Business Address: _____

Name of Owner of Business: _____

Address of Owner of Business: _____

Manager at Establishment: _____

Manager's Phone: _____

Contact Person: _____

Phone # _____

Business Phone: _____

Check the proper category for the license requested:

- (a) Restaurant or victualer NOT serving malt beverages on the premises and seating capacity of less than 50. \$25.00 _____
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- (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. \$25.00 _____
- (d) Same as (c) except where the total seating capacity is more than 50. \$50.00 _____
- (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. \$50.00 _____
- (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. \$25.00 ☒ _____
- (g) Same as (f) except where the total area of the establishment is more than 10,000 square feet. \$50.00 _____
- (h) Establishments operated by non-profit organizations. \$25.00 _____
- (i) Vendor/Cart \$10.00 _____

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

Brief Description of Business: _____

Have you received State approval? ☒ Yes ☐ NO

Signature of Applicant: _____

Date: 29 Feb 08

TOWN OF FALMOUTH, MAINE 2008
APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE



received

3/3/08

Business or Trade Name: Portland Yacht Club

Business Address: 40 Old Powerhouse Road

Name of Owner of Business: Board of Directors / membership

Address of Owner of Business: SAME

Manager at Establishment: None Manager's Phone: _____

Contact Person: CAROL MCEWEN Phone # 781-9820

Business Phone: SAME

Check the proper category for the license requested:

- (a) Restaurant or victualer NOT serving malt beverages on the premises and seating capacity of less than 50. \$25.00 _____
- (b) Same as (a) except where the total seating capacity is more than 50. \$50.00 ✓
- (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. \$25.00 _____
- (d) Same as (c) except where the total seating capacity is more than 50. \$50.00 _____
- (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. \$50.00 _____
- (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. \$25.00 _____
- (g) Same as (f) except where the total area of the establishment is more than 10,000 square feet. \$50.00 _____
- (h) Establishments operated by non-profit organizations. \$25.00 _____
- (i) Vendor/Cart \$10.00 _____

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

Brief Description of Business: Private Yacht Club

Have you received State approval? _____ Yes _____ NO

Signature of Applicant: Carol McEwen Date: 2-28-08

TOWN OF FALMOUTH, MAINE 2008
APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE

Business or Trade Name: Bernie's ^{Q.S.} CAFE Place

Business Address: Parcel NO. 1, 65 GRAY RD.

Name of Owner of Business: Adam SHAPIRO

Address of Owner of Business: 7 Knight Hill Rd. Falmouth, ME

Manager at Establishment: Adam SHAPIRO Manager's Phone: 415-6800

Contact Person: Adam Shapiro Phone # 415-6800

Business Phone: 415-6800

Check the proper category for the license requested:

- (a) Restaurant or victualer NOT serving malt beverages on the premises and seating capacity of less than 50. \$25.00 _____
- (b) Same as (a) except where the total seating capacity is more than 50. \$50.00 _____
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- (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. \$50.00 ✓
- (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. \$25.00 _____
- (g) Same as (f) except where the total area of the establishment is more than 10,000 square feet. \$50.00 _____
- (h) Establishments operated by non-profit organizations. \$25.00 _____
- (i) Vendor/Cart \$10.00 _____

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

Brief Description of Business: Restaurante & Banquet - serving lunch, Breakfast and possibly dinner.

Have you received State approval? Yes X NO

Signature of Applicant: [Signature] Date: 03/06/2008

**TOWN OF FALMOUTH, MAINE 2008
APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE**

Business or Trade Name: FALMOUTH EXXON

Business Address: 264 ROUTE 1

Name of Owner of Business: Webber Energy Gasoline

Address of Owner of Business: P.O. Box 929, 700 MAIN ST., BANGOR, ME 04402-0929

Manager at Establishment: D Ann Vosnius Manager's Phone: (207) 615-2444

Contact Person: Steve DONOVAN Phone #: (207) 852-0686

Business Phone: (207) 942-5501

Check the proper category for the license requested:

- | | |
|--|------------------|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 _____ |
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| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 _____ |
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| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 _____ |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 <u>✓</u> |
| (g) Same as (f) except where the total area of the establishment is more than 10,000 square feet. | \$50.00 _____ |
| (h) Establishments operated by non-profit organizations. | \$25.00 _____ |
| (i) Vendor/Cart | \$10.00 _____ |

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

Brief Description of Business: C-Store with Gasoline

Have you received State approval? ✓ Yes _____ NO _____

Signature of Applicant: Stephen G. Donovan Date: 3/11/08

TOWN OF FALMOUTH, MAINE 2008
APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE

Business or Trade Name: RALPH D CALDWELL FALMOUTH MAINE POST 164

Business Address: 65 DEPOT ROAD FALMOUTH

Name of Owner of Business: _____

Address of Owner of Business: _____

Manager at Establishment: _____ Manager's Phone: _____

Contact Person: FRANK DUSRY Phone # 207 781 4709

Business Phone: _____

Check the proper category for the license requested:

- (a) Restaurant or victualer NOT serving malt beverages on the premises and seating capacity of less than 50. \$25.00 _____
- (b) Same as (a) except where the total seating capacity is more than 50. \$50.00 _____
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- (g) Same as (f) except where the total area of the establishment is more than 10,000 square feet. \$50.00 _____
- (h) Establishments operated by non-profit organizations. \$25.00 X
- (i) Vendor/Cart \$10.00 _____

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

Brief Description of Business: American Legion Post

Have you received State approval? _____ Yes _____ NO X

Signature of Applicant: Frank Dusry, Owner Date: 3/10/08

**TOWN OF FALMOUTH, MAINE 2008
APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE**

Business or Trade Name: Falmouth School Food Service

Business Address: 74 Woodville Rd., Falmouth, Maine 04105

Name of Owner of Business: Falmouth Public Schools

Address of Owner of Business: 52 Woodville Rd., Falmouth, Maine 04105

Manager at Establishment: _____ **Manager's Phone:** _____

Contact Person: Deborah Dolley **Phone #** 781-7429 ext. 700

Business Phone: same

Check the proper category for the license requested:

- (a) Restaurant or victualer NOT serving malt beverages on the premises and seating capacity of less than 50. \$25.00 _____
- (b) Same as (a) except where the total seating capacity is more than 50. \$50.00 _____
- (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. \$25.00 _____
- (d) Same as (c) except where the total seating capacity is more than 50. \$50.00 _____
- (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. \$50.00 _____
- (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. \$25.00 _____
- (g) Same as (f) except where the total area of the establishment is more than 10,000 square feet. \$50.00 _____
- (h) Establishments operated by non-profit organizations. \$25.00 x N/A
- (i) Vendor/Cart \$10.00 _____

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

Brief Description of Business: school lunch

Have you received State approval? x Yes _____ NO

Signature of Applicant: Deborah Dolley, Director **Date:** 3/7/08

TOWN OF FALMOUTH, MAINE 2008
APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE

Business or Trade Name: Family Ice Center
Business Address: P.O. Box 6127 20 Hat Trick Drive
Name of Owner of Business: _____
Address of Owner of Business: _____
Manager at Establishment: Kevin Sackville Manager's Phone: 781-4200
Contact Person: Luane Howard Phone # 781-4200
Business Phone: 781-4200

Check the proper category for the license requested:

- (a) Restaurant or victualer NOT serving malt beverages on the premises and seating capacity of less than 50. \$25.00 _____
- (b) Same as (a) except where the total seating capacity is more than 50. \$50.00 _____
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- (g) Same as (f) except where the total area of the establishment is more than 10,000 square feet. \$50.00 _____
- (h) Establishments operated by non-profit organizations. \$25.00 ✓
- (i) Vendor/Cart \$10.00 _____

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

Brief Description of Business: non profit ice arena

Have you received State approval? ✓ Yes _____ NO _____

Signature of Applicant: Luane Howard Date: 3/5/08

TOWN OF FALMOUTH, MAINE 2008
APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE

Business or Trade Name: The Fireside Tavern & side bar

Business Address: 270 US Rte #1 Falmouth ME 04105

Name of Owner of Business: Anne R. Verrill & Peter J. Verrill, Jr.

Address of Owner of Business: 158 Woodville Rd. Falmouth, ME 04105

Manager at Establishment: Kate Tozier Manager's Phone: 781-4255

Contact Person: Anne Verrill Phone # 781-4255

Business Phone: 781-4255

Check the proper category for the license requested:

- | | |
|--|------------------|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 _____ |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 _____ |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 <u>✓</u> |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 _____ |
| (g) Same as (f) except where the total area of the establishment is more than 10,000 square feet. | \$50.00 _____ |
| (h) Establishments operated by non-profit organizations. | \$25.00 _____ |
| (i) Vendor/Cart | \$10.00 _____ |

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

Brief Description of Business: Restaurant

Have you received State approval? ✓ Yes _____ NO _____

Signature of Applicant: Anne Verrill Date: 3/10/08

TOWN OF FALMOUTH, MAINE 2008
APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE

Business or Trade Name: Handy Boat Service, Inc.
Business Address: 215 Foreside Rd., Falmouth ME 04105
Name of Owner of Business: Merle Hallett
Address of Owner of Business: same
Manager at Establishment: Jay Hallett Manager's Phone: 781-5110
Contact Person: " Phone # "
Business Phone: 781-5110

Check the proper category for the license requested:

- (a) Restaurant or victualer NOT serving malt beverages on the premises and seating capacity of less than 50. \$25.00 ✓
- (b) Same as (a) except where the total seating capacity is more than 50. \$50.00 _____
- (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. \$25.00 _____
- (d) Same as (c) except where the total seating capacity is more than 50. \$50.00 _____
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- (g) Same as (f) except where the total area of the establishment is more than 10,000 square feet. \$50.00 _____
- (h) Establishments operated by non-profit organizations. \$25.00 _____
- (i) Vendor/Cart \$10.00 _____

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

Brief Description of Business: Seasonal Dock Store

Have you received State approval? Yes NO

Signature of Applicant: [Signature] Date: 3/14/08

**TOWN OF FALMOUTH, MAINE 2008
APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE**

Business or Trade Name: HANNA FORD Food & Drug #222

Business Address: 65 GRAY ROAD

Name of Owner of Business: HANNA FORD Bros. Co.

Address of Owner of Business: P.O. Box 1000, ATTN: J. BOULET - 9805, PORTLAND, ME

Manager at Establishment: STRAT DEMAKIS Manager's Phone: 878-0500 04/10/08

Contact Person: JANE BOULET Phone # 885-3321

Business Phone: 885-3321

Check the proper category for the license requested:

- | | |
|--|------------------------|
| (a) Restaurant or victualer NOT serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 _____ |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 _____ |
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| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 _____ |
| (g) Same as (f) except where the total area of the establishment is more than 10,000 square feet. | \$50.00 <u>✓</u> _____ |
| (h) Establishments operated by non-profit organizations. | \$25.00 _____ |
| (i) Vendor/Cart | \$10.00 _____ |

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

Brief Description of Business: SUPERMARKET WITH PHARMACY

Have you received State approval? ✓ Yes _____ NO

Signature of Applicant: Judy Knapp Date: 3-11-08

TOWN OF FALMOUTH, MAINE 2008
APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE

Business or Trade Name: Holy MARTYRS CHURCH

Business Address: 266 FORESIDE ROAD,

Name of Owner of Business: ROMAN CATHOLIC BISHOP OF PORTLAND

Address of Owner of Business: 266 FORESIDE ROAD

Manager at Establishment: Rev. JOSEPH FORD Manager's Phone: _____

Contact Person: " Phone # 781-4573

Business Phone: _____

Check the proper category for the license requested:

- (a) Restaurant or victualer NOT serving malt beverages on the premises and seating capacity of less than 50. \$25.00 _____
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- (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. \$25.00 _____
- (d) Same as (c) except where the total seating capacity is more than 50. \$50.00 _____
- (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. \$50.00 _____
- (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. \$25.00 _____
- (g) Same as (f) except where the total area of the establishment is more than 10,000 square feet. \$50.00 _____
- (h) Establishments operated by non-profit organizations. \$25.00 25.00
- (i) Vendor/Cart \$10.00 _____

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

Brief Description of Business: CHURCH

Have you received State approval? _____ Yes _____ NO

Signature of Applicant: J. Joseph Ford Date: 2-29-08

TOWN OF FALMOUTH, MAINE 2008
APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE

Business or Trade Name: LEAVITT & SONS
Business Address: 37 Depot Rd
Name of Owner of Business: Peter Leavitt
Address of Owner of Business: 74 ~~th~~ Underwood, Falmouth
Manager at Establishment: Pete Manager's Phone: 838-0792
Contact Person: Same Phone #
Business Phone: 781-3753

Check the proper category for the license requested:

- (a) Restaurant or victualer NOT serving malt beverages on the premises and seating capacity of less than 50. \$25.00 _____
- (b) Same as (a) except where the total seating capacity is more than 50. \$50.00 _____
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- (g) Same as (f) except where the total area of the establishment is more than 10,000 square feet. \$50.00 _____
- (h) Establishments operated by non-profit organizations. \$25.00 _____
- (i) Vendor/Cart \$10.00 _____

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

Brief Description of Business: Retail Food

Have you received State approval? Yes Yes _____ NO _____

Signature of Applicant: [Signature] Date: _____

TOWN OF FALMOUTH, MAINE 2008
APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE

Business or Trade Name: Lotus - Jay Garden Inc.

Business Address: 251 U.S. RT 1 Falmouth, ME 04105

Name of Owner of Business: _____

Address of Owner of Business: _____

Manager at Establishment: James Han Manager's Phone: 207-781-3453

Contact Person: James Han / Sandy Han Phone # 207-781-3453

Business Phone: 207-781-3453

Check the proper category for the license requested:

- | | |
|--|------------------------|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 _____ |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 _____ |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 <u>✓</u> _____ |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 _____ |
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| (g) Same as (f) except where the total area of the establishment is more than 10,000 square feet. | \$50.00 _____ |
| (h) Establishments operated by non-profit organizations. | \$25.00 _____ |
| (i) Vendor/Cart | \$10.00 _____ |

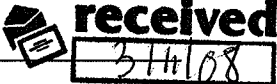
CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

Brief Description of Business: _____

Have you received State approval? _____ Yes _____ NO

Signature of Applicant: _____ Date: _____

TOWN OF FALMOUTH, MAINE 2008
APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE

Business or Trade Name: MCDONALD'S  3/11/08

Business Address: 227 US ROUTE ONE

Name of Owner of Business: GEORGE LYDICK

Address of Owner of Business: 24 BAYSHORE FALMOUTH

Manager at Establishment: SCOTT LYDICK Manager's Phone: 207 653 6531

Contact Person: SCOTT LYDICK Phone # 207 653 6531

Business Phone: 207 781-4118

Check the proper category for the license requested:

- | | |
|--|------------------|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 _____ |
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| (h) Establishments operated by non-profit organizations. | \$25.00 _____ |
| (i) Vendor/Cart | \$10.00 _____ |

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

Brief Description of Business: QUICK SERVICE RESTAURANT

Have you received State approval? ✓ Yes _____ NO

Signature of Applicant: Scott Lydick Date: 2/29/08

TOWN OF FALMOUTH, MAINE 2008
APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE

Business or Trade Name: NINA'S VARIETY
Business Address: 125 BUCKHAM RD
Name of Owner of Business: NANCY + KENNETH RENOCK
Address of Owner of Business: 11 HAVEN RD WINDHAM ME
Manager at Establishment: NANCY RENOCK Manager's Phone: 899-6186
Contact Person: NANCY RENOCK Phone # 899-6186
Business Phone: 781-9906

Check the proper category for the license requested:

- (a) Restaurant or victualer NOT serving malt beverages on the premises and seating capacity of less than 50. \$25.00 _____
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- (g) Same as (f) except where the total area of the establishment is more than 10,000 square feet. \$50.00 _____
- (h) Establishments operated by non-profit organizations. \$25.00 _____
- (i) Vendor/Cart \$10.00 _____

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

Brief Description of Business: SANdwich Shop -

Have you received State approval? X Yes _____ NO _____

Signature of Applicant: Nancy M Renock Date: 3/12/08

TOWN OF FALMOUTH, MAINE 2008
APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE

Business or Trade Name: PROFESSIONAL CATERING SERVICES INC.
Business Address: 9 GRIST MILL DRIVE
Name of Owner of Business: KERRY LUTHER
Address of Owner of Business: 9 GRIST MILL DRIVE
Manager at Establishment: KERRY LUTHER Manager's Phone: 207-878-5511
Contact Person: KERRY LUTHER Phone # 207-878-5511
Business Phone: 207-878-5511

Check the proper category for the license requested:

- | | |
|--|------------------------|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 _____ |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 _____ |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 _____ |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 <u>X</u> _____ |
| (g) Same as (f) except where the total area of the establishment is more than 10,000 square feet. | \$50.00 _____ |
| (h) Establishments operated by non-profit organizations. | \$25.00 _____ |
| (i) Vendor/Cart | \$10.00 _____ |

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

Brief Description of Business: _____

Have you received State approval? X Yes _____ NO _____

Signature of Applicant: [Signature] Date: 03/17/08

TOWN OF FALMOUTH, MAINE 2008
APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE

Business or Trade Name: Rite Aid # 3278

Business Address: 33 Depot Road Falmouth

Name of Owner of Business: Rite Aid of Maine, Inc.

Address of Owner of Business: PO Box 3165 Attn: Licensing Harrisburg PA 17105

Manager at Establishment: Stephanie Randall Manager's Phone: 207-657-3607

Contact Person: Melissa Coffman Phone # 717-761-2633

Business Phone: 207-781-4414

Check the proper category for the license requested:

- (a) Restaurant or victualer NOT serving malt beverages on the premises and seating capacity of less than 50. \$25.00 _____
- (b) Same as (a) except where the total seating capacity is more than 50. \$50.00 _____
- (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. \$25.00 _____
- (d) Same as (c) except where the total seating capacity is more than 50. \$50.00 _____
- (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. \$50.00 _____
- (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. \$25.00 _____
- (g) Same as (f) except where the total area of the establishment is more than 10,000 square feet. \$50.00 50.00
- (h) Establishments operated by non-profit organizations. \$25.00 _____
- (i) Vendor/Cart \$10.00 _____

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

Brief Description of Business: Retail Drug & Variety Store

Have you received State approval? Yes ☒ NO ☐

Signature of Applicant: M. A. Radginski Date: 3/4/08

**TOWN OF FALMOUTH, MAINE 2008
APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE**

Business or Trade Name: STARBUCKS COFFEE #112007
Business Address: 256 US RTE 1 FALMOUTH ME 04105

Name of Owner of Business: STARBUCKS COFFEE #112007

Address of Owner of Business: PO BOX 3442-12X2 Seattle WA 98124

Manager at Establishment: RENÉE MCGOVERN Manager's Phone: (207) 781-2380

Contact Person: RENÉE MCGOVERN Phone # (207) 781-2380

Business Phone: 206 318 8705

Check the proper category for the license requested:

- (a) Restaurant or victualer NOT serving malt beverages on the premises and seating capacity of less than 50. \$25.00 ☒
- (b) Same as (a) except where the total seating capacity is more than 50. \$50.00 ☐
- (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. \$25.00 ☐
- (d) Same as (c) except where the total seating capacity is more than 50. \$50.00 ☐
- (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. \$50.00 ☐
- (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. \$25.00 ☐
- (g) Same as (f) except where the total area of the establishment is more than 10,000 square feet. \$50.00 ☐
- (h) Establishments operated by non-profit organizations. \$25.00 ☐
- (i) Vendor/Cart \$10.00 ☐

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

Brief Description of Business: Coffee

Have you received State approval? ☒ Yes ☐ NO

Signature of Applicant: [Signature]

Date: 3-5-08

TOWN OF FALMOUTH, MAINE 2008
APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE

Business or Trade Name: Waldo's General Store

Business Address: 178 US Rt 1, Falmouth

Name of Owner of Business: Victoria Mulken

Address of Owner of Business: 178 US Rt 1, Falmouth

Manager at Establishment: Jerry Williams Manager's Phone: 781.4404

Contact Person: Genie Boone Phone # 781.2120

Business Phone: 781.4404

Check the proper category for the license requested:

- | | |
|--|------------------------|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 _____ |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 _____ |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 _____ |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 <u>X</u> _____ |
| (g) Same as (f) except where the total area of the establishment is more than 10,000 square feet. | \$50.00 _____ |
| (h) Establishments operated by non-profit organizations. | \$25.00 _____ |
| (i) Vendor/Cart | \$10.00 _____ |

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

Brief Description of Business: convenience store selling Del. items, gas, beer & groceries

Have you received State approval? X Yes _____ NO _____

Signature of Applicant: Genie Boone Date: 3.10.08

TOWN OF FALMOUTH, MAINE 2008
APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE

Business or Trade Name: Restwend LLC D/B/A Wendy's
Business Address: ²⁰⁶ U.S. Rte One Falmouth ME 04105
Name of Owner of Business: Restwend LLC
Address of Owner of Business: 36 Anthony Ave Augusta ME 04330
Manager at Establishment: Mark Taylor Manager's Phone: 781-3388
Contact Person: Martha Carlow Phone # 207-622-6253
Business Phone: 207-622-6253

Check the proper category for the license requested:

- (a) Restaurant or victualer NOT serving malt beverages on the premises and seating capacity of less than 50. \$25.00 ☒
- (b) Same as (a) except where the total seating capacity is more than 50. \$50.00 ☐
- (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. \$25.00 ☐
- (d) Same as (c) except where the total seating capacity is more than 50. \$50.00 ☐
- (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. \$50.00 ☐
- (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. \$25.00 ☐
- (g) Same as (f) except where the total area of the establishment is more than 10,000 square feet. \$50.00 ☐
- (h) Establishments operated by non-profit organizations. \$25.00 ☐
- (i) Vendor/Cart \$10.00 ☐

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

Brief Description of Business: Fast Food

Have you received State approval? ☒ Yes ☐ NO

Signature of Applicant: Martha J Carlow Date: 3-10-08

TOWN OF FALMOUTH, MAINE 2008
APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE

Business or Trade Name: West Falmouth Baptist Church

Business Address: 18 Mountain Rd, Falmouth, ME 04105

Name of Owner of Business: WFBC Congregation

Address of Owner of Business: Same

Manager at Establishment: Malcolm (Mac) Ray ^{Pastor} Manager's Phone: 297-4066

Contact Person: Chuck Riddle, secretary Phone # 297-4066 M, Tu, Th, F 9-12 AM

Business Phone: as above

Check the proper category for the license requested:

- | | |
|--|------------------|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 _____ |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 _____ |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 _____ |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 _____ |
| (g) Same as (f) except where the total area of the establishment is more than 10,000 square feet. | \$50.00 _____ |
| (h) Establishments operated by non-profit organizations. | \$25.00 <u>✓</u> |
| (i) Vendor/Cart | \$10.00 _____ |

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

Brief Description of Business: Baked Bean Suppers - No More Than Once a month

Have you received State approval? X Yes _____ NO _____

Signature of Applicant: Charles T. Riddle, church secretary Date: 3/14/08
for West Falmouth Baptist Church

TOWN OF FALMOUTH, MAINE 2008
APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE

Business or Trade Name: WISA Falmouth Blueberry
Business Address: 115 Gray Rd Falmouth, ME 04105
Name of Owner of Business: Irving Oil Corporation
Address of Owner of Business: 190 Commerce Way Portsmouth, NH 03801
Manager at Establishment: Scott Pours **Manager's Phone:** 207-878-5505
Contact Person: Lissia O'Donnell **Phone #** 603-859-8752
Business Phone: _____

Check the proper category for the license requested:

- | | |
|--|------------------|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 _____ |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 _____ |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 _____ |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 <u>X</u> |
| (g) Same as (f) except where the total area of the establishment is more than 10,000 square feet. | \$50.00 _____ |
| (h) Establishments operated by non-profit organizations. | \$25.00 _____ |
| (i) Vendor/Cart | \$10.00 _____ |

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

Brief Description of Business: Convenience Retail w/gas

Have you received State approval? X Yes _____ NO _____

Signature of Applicant: Lissia O'Donnell **Date:** 03/10/08



Hannaford Bros. Co.

March 14, 2008

Town of Falmouth
271 Falmouth Road
Falmouth, ME 04105

Attn: Kathleen Babeu, Town Clerk

Re: Food Service Establishment License
Hannaford Food & Drug #222

Dear Kathleen:

Enclosed please find a completed Renewal Application for our Hannaford Store #222.
Also enclosed is a check in the amount of \$50.00 to cover the fee.

Please send the license to my attention at the address listed below, and I will forward it to the store for posting.

If you require anything further, please contact me at 207/885-3321.

Sincerely,

Jane Goulet
Government Relations

Enclosures

Signature of Applicant: Eric M. Womell Date: 3/27/08

TOWN OF FALMOUTH, MAINE 2008
APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE

Business or Trade Name: Falmouth 10
Business Address: 206 US Route 1, Falmouth, ME 04105
Name of Owner of Business: Hoyts Cinema Corp.
Address of Owner of Business: 7132 Regal Lane, Knoxville, TN 37910
Manager at Establishment: Jennifer C. Therrien Manager's Phone: (207) 381-5264
Contact Person: Kerri Passmore, Tax Accountant Phone # (865) 925-9630
Business Phone: (207) 781-4082

Check the proper category for the license requested:

- | | |
|--|------------------------|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 _____ |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 <u>X</u> _____ |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 _____ |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 _____ |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 _____ |
| (g) Same as (f) except where the total area of the establishment is more than 10,000 square feet. | \$50.00 _____ |
| (h) Establishments operated by non-profit organizations. | \$25.00 _____ |
| (i) Vendor/Cart | \$10.00 _____ |

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

Brief Description of Business: Movie theatre w/ concessions

Have you received State approval? X Yes _____ NO _____

Signature of Applicant: Kerri Passmore Date: 3/11/08

KERRI PASSMORE
TAX ACCOUNTANT
865-925-9630

TOWN OF FALMOUTH, MAINE 2008
APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE

Business or Trade Name: Subway
Business Address: 219 US Rte 1
Name of Owner of Business: Subco Enterprises, Inc
Address of Owner of Business: 460 Sandbar Rd.
Manager at Establishment: Stacy Manager's Phone: 781-3103
Contact Person: Carol West Phone # 893-0465
Business Phone: 781-3103

Check the proper category for the license requested:

- | | |
|--|-----------------------|
| (a) Restaurant or victualer NOT serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 <u>✓</u> |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 <u> </u> |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 <u> </u> |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 <u> </u> |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 <u> </u> |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 <u> </u> |
| (g) Same as (f) except where the total area of the establishment is more than 10,000 square feet. | \$50.00 <u> </u> |
| (h) Establishments operated by non-profit organizations. | \$25.00 <u> </u> |
| (i) Vendor/Cart | \$10.00 <u> </u> |

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

Brief Description of Business: Restaurant

Have you received State approval? Yes ✓ NO

Signature of Applicant: Catherine A LeBlanc Date: 3/24/08

TOWN OF FALMOUTH, MAINE 2008
APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE

Business or Trade Name: PORTLAND COUNTRY CLUB - Pool Cafe

Business Address: 11 FORESIDE Rd., Falmouth, ME 04105

Name of Owner of Business: w/17

Address of Owner of Business: _____

Manager at Establishment: Charles W. Ross **Manager's Phone:** 781-2340

Contact Person: same **Phone #** _____

Business Phone: same

Check the proper category for the license requested:

- | | |
|--|------------------|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 _____ |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 _____ |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 <u>✓</u> |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 _____ |
| (g) Same as (f) except where the total area of the establishment is more than 10,000 square feet. | \$50.00 _____ |
| (h) Establishments operated by non-profit organizations. | \$25.00 _____ |
| (i) Vendor/Cart | \$10.00 _____ |

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

Brief Description of Business: Private country club pool cafe

Have you received State approval? ✓ Yes _____ NO _____

Signature of Applicant: Charles W. Ross **Date:** 3/25/08

TOWN OF FALMOUTH, MAINE 2008
APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE

Business or Trade Name: PORTLAND Country Club- Clubhouse

Business Address: 11 Foreside Rd., Falmouth, ME 04105

Name of Owner of Business: N/A

Address of Owner of Business: _____

Manager at Establishment: Charles W. Ross Manager's Phone: 781-2340

Contact Person: same Phone # _____

Business Phone: same _____

Check the proper category for the license requested:

- (a) Restaurant or victualer NOT serving malt beverages on the premises and seating capacity of less than 50. \$25.00 _____
- (b) Same as (a) except where the total seating capacity is more than 50. \$50.00 _____
- (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. \$25.00 _____
- (d) Same as (c) except where the total seating capacity is more than 50. \$50.00 ✓
- (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. \$50.00 _____
- (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. \$25.00 _____
- (g) Same as (f) except where the total area of the establishment is more than 10,000 square feet. \$50.00 _____
- (h) Establishments operated by non-profit organizations. \$25.00 _____
- (i) Vendor/Cart \$10.00 _____

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

Brief Description of Business: Private Country Club

Have you received State approval? ✓ Yes _____ NO

Signature of Applicant: Charles W. Ross Date: 3/25/08

TOWN OF FALMOUTH, MAINE 2008
APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE

Business or Trade Name: Ricek's of Falmouth

Business Address: 240 US ROUT ONE

Name of Owner of Business: Ricek's Inc.

Address of Owner of Business: 100 Industrial Way, Suite One, Portland 04103

Manager at Establishment: Brian Whitehouse Manager's Phone: 781-3100

Contact Person: Ron Stepan Phone # 878-8778

Business Phone: (207) 781-3100

Check the proper category for the license requested:

- | | |
|--|------------------|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 _____ |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 _____ |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 _____ |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 <u>✓</u> |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 _____ |
| (g) Same as (f) except where the total area of the establishment is more than 10,000 square feet. | \$50.00 _____ |
| (h) Establishments operated by non-profit organizations. | \$25.00 _____ |
| (i) Vendor/Cart | \$10.00 _____ |

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

Brief Description of Business: Family Restaurant

Have you received State approval? ✓ Yes _____ NO

Signature of Applicant: [Signature] Date: 3/15/08

**TOWN OF FALMOUTH, MAINE 2008
APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE**

Business or Trade Name: FALMOUTH CONGREGATIONAL CHURCH

Business Address: 267 FALMOUTH ROAD

Name of Owner of Business: Same as business name

Address of Owner of Business: Same addresses.

Manager at Establishment: Kay Layton Manager's Phone: 781-3413

Contact Person: Same Phone #

Business Phone: Same

Check the proper category for the license requested:

- | | |
|--|--|
| (a) Restaurant or victualer <u>NOT</u> serving malt beverages on the premises and seating capacity of less than 50. | \$25.00 <u></u> |
| (b) Same as (a) except where the total seating capacity is more than 50. | \$50.00 <u></u> |
| (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. | \$25.00 <u></u> |
| (d) Same as (c) except where the total seating capacity is more than 50. | \$50.00 <u></u> |
| (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. | \$50.00 <u></u> |
| (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. | \$25.00 <u></u> |
| (g) Same as (f) except where the total area of the establishment is more than 10,000 square feet. | \$50.00 <u></u> |
| (h) Establishments operated by non-profit organizations. | \$25.00 <u><input checked="" type="checkbox"/></u> |
| (i) Vendor/Cart | \$10.00 <u></u> |

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

Brief Description of Business: Church serving charity suppers + Fair

Have you received State approval? ☒ Yes ☒ NO

Signature of Applicant: Kay Layton Date: 3.26.08

TOWN OF FALMOUTH, MAINE 2008
APPLICATION FOR FOOD SERVICE ESTABLISHMENT LICENSE

Business or Trade Name: Finch's Restaurant
Business Address: 204 US Rt 1 Falmouth
Name of Owner of Business: Johnny Robinson
Address of Owner of Business: 20 Turner Portland 04101
Manager at Establishment: _____ Manager's Phone: _____
Contact Person: Johnny Robinson Phone # 781-3342 / 8583380
Business Phone: _____

Check the proper category for the license requested:

- (a) Restaurant or victualer NOT serving malt beverages on the premises and seating capacity of less than 50. \$25.00 _____
- (b) Same as (a) except where the total seating capacity is more than 50. \$50.00 _____
- (c) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. \$25.00 _____
- (d) Same as (c) except where the total seating capacity is more than 50. \$50.00 _____
- (e) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. \$50.00 ☒ _____
- (f) Any business establishment such as, but not limited to, retail grocery stores, food storage warehouses, bakeries, delicatessen stores and dairy product stores where food is stored and kept for sale and where the total area of the establishment is less than 10,000 square feet. \$25.00 _____
- (g) Same as (f) except where the total area of the establishment is more than 10,000 square feet. \$50.00 _____
- (h) Establishments operated by non-profit organizations. \$25.00 _____
- (i) Vendor/Cart \$10.00 _____

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

Brief Description of Business: Class A Restaurant

Have you received State approval? Yes Yes _____ NO _____

Signature of Applicant: _____ Date: 4/2/08