

October 21, 2013

Member of Falmouth Town Council,

I am a personal chef (owner of Liz's Personal Chef Service, LLC) looking to build a commercial kitchen space in my house to run my business out of. In the past, I used my clients' kitchens to prepare food, leaving the meals packaged in their fridge/freezer with simple reheating instructions. I'm hoping to centralize my workspace through this kitchen and deliver the meals to my clients.

The kitchen would be used to prepare and package the food only. There would be no food or alcohol served onsite and I would not receive any deliveries. A centralized kitchen would streamline my prepping/ cooking and create a more efficient business for both my clients and myself.

Thank you,

Liz Warfel

Town of Falmouth

Application for a New Food Service Establishment ~~With Alcoholic Beverages~~

Type of Liquor License Applying for: _____

Please check one: (Corporation/ LLC/ Non-profit org. ☒) (Sole Proprietor ☐) (Partnership ☐)

Business Name (d/b/a): Liz's Personal Chef Service, LLC

Phone: (207) 319-3889

Location Address: 12 Grist Mill Rd., Falmouth

Mailing Address: 12 Grist Mill Rd., Falmouth, ME 04105

Contact Person: Liz Warfel Phone: 319-3889

Contact Email: lizschefservice@yahoo.com

Manager of Establishment: Liz Warfel Phone: _____

Owner of Premises (landlord): Liz Warfel

Address of Premises Owner: Same as above

Have any of the applicants, including the corporation if applicable, ever held a business license with the Town of Falmouth?

Yes _____ No ☒ If yes, please list business name(s) and location(s):

Is any principal officer under the age of 18? _____ Yes ☒ No

Have applicant, partners, associates, or corporate officers ever been *arrested, indicted, or convicted* for any violation of law? No If yes, please explain:

SOLE PROPRIETOR / PARTNERSHIP INFORMATION: (if corporation, leave blank)

Name of Owner(s): _____ DOB _____ Residence Address _____

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CORPORATE / LLC / NON-PROFIT ORGANIZATION APPLICANTS: (if sole proprietor, leave blank)

Corporation Name: Liz's Personal Chef Service, LLC

Corporation Mailing Address: 12 Grist Mill Rd., Falmouth ME 04105

Contact Person: Liz Warfel Phone: (207) 319-3889

PRINCIPAL OFFICERS: (if more space is needed, please attach a separate page)

Name _____ Title _____ DOB _____ Residence Address _____

Name _____ Title _____ DOB _____ Residence Address _____

Name _____ Title _____ DOB _____ Residence Address _____

Name _____ Title _____ DOB _____ Residence Address _____

Name _____ Title _____ DOB _____ Residence Address _____

Name _____ Title _____ DOB _____ Residence Address _____

Type of Food Served:

varied - prepared meals that will be reheated

Please check all that will be served: Beer _____ Wine _____ Liquor _____

Hours and Days of operation:

M-F 9-5

Will full-course meals, only capable of consumption with the use of tableware, be served the entire time the establishment is open? Yes _____ No X

If no, please explain NO food will be served onsite - see attached letter for more info.

Is the establishment less than 300 feet from a school, dormitory, church or parish house, or similar establishment? Yes _____ No X If yes, give the distance _____

Will you have entertainment on the premises? Yes _____ No X (If yes, a separate application is required.)

Will you permit dancing on the premises? Yes _____ No X

Will you have outside dining? Yes _____ No X. If yes, please indicate location on diagram.

Also, will the outside dining be on PUBLIC _____ or PRIVATE _____ property? NA

Have you applied for an Outdoor Dining Permit? Yes _____ No NA

Will you have any amusement devices (pinball, video games, juke box)? Yes _____ No X

If yes, please list, # of pinball: # of amusements: # of pool tables:

What is your targeted opening date? : 7/14 7/1/14

Applicant, by signature below, agrees to abide by all laws, orders, ordinances, rules and regulations governing the above licensee and further agrees that any misstatement of material fact may result in refusal of license or revocation if one has been granted. Applicant agrees that all taxes and accounts pertaining to the premises will be paid prior to issuance of the license. It is understood that this and any application(s) shall become public record and the applicant(s) hereby waive(s) any rights to privacy with respect thereto.

I/We, hereby authorize the release of any criminal history record information to the Town of Falmouth, Clerk's Office or licensing authority. I/We, hereby waive any rights to privacy with respect thereto.

Signature Elizabeth Wanfel Title _____

Date 10/21/13

Check the proper category for the license requested:

- (a) Restaurant or victualer serving malt beverages on the premises and seating capacity is less than 50. \$25.00 _____
- (b) Same as (c) except where the total seating capacity is more than 50. \$50.00 _____
- (c) Class A Restaurant, as defined by the Revised Statutes of Maine, serving both malt liquor and spirituous and vinous liquor. \$50.00 _____

- (d) 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 X
- (e) Same as (f) except where the total area of the establishment is more than 10,000 square feet. \$50.00 _____
- (f) Establishments operated by non-profit organizations. \$25.00 _____

CHECKS PAYABLE TO THE "TOWN OF FALMOUTH"

ADMINISTRATION:

Approval granted by the Town Council of Falmouth, Maine at their meeting held on _____
_____ at the Falmouth Town Hall.

Councilor Signatures

Printed Name

1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____