

**TOWN OF FREEPORT  
SPECIAL AMUSEMENT PERMIT APPLICATION**

ITEM #143-23 SPECIAL  
AMUSEMENT

RENEWAL     NEW: DATE OF OPENING \_\_\_\_\_ FEES: NEW OR RENEWAL - \$125.00

NAME OF BUSINESS Hilton Garden Inn Freeport Downtown  
BUSINESS ADDRESS (physical location) 5 Park Street Freeport, Maine 04032  
MAILING ADDRESS (if different) (same)

BUSINESS MAP/LOT # OR BUILDING OWNER \_\_\_\_\_

APPLICANT'S NAME Adrienne Patenaude

APPLICANT'S TITLE (with the business) General Manager

APPLICANT'S RESIDENCE ADDRESS Ward Rd. Topsham, Me. 04086

APPLICANT'S DATE OF BIRTH 8/22/82 PHONE NUMBER 805-1433 EMAIL: Adrienne.Patenaude@hilton.com

LIST types of entertainment the business will provide during the coming year (example: live musicians and dancing):  
PJ's, bands, comedians, etc

DESCRIBE in detail the room(s) in the business that will be used for this entertainment (example: downstairs bar area):  
lounge, restaurant, ballroom, all meeting space & patio

Is any **outdoor** entertainment intended?  YES     NO    If you answered yes to providing outdoor entertainment, please describe in detail what type of outdoor entertainment is intended, describe the exact location the entertainment will be provided outdoors, and the time of night you intend to cease activity outdoors:

Small bands for hotel wedding receptions, cocktail reception event hours are never scheduled later than 10pm

By signing below, I agree that the business will comply with all relevant Town Codes and Ordinances, including but not limited to: Chapter 21, Section 515 (Noise Regulation), Chapter 39 (Loitering, Curfew and Noise), and Chapter 50 (Special Amusement). These codes and ordinances may be viewed on the Town's website at [www.freeportmaine.com](http://www.freeportmaine.com) or viewed at the Town Clerk's Office during regular business hours.

APPLICANT'S SIGNATURE [Signature] DATE 6/29/23

PRINT NAME/TITLE Adrienne Patenaude / General Manager

(Applicant's Section is Now Completed. Please Do Not Write Below This Line.)

**AUTHORIZED SIGNATURES - TOWN CLERK TO COMPLETE**

Date App Received 7/3/2023 Fee Paid \$125 - License # \_\_\_\_\_ Expiration Date \_\_\_\_\_

REAL ESTATE & PERSONAL PROPERTY TAXES PAID? \_\_\_\_\_

FIRE DEPT APPROVAL \_\_\_\_\_ CEO APPROVAL \_\_\_\_\_

COUNCIL APPROVAL DATE \_\_\_\_\_ COUNCIL ITEM # \_\_\_\_\_

TOWN CLERK'S SIGNATURE \_\_\_\_\_

# TOWN OF FREEPORT SPECIAL AMUSEMENT PERMIT APPLICATION

RENEWAL     NEW: DATE OF OPENING \_\_\_\_\_ FEES: NEW OR RENEWAL - \$125.00

NAME OF BUSINESS CADENZA

BUSINESS ADDRESS (physical location) 5 DEPOT ST. STE. 5

MAILING ADDRESS (if different) FREEPORT, ME 04032

BUSINESS MAP/LOT # OR BUILDING OWNER H. ALAN MOONEY

APPLICANT'S NAME H. ALAN MOONEY

APPLICANT'S TITLE (with the business) OWNER

APPLICANT'S RESIDENCE ADDRESS 17 TWIN POND RD. TOPSHAM ME 04086

APPLICANT'S DATE OF BIRTH 7/29/47 PHONE NUMBER (207) 831-4311 EMAIL: ALAN@CADENZA

LIST types of entertainment the business will provide during the coming year (example: live musicians and dancing):  
FREEPORT.COM

LIVE MUSICIANS AND DANCING

DESCRIBE in detail the room(s) in the business that will be used for this entertainment (example: downstairs bar area):

FIRST FLOOR SUITE 5

Is any outdoor entertainment intended?     YES     NO    If you answered yes to providing outdoor entertainment, please describe in detail what type of outdoor entertainment is intended, describe the exact location the entertainment will be provided outdoors, and the time of night you intend to cease activity outdoors:

\_\_\_\_\_  
\_\_\_\_\_

By signing below, I agree that the business will comply with all relevant Town Codes and Ordinances, including but not limited to: Chapter 21, Section 515 (Noise Regulation), Chapter 39 (Loitering, Curfew and Noise), and Chapter 50 (Special Amusement). These codes and ordinances may be viewed on the Town's website at [www.freeportmaine.com](http://www.freeportmaine.com) or viewed at the Town Clerk's Office during regular business hours.

APPLICANT'S SIGNATURE H. Alan Mooney DATE 6.21.23

PRINT NAME/TITLE H. ALAN MOONEY

(Applicant's Section is Now Completed. Please Do Not Write Below This Line.)

**AUTHORIZED SIGNATURES - TOWN CLERK TO COMPLETE**

Date App Received 6/20/23 Fee Paid 125.00 License # \_\_\_\_\_ Expiration Date \_\_\_\_\_

REAL ESTATE & PERSONAL PROPERTY TAXES PAID? \_\_\_\_\_

FIRE DEPT APPROVAL \_\_\_\_\_ CEO APPROVAL \_\_\_\_\_

COUNCIL APPROVAL DATE \_\_\_\_\_ COUNCIL ITEM # \_\_\_\_\_

TOWN CLERK'S SIGNATURE \_\_\_\_\_

# TOWN OF FREEPORT SPECIAL AMUSEMENT PERMIT APPLICATION

RENEWAL     NEW: DATE OF OPENING \_\_\_\_\_ FEES: NEW OR RENEWAL - \$125.00

NAME OF BUSINESS FOB LLC dba. Freeport Oyster Bar

BUSINESS ADDRESS (physical location) 43 Main Street Freeport ME 04032

MAILING ADDRESS (if different) " "

BUSINESS MAP/LOT # OR BUILDING OWNER Freeport Historical Society

APPLICANT'S NAME Allison Edmund

APPLICANT'S TITLE (with the business) General Manager

APPLICANT'S RESIDENCE ADDRESS 12 Harlow Street Scarborough ME 04074

APPLICANT'S DATE OF BIRTH 10/4/88 PHONE NUMBER (609) 277-6664 EMAIL: asawyer@freeportoysterbar.com

LIST types of entertainment the business will provide during the coming year (example: live musicians and dancing):

Live music

DESCRIBE in detail the room(s) in the business that will be used for this entertainment (example: downstairs bar area):

Bar, Pavilion, Courtyard

Is any **outdoor** entertainment intended?  YES     NO    If you answered yes to providing outdoor entertainment, please describe in detail what type of outdoor entertainment is intended, describe the exact location the entertainment will be provided outdoors, and the time of night you intend to cease activity outdoors:

Live music

By signing below, I agree that the business will comply with all relevant Town Codes and Ordinances, including but not limited to: Chapter 21, Section 515 (Noise Regulation), Chapter 39 (Loitering, Curfew and Noise), and Chapter 50 (Special Amusement). These codes and ordinances may be viewed on the Town's website at [www.freeportmaine.com](http://www.freeportmaine.com) or viewed at the Town Clerk's Office during regular business hours.

APPLICANT'S SIGNATURE [Signature] DATE 4/21/2023

PRINT NAME/TITLE Allison Edmund General Manager

(Applicant's Section is Now Completed. Please Do Not Write Below This Line.)

### AUTHORIZED SIGNATURES - TOWN CLERK TO COMPLETE

Date App Received \$125<sup>00</sup> Fee Paid 7-20-23 License # \_\_\_\_\_ Expiration Date \_\_\_\_\_

REAL ESTATE & PERSONAL PROPERTY TAXES PAID? \_\_\_\_\_

FIRE DEPT APPROVAL \_\_\_\_\_ CEO APPROVAL \_\_\_\_\_

COUNCIL APPROVAL DATE \_\_\_\_\_ COUNCIL ITEM # \_\_\_\_\_

TOWN CLERK'S SIGNATURE \_\_\_\_\_

# TOWN OF FREEPORT SPECIAL AMUSEMENT PERMIT APPLICATION

RENEWAL     NEW: DATE OF OPENING \_\_\_\_\_ FEES: NEW OR RENEWAL - \$125.00

NAME OF BUSINESS Stars + Stripes Brewing

BUSINESS ADDRESS (physical location) 8 Varney Street Freeport

MAILING ADDRESS (if different) \_\_\_\_\_

BUSINESS MAP/LOT # OR BUILDING OWNER \_\_\_\_\_

APPLICANT'S NAME Bruce Nadeau

APPLICANT'S TITLE (with the business) owner

APPLICANT'S RESIDENCE ADDRESS 23 Wilson Rd Cumberland Me 04021

APPLICANT'S DATE OF BIRTH 11/8/80 PHONE NUMBER \_\_\_\_\_ EMAIL: \_\_\_\_\_  
207-274-3866

LIST types of entertainment the business will provide during the coming year (example: live musicians and dancing):  
Live Music

DESCRIBE in detail the room(s) in the business that will be used for this entertainment (example: downstairs bar area):  
Taproom + patio

Is any **outdoor** entertainment intended?  YES     NO    If you answered yes to providing outdoor entertainment, please describe in detail what type of outdoor entertainment is intended, describe the exact location the entertainment will be provided outdoors, and the time of night you intend to cease activity outdoors:  
Live music on patio

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APPLICANT'S SIGNATURE [Signature] DATE 7-20-23

PRINT NAME/TITLE \_\_\_\_\_

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### AUTHORIZED SIGNATURES - TOWN CLERK TO COMPLETE

Date App Received 7/20/2023 Fee Paid \$125- License # \_\_\_\_\_ Expiration Date \_\_\_\_\_

REAL ESTATE & PERSONAL PROPERTY TAXES PAID: (RE) Justin Fletcher owner balance due

FIRE DEPT APPROVAL \_\_\_\_\_ CEO APPROVAL \_\_\_\_\_  
Personal - ~~owed~~ owes 11/15/22 vmt.

COUNCIL APPROVAL DATE \_\_\_\_\_ COUNCIL ITEM # \_\_\_\_\_

TOWN CLERK'S SIGNATURE \_\_\_\_\_