

TOWN OF FREEPORT SPECIAL AMUSEMENT PERMIT APPLICATION

ITEM # 154-21
SPECIAL AMUSEMENT

RENEWAL NEW: DATE OF OPENING July 8th 2021 FEES: NEW OR RENEWAL - \$125.00

NAME OF BUSINESS Mast Landing Brewing Company

BUSINESS ADDRESS (physical location) 200 Lower Main Street ST: A120 Freeport ME, 04032

MAILING ADDRESS (if different) _____

BUSINESS MAP/LOT # OR BUILDING OWNER ST: A120

APPLICANT'S NAME Colton Reaves

APPLICANT'S TITLE (with the business) General Manager

APPLICANT'S RESIDENCE ADDRESS 59 Curtis Road Freeport ME, 04032

APPLICANT'S DATE OF BIRTH 06/06/1995 PHONE NUMBER 207-520-1539 EMAIL: Colton@mastlandingbrewing.com

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

Trivia, Live Music, Dancing, Movie Screenings, Open Mic

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

The inside bar area will be used for special amusement, as well as our event space upstairs when it is fully set up for occupancy.

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:

We will have live music and movie screenings outdoors on our lawn green. We plan to be within town sound ordinances. Music or other sound will potentially be played

between 11am-9pm Monday-Thursday, 11am-10pm Friday-Saturday, or 11am-9pm Sunday. We do not intend on exceeding the 250 person limit.

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 or viewed at the Town Clerk's Office during regular business hours.

APPLICANT'S SIGNATURE Colton Reaves DATE 7/18/2021

PRINT NAME/TITLE Colton Reaves: General Manager

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

AUTHORIZED SIGNATURES - TOWN CLERK TO COMPLETE

Date App Received 7/29/21 Fee Paid \$125⁰⁰ License # _____ Expiration Date _____

REAL ESTATE & PERSONAL PROPERTY TAXES PAID? _____

FIRE DEPT APPROVAL _____ CEO APPROVAL _____

COUNCIL APPROVAL DATE _____ COUNCIL ITEM # _____

TOWN CLERK'S SIGNATURE _____