

Jan 26

FREEPORT VICTUALER LICENSE APPLICATION

RENEWAL  NEW: DATE OF OPENING \_\_\_\_\_

ITEM # 16-21 VICTUALERS LICENSES

A COPY OF CURRENT STATE FOOD LICENSE MUST BE ATTACHED

FEES: NEW OR RENEWAL - \$135.00 - W/LIQUOR LICENSE - \$150.00

CHECK ONE  PEDDLER/PRIVATE PROPERTY (PERMIT FROM CODES ENFORCEMENT MUST BE ATTACHED)

PEDDLER/TOWN PROPERTY (A COPY OF INSURANCE POLICY MUST BE ATTACHED)

RESTAURANT \_\_\_\_\_ (NUMBER OF SEATS)

BED AND BREAKFAST \_\_\_\_\_ (NUMBER OF ROOMS)

OTHER FOOD BUSINESS (DESCRIBE) \_\_\_\_\_

NAME OF BUSINESS DEPOSITA'S TELEPHONE 865-6296

FREEPORT PHYSICAL ADDRESS 120 MAIN BUSINESS MAILING ADDRESS SAME

PRINCIPAL OWNER LEGAL NAME PHIL WAGNER DATE OF BIRTH 6/8/1969

(PRINCIPAL STOCKHOLDER IF OWNER(S) IS A CORPORATION)

HOME ADDRESS 8 DENNISON AVE TOWN/STATE FREEPORT ZIP CODE \_\_\_\_\_ EMAIL: phil@freeportpizza.com

ADDITIONAL OWNER LEGAL NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

(ADDITIONAL STOCKHOLDER(S) IF OWNER(S) IS A CORPORATION)

HOME ADDRESS \_\_\_\_\_ TOWN/STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ EMAIL: \_\_\_\_\_

ADDITIONAL OWNER LEGAL NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

(ADDITIONAL STOCKHOLDER(S) IF OWNER(S) IS A CORPORATION)

HOME ADDRESS \_\_\_\_\_ TOWN/STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ EMAIL: \_\_\_\_\_

CONTACT PERSON (PERSON PRIMARILY RESPONSIBLE FOR OPERATION OF THE BUSINESS) SAME

TELEPHONE \_\_\_\_\_ EMAIL: \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_ TOWN/STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

BUSINESS MAP/LOT # OR BUILDING OWNER (Required for tax verification purposes) \_\_\_\_\_

DOES THE OWNER OF THE BUSINESS OWE ANY OUTSTANDING FINES, PENALTIES OR TAXES TO THE TOWN OF FREEPORT? NO

TO YOUR KNOWLEDGE, IS THIS BUSINESS IN VIOLATION OF ANY MUNICIPAL ORDINANCE? NO

TO YOUR KNOWLEDGE, IS THIS BUSINESS IN VIOLATION OF ANY STATE OR FEDERAL LAW? NO

APPLICANT SIGNATURE [Signature] DATE 12/2/20

PRINT NAME/TITLE PHIL WAGNER, PRESIDENT

AUTHORIZED SIGNATURES - TOWN CLERK TO COMPLETE

DATE APPLICATION RECEIVED 12/17/2020 FEE PAID \$150  # 6967

REAL ESTATE TAXES P.I.F.

PERSONAL PROPERTY TAXES P.I.F.

FIRE DEPARTMENT APPROVAL N/A POLICE CHIEF APPROVAL [Signature]

CODE ENFORCEMENT APPROVAL (NEW ESTABLISHMENTS ONLY) \_\_\_\_\_

COUNCIL APPROVAL DATE \_\_\_\_\_ LICENSE NUMBER \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_

FREEMPORT VICTUALER LICENSE APPLICATION

RENEWAL

NEW: DATE OF OPENING \_\_\_\_\_

A COPY OF CURRENT STATE FOOD LICENSE MUST BE ATTACHED

FEES: NEW OR RENEWAL - \$135.00 - W/LIQUOR LICENSE - \$150.00

CHECK ONE:  PEDDLER/PRIVATE PROPERTY  
(PERMIT FROM CODES ENFORCEMENT MUST BE ATTACHED)

PEDDLER/TOWN PROPERTY  
(A COPY OF INSURANCE POLICY MUST BE ATTACHED)

RESTAURANT 235 (NUMBER OF SEATS)

BED AND BREAKFAST \_\_\_\_\_ (NUMBER OF ROOMS)

OTHER FOOD BUSINESS (DESCRIBE) \_\_\_\_\_

NAME OF BUSINESS Smoke This / Bucks Waked BBQ TELEPHONE 865-0600

FREEMPORT PHYSICAL ADDRESS 568 US RT 1 BUSINESS MAILING ADDRESS P.O. Box 209

PRINCIPAL OWNER LEGAL NAME AL Brown DATE OF BIRTH 11/13/55

(PRINCIPAL STOCKHOLDER IF OWNER(S) IS A CORPORATION)

HOME ADDRESS 6 Rocky Ave TOWN/STATE Topsham ZIP CODE 04086 EMAIL: \_\_\_\_\_

ADDITIONAL OWNER LEGAL NAME Susan Brown DATE OF BIRTH 11/26/78

(ADDITIONAL STOCKHOLDER(S) IF OWNER(S) IS A CORPORATION)

HOME ADDRESS same TOWN/STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ EMAIL: \_\_\_\_\_

ADDITIONAL OWNER LEGAL NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

(ADDITIONAL STOCKHOLDER(S) IF OWNER(S) IS A CORPORATION)

HOME ADDRESS \_\_\_\_\_ TOWN/STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ EMAIL: \_\_\_\_\_

CONTACT PERSON (PERSON PRIMARILY RESPONSIBLE FOR OPERATION OF THE BUSINESS) Al Brown

TELEPHONE 207-332-6995 EMAIL: albrown@bucks-waked-bbq.com

MAILING ADDRESS \_\_\_\_\_ TOWN/STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

BUSINESS MAP/LOT # OR BUILDING OWNER (Required for tax verification purposes) Flying Frog, LLC

DOES THE OWNER OF THE BUSINESS OWE ANY OUTSTANDING FINES, PENALTIES OR TAXES TO THE TOWN OF FREEMPORT? No

TO YOUR KNOWLEDGE, IS THIS BUSINESS IN VIOLATION OF ANY MUNICIPAL ORDINANCE? No

TO YOUR KNOWLEDGE, IS THIS BUSINESS IN VIOLATION OF ANY STATE OR FEDERAL LAW? No

APPLICANT SIGNATURE [Signature] DATE 12-14-20

PRINT NAME/TITLE Albert Brown / owner

AUTHORIZED SIGNATURES - TOWN CLERK TO COMPLETE

DATE APPLICATION RECEIVED 12/14/2020 FEE PAID \$150.00 V# 7885

REAL ESTATE TAXES PIF

PERSONAL PROPERTY TAXES PIF

FIRE DEPARTMENT APPROVAL n/a POLICE CHIEF APPROVAL [Signature]

CODE ENFORCEMENT APPROVAL (NEW ESTABLISHMENTS ONLY) n/a

COUNCIL APPROVAL DATE \_\_\_\_\_ LICENSE NUMBER \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_

FREEMPORT VICTUALER LICENSE APPLICATION

● RENEWAL      ○ NEW: DATE OF OPENING \_\_\_\_\_

A COPY OF CURRENT STATE FOOD LICENSE MUST BE ATTACHED

FEES: NEW OR RENEWAL - \$135.00 - W/LIQUOR LICENSE - \$150.00

CHECK ONE:      ○ PEDDLER/PRIVATE PROPERTY  
(PERMIT FROM CODES ENFORCEMENT MUST BE ATTACHED)

○ PEDDLER/TOWN PROPERTY  
(A COPY OF INSURANCE POLICY MUST BE ATTACHED)

○ RESTAURANT \_\_\_\_\_ (NUMBER OF SEATS)

○ BED AND BREAKFAST \_\_\_\_\_ (NUMBER OF ROOMS)

● OTHER FOOD BUSINESS (DESCRIBE) cafe at our welcome center

NAME OF BUSINESS Desert of Maine TELEPHONE 978-394-5923

FREEMPORT PHYSICAL ADDRESS 95 Desert Rd BUSINESS MAILING ADDRESS 116 Dune Dr

PRINCIPAL OWNER LEGAL NAME Pamela Heestand DATE OF BIRTH 9/21/73  
(PRINCIPAL STOCKHOLDER IF OWNER(S) IS A CORPORATION)

HOME ADDRESS 116 Dune Dr TOWN/STATE Freeport, ME ZIP CODE 04032 EMAIL: mela@desertofmaine.com

ADDITIONAL OWNER LEGAL NAME Douglas Heestand DATE OF BIRTH 5/9/74  
(ADDITIONAL STOCKHOLDER(S) IF OWNER(S) IS A CORPORATION)

HOME ADDRESS 116 Dune Dr TOWN/STATE Freeport, ME ZIP CODE 04032 EMAIL: doug@desertofmaine.com

ADDITIONAL OWNER LEGAL NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_  
(ADDITIONAL STOCKHOLDER(S) IF OWNER(S) IS A CORPORATION)

HOME ADDRESS \_\_\_\_\_ TOWN/STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ EMAIL: \_\_\_\_\_

CONTACT PERSON (PERSON PRIMARILY RESPONSIBLE FOR OPERATION OF THE BUSINESS) Pamela (Mela) Heestand

TELEPHONE 978-394-5923 EMAIL: mela@desertofmaine.com

MAILING ADDRESS 116 Dune Dr TOWN/STATE Freeport, ME ZIP CODE 04032

BUSINESS MAP/LOT # OR BUILDING OWNER (Required for tax verification purposes) map 22, Lot 8

DOES THE OWNER OF THE BUSINESS OWE ANY OUTSTANDING FINES, PENALTIES OR TAXES TO THE TOWN OF FREEMPORT? no

TO YOUR KNOWLEDGE, IS THIS BUSINESS IN VIOLATION OF ANY MUNICIPAL ORDINANCE? no

TO YOUR KNOWLEDGE, IS THIS BUSINESS IN VIOLATION OF ANY STATE OR FEDERAL LAW? no

APPLICANT SIGNATURE [Signature] DATE 12/30/2020

PRINT NAME/TITLE Pamela Heestand, owner

AUTHORIZED SIGNATURES - TOWN CLERK TO COMPLETE

DATE APPLICATION RECEIVED 1/1/2021 FEE PAID [Signature]

REAL ESTATE TAXES PIF

PERSONAL PROPERTY TAXES owes

FIRE DEPARTMENT APPROVAL n/a POLICE CHIEF APPROVAL [Signature]

CODE ENFORCEMENT APPROVAL (NEW ESTABLISHMENTS ONLY) n/a

COUNCIL APPROVAL DATE \_\_\_\_\_ LICENSE NUMBER \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_