TOWN OF FREEPORT SPECIAL AMUSEMENT PERMIT APPLICATION

ANALING ADDRESS (physical location) 200 Lower Main Street ST: A120 Freeport ME, 04032 MAILING ADDRESS (if different) SUSINESS MAP/LOT # OR BUILDING OWNER ST: A120 APPLICANT'S NAME Colton Reaves APPLICANT'S TITLE (with the business) General Manager APPLICANT'S TITLE (with the business) From the property of the pr	o RENEWAL ONEW: DATE OF OPENING July 8th 2021 FEES: NEW OR RENEWAL - \$125.00
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 TITLE (with the business) General Manager APPLICANT'S RESIDENCE ADDRESS 59 Curtis Road Freeport ME,04032 APPLICANT'S DATE OF BIRTH PHONE NUMBER 207-520-1539 EMAIL: Colton@mastlandingbrewing.com Jist types of entertainment the business that will be used for this entertainment (example: live musicians and dancing): Trivia, Live Music, Dencing, 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 gutdoor entertainment intended? YES NO If you answered yes to providing outdoor intertainment, 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: What have live music and move screenings outdoors or our liven grean. We plain to be within town sound ordinances during outdoor will potentially be played between 11am-5pm Monday-Thursday, 11am-10pm Friday-Staturday, or 11am-5pm 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, Curriew 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 unsiness hours. APPLICANT'S SIGNATURE Colton Reaves: General Manager (Applicant's Section is Now Completed. Please Do Not Write Below This Line.) AUTHORISED SIGNATURES - TOWN CLERK TO COMPLETE Date App Received Fee Paid S125 License # OG	NAME OF BUSINESS Mast Landing Brewing Company
APPLICANT'S NAME Colton Reaves APPLICANT'S TITLE (with the business) General Manager APPLICANT'S TITLE (with the business) General Manager APPLICANT'S TITLE (with the business) PHONE NUMBER 207-520-1539 EMAIL Colton@mastlandingbrowing.com APPLICANT'S DATE OF BIRTH PHONE NUMBER 207-520-1539 EMAIL Colton@mastlandingbrowing.com APPLICANT'S DATE OF BIRTH PHONE NUMBER 207-520-1539 EMAIL Colton@mastlandingbrowing.com APPLICANT'S DATE OF BIRTH PHONE NUMBER 207-520-1539 EMAIL Colton@mastlandingbrowing.com APPLICANT'S DATE OF BIRTH PHONE NUMBER 207-520-1539 EMAIL Colton@mastlandingbrowing.com APPLICANT'S DATE OF BIRTH PHONE NUMBER 207-520-1539 EMAIL Colton@mastlandingbrowing.com APPLICANT'S DATE OF BIRTH PHONE NUMBER 207-520-1539 EMAIL Colton@mastlandingbrowing.com APPLICANT'S DATE OF BIRTH PHONE NUMBER 207-520-1539 EMAIL Colton@mastlandingbrowing.com APPLICANT'S DATE OF BIRTH PHONE NUMBER 207-520-1539 EMAIL Colton@mastlandingbrowing.com APPLICANT'S DATE OF BIRTH PHONE NUMBER 207-520-1539 EMAIL Colton@mastlandingbrowing.com APPLICANT'S DATE OF BIRTH PHONE NUMBER 207-520-1539 EMAIL Colton@mastlandingbrowing.com APPLICANT'S DATE OF BIRTH PHONE NUMBER 207-520-1539 EMAIL Colton@mastlandingbrowing.com APPLICANT'S SIGNATURE Colton Reaves Webster at www.freeportmain.com or viewed at the Town Clerk's Office during regular pusiness hours. APPLICANT'S SIGNATURE Colton Reaves: General Manager (Applicant's Section is Now Completed. Please Do Not Write Below This Line.) AUHORIZED SIGNATURES - TOWN CLERK TO COMPLETE Colton Reaves: General Manager (Applicant's Section is Now Completed. Please Do Not Write Below This Line.) AUHORIZED SIGNATURES - TOWN CLERK TO COMPLETE Date App Received PERSONAL PROPERTY TAXES PAID? AUHORIZED SIGNATURES - TOWN CLERK TO COMPLETE Date App Received PERSONAL PROPERTY TAXES PAID? AUHORIZED SIGNATURES - TOWN CLERK TO COMPLETE Date App Received PERSONAL PROPERTY TAXES PAID? Expiration Date 201-520 Expiration Date 201-520 Expiration Date 201-520 Expiration Date 201-520 Expiration Dat	BUSINESS ADDRESS (physical location) 200 Lower Main Street ST: A120 Freeport ME, 04032
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REAL ESTATE & PERSONAL PROPERTY TAXES PAID?	Date Ann Received 7/29/10 Fee Paid 5/250 License # 06-21 Expiration Page (77/2) 17
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