

TOWN OF FREEPORT SPECIAL AMUSEMENT PERMIT APPLICATION

ITEM # 204-22 SPECIAL AMUSEMENT

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

NAME OF BUSINESS Mast Landing Brewing Company

BUSINESS ADDRESS (physical location) 200 Lower Main Street, Suite 101

MAILING ADDRESS (if different) _____

BUSINESS MAP/LOT # OR BUILDING OWNER _____

APPLICANT'S NAME Ashley LaPoint

APPLICANT'S TITLE (with the business) Event Coordinator

APPLICANT'S RESIDENCE ADDRESS 12 Ledgewood Lane, Freeport ME 04032

APPLICANT'S DATE OF BIRTH 1/29/93 PHONE NUMBER 315-566-5894 EMAIL: ashley@mastlandingbrewing.com

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

~~Live music and dancing~~ Dancing in private event space

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

~~Downstairs bar area~~ Second floor, private event space only

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:

~~No outdoor entertainment is intended.~~

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 Ashley E. LaPoint DATE 7/28/2022

PRINT NAME/TITLE Ashley E. LaPoint - Event Coordinator - MLBC

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

AUTHORIZED SIGNATURES - TOWN CLERK TO COMPLETE

Date App Received 11.1.22 Fee Paid \$125⁰⁰ License # _____ Expiration Date _____

REAL ESTATE & PERSONAL PROPERTY TAXES PAID? PIF

FIRE DEPT APPROVAL _____ CEO APPROVAL _____

COUNCIL APPROVAL DATE _____ COUNCIL ITEM # _____

TOWN CLERK'S SIGNATURE _____