

TOWN OF FREEPORT
SPECIAL AMUSEMENT PERMIT APPLICATION

ITEM # 113-21 SPECIAL AMUSEMENT
PUBLIC HEARING

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

NAME OF BUSINESS Stars & Stripes Brewing
BUSINESS ADDRESS (physical location) 8 Varrey Road, Freeport, ME 04032
MAILING ADDRESS (if different) 23 Wilson Rd. Cumberland, ME 04021
BUSINESS MAP/LOT # OR BUILDING OWNER 23 / 56A
APPLICANT'S NAME BRUCE NADEAU III
APPLICANT'S TITLE (with the business) OWNER
APPLICANT'S RESIDENCE ADDRESS 23 Wilson Rd. Cumberland ME 04021
APPLICANT'S DATE _____ PHONE NUMBER 274-3866 EMAIL: StarsStripesBrewing@gmail.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):
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:
Music on patio

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 Bruce Nadeau DATE 6/9/2021
PRINT NAME/TITLE BRUCE NADEAU III

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

AUTHORIZED SIGNATURES - TOWN CLERK TO COMPLETE

Date App Received \$125⁰⁰ Fee Paid 6/4/21 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 Harraseeket Inn Inc.

BUSINESS ADDRESS (physical location) 162 Main St.

MAILING ADDRESS (if different) _____

BUSINESS MAP/LOT # OR BUILDING OWNER Harraseeket Inn Inc.

APPLICANT'S NAME Josh Cushing / Cliff Gray

APPLICANT'S TITLE (with the business) GM

APPLICANT'S RESIDENCE ADDRESS 162 Main St Freeport

APPLICANT'S DATE OF BIRTH _____ PHONE NUMBER 8659377 EMAIL: Josh@harraseeketinn.com

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

DJ, live bands, magicians etc.

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

Any one of several, Coast Bay Ballroom or Merry metz rooms

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 (Licensing, 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 _____ DATE 6/7/2021

PRINT NAME/TITLE Josh Cushing Pres.

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

AUTHORIZED SIGNATURES - TOWN CLERK TO COMPLETE

Date App Received 6/19/21 Fee Paid \$100²⁰ 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. SUITE 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
APPLICANT'S DATE OF BIRTH [REDACTED] NUMBER 207 831 4311 EMAIL: CADENZA FREEPORT. ALAN @ .COM

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

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

APPLICANT'S SIGNATURE [Signature] DATE 6.12.21

PRINT NAME/TITLE H. ALAN MOONEY / OWNER

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

AUTHORIZED SIGNATURES - TOWN CLERK TO COMPLETE

Date App Received 6/14/21 Fee Paid \$25⁰⁰ License # _____ Expiration Date _____

REAL ESTATE & PERSONAL PROPERTY TAXES PAID? _____

FIRE DEPT APPROVAL [Signature] CEO APPROVAL _____

COUNCIL APPROVAL DATE _____ COUNCIL ITEM # _____

TOWN CLERK'S SIGNATURE _____

mail

TOWN OF FREEPORT SPECIAL AMUSEMENT PERMIT APPLICATION

RENEWAL NEW: DATE OF OPENING _____

FEES: NEW OR RENEWAL - \$125.00

NAME OF BUSINESS ATHENA'S CANTINA

BUSINESS ADDRESS (physical location) 4911 US ROUTE 1 UNIT 10

MAILING ADDRESS (if different) _____

BUSINESS MAP/LOT # OR BUILDING OWNER STORAGE REALTY

APPLICANT'S NAME TAIS SPANDEKER / ADAM DE LOS REYES

APPLICANT'S TITLE (with the business) OWNER

APPLICANT'S RESIDENCE ADDRESS 304 US ROUTE 1

APPLICANT'S DATE OF BIRTH _____ PHONE NUMBER 207-710-9885 EMAIL: CRAZYLCOCORN16@GMAIL.COM

LIST types of entertainment to be provided during the coming year (example: live musicians and dancing):

LIVE MUSICIANS, KARAOKE

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

CORNER OF THE DINING AREA

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

APPLICANT'S SIGNATURE [Signature] DATE 22 JUNE 2021

PRINT NAME/TITLE TAIS SPANDEKER

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

AUTHORIZED SIGNATURES - TOWN CLERK TO COMPLETE

Date App Received 6/22/21 Fee Paid \$125 License # _____ Expiration Date 7/31/22

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 Hilton Garden Inn Freeport Downtown

BUSINESS ADDRESS (physical location) 5 Park Street Freeport, Me. 04032

MAILING ADDRESS (if different) (same)

BUSINESS MAP/LOT # OR BUILDING OWNER David Masse

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 [REDACTED] NUMBER 805-433 EMAIL: Adrienne.Patenaude@hilton.com

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

DJ'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 spaces ? 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 receptions. 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 or viewed at the Town Clerk's Office during regular business hours.

APPLICANT'S SIGNATURE [Signature] DATE 6/22/21

PRINT NAME/TITLE Adrienne Patenaude / General Manager

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REAL ESTATE & PERSONAL PROPERTY TAXES PAID? _____

FIRE DEPT APPROVAL _____ CEO APPROVAL _____

COUNCIL APPROVAL DATE _____ COUNCIL ITEM # _____

TOWN CLERK'S SIGNATURE _____

