

MILFORD BOARD OF SELECTMEN: AGENDA
March 18, 2019 – 7:00PM, ROOM 03, TOWN HALL

A. SIGNING OF WARRANT, APPROVAL OF March 7, 2019 MINUTES

B. INVITATION TO SPEAK

C. PUBLIC HEARINGS

D. SCHEDULED APPOINTMENTS

1. Guido & Son, RE: Retail Package License Amendment
2. Benefit Coordinator, RE: Insurance Rates
3. Down Revitalization Committee, RE: Update

E. TOWN ADMINISTRATOR'S REPORT

F. OLD BUSINESS

1. Town Administrator, RE: Town Meeting Warrant
2. Town Administrator, RE: HR Policies

G. NEW BUSINESS

1. Town Administrator, RE: Town of Hopkinton Waive Fee
2. St Mary's of Assumption, RE: Permit to Obstruct
3. Canvas N' Cup, RE: One Day Liquor License
4. My FM Media, RE: Fishing Derby for Kids
5. Police Chief, RE: School Zone – Milford High School

H. CORRESPONDENCE

I. EXECUTIVE SESSION

The listing of matters above are those reasonably anticipated by the Chair which may be discussed at the meeting. Not all items listed may be discussed and other items not listed may also be brought up for discussion to the extent permitted by law.

D-1
3/18/19



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street Boston, MA 02114
www.mass.gov/abcc

**RETAIL ALCOHOLIC BEVERAGES LICENSE APPLICATION
MONETARY TRANSMITTAL FORM**

APPLICATION FOR AMENDMENT-Change of Business Entity Information

APPLICATION SHOULD BE COMPLETED ON-LINE, PRINTED, SIGNED, AND SUBMITTED TO THE LOCAL
LICENSING AUTHORITY.

ECRT CODE: RETA

Please make \$200.00 payment here: <https://www.mass.gov/epay-for-online-payments-abcc>

PAYMENT MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP, OR INDIVIDUAL

EPAY CONFIRMATION NUMBER

A.B.C.C. LICENSE NUMBER (IF AN EXISTING LICENSEE, CAN BE OBTAINED FROM THE CITY)

00089-PK-0706

ENTITY/ LICENSEE NAME

GUIDO AND SON LLC

ADDRESS

194 WEST STREET, UNIT 1

CITY/TOWN

MILFORD

STATE

MA

ZIP CODE

01757

For the following transactions (Check all that apply):

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> New License | <input type="checkbox"/> Change of Location | <input type="checkbox"/> Change of Class (i.e. Annual / Seasonal) | <input checked="" type="checkbox"/> Change Corporate Structure (i.e. Corp / LLC) |
| <input type="checkbox"/> Transfer of License | <input type="checkbox"/> Alteration of Licensed Premises | <input type="checkbox"/> Change of License Type (i.e. club / restaurant) | <input type="checkbox"/> Pledge of Collateral (i.e. License/Stock) |
| <input type="checkbox"/> Change of Manager | <input type="checkbox"/> Change Corporate Name | <input type="checkbox"/> Change of Category (i.e. All Alcohol/Wine, Malt) | <input type="checkbox"/> Management/Operating Agreement |
| <input type="checkbox"/> Change of Officers/
Directors/LLC Managers | <input type="checkbox"/> Change of Ownership Interest
(LLC Members/ LLP Partners,
Trustees) | <input type="checkbox"/> Issuance/Transfer of Stock/New Stockholder | <input type="checkbox"/> Change of Hours |
| | | <input type="checkbox"/> Other <input type="text"/> | <input type="checkbox"/> Change of DBA |

THE LOCAL LICENSING AUTHORITY MUST MAIL THIS
TRANSMITTAL FORM ALONG WITH
COMPLETED APPLICATION, AND SUPPORTING DOCUMENTS TO:

ALCOHOLIC BEVERAGES CONTROL COMMISSION
239 CAUSEWAY STREET
BOSTON, MA 02241-3396



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street Boston, MA 02114
www.mass.gov/abcc

APPLICATION FOR AMENDMENT-Change of Business Entity Information

☐ **Change of Corporate Name**

☐ **Change of DBA**

- DOR Certificate of Good Standing (Req. for Chg of Corp Name only)
- DUA Certificate of Compliance (Req. for Chg of Corp Name only)
- Change of Corporate Name/DBA Application
- Vote of the Entity
- Payment Receipt
- Business Structure Documents
 - If Sole Proprietor, **Business Certificate**
 - If partnership, **Partnership Agreement**
 - If corporation or LLC, **Articles of Organization** from the Secretary of the Commonwealth

☒ **Change of Corporate Structure**

- DOR Certificate of Good Standing
- DUA Certificate of Compliance
- Change of Corporate Structure Application
- Vote of the Entity
- Payment Receipt
- Business Structure Documents
 - If Sole Proprietor, **Business Certificate**
 - If partnership, **Partnership Agreement**
 - If corporation or LLC, **Articles of Organization** from the Secretary of the Commonwealth

1. BUSINESS ENTITY INFORMATION

Entity Name	Municipality	ABCC License Number
James G. Guido/dba Guido & Son Italian Imports	Milford, MA	00089-PK-0706

Please provide a narrative overview of the transaction(s) being applied for.

Change Corporate Structure from Sole Proprietor to LLC – add two owners to existing license as described in LLC documents. Owners to be added: Mary L. Guido/spouse and James E. Guido/son

APPLICATION CONTACT

The application contact is the person who should be contacted with any questions regarding this application.

Name	Title	Email	Phone
Mary L. Guido	LLC Manager/Resident Agent	guidoandson@msn.com	5084981051

2. CHANGES TO BUSINESS ENTITY INFORMATION

2a. Change of Corporate Name

Last-Approved Corporate Name:

Requested New Corporate Name:

2b. Change of DBA

Last-Approved DBA:

Requested New DBA:

2c. Change of Corporate Structure

LLC, Corporation, Sole Proprietor, etc

Last-Approved Corporate Structure

Sole Proprietor

Requested New Corporate Structure

LLC

Signature: 

Date: March 8, 2019

Title: Sole Proprietor

APPLICANT'S STATEMENT

I, JAMES G. GUIDO the: ☐ sole proprietor; ☐ partner; ☐ corporate principal; ☒ LLC/LLP manager
Authorized Signatory
of GUIDO AND SON LLC
Name of the Entity/Corporation

hereby submit this application (hereinafter the "Application"), to the local licensing authority (the "LLA") and the Alcoholic Beverages Control Commission (the "ABCC" and together with the LLA collectively the "Licensing Authorities") for approval.

I do hereby declare under the pains and penalties of perjury that I have personal knowledge of the information submitted in the Application, and as such affirm that all statements and representations therein are true to the best of my knowledge and belief. I further submit the following to be true and accurate:

- (1) I understand that each representation in this Application is material to the Licensing Authorities' decision on the Application and that the Licensing Authorities will rely on each and every answer in the Application and accompanying documents in reaching its decision;
- (2) I state that the location and description of the proposed licensed premises are in compliance with state and local laws and regulations;
- (3) I understand that while the Application is pending, I must notify the Licensing Authorities of any change in the information submitted therein. I understand that failure to give such notice to the Licensing Authorities may result in disapproval of the Application;
- (4) I understand that upon approval of the Application, I must notify the Licensing Authorities of any change in the ownership as approved by the Licensing Authorities. I understand that failure to give such notice to the Licensing Authorities may result in sanctions including revocation of any license for which this Application is submitted;
- (5) I understand that the licensee will be bound by the statements and representations made in the Application, including, but not limited to the identity of persons with an ownership or financial interest in the license;
- (6) I understand that all statements and representations made become conditions of the license;
- (7) I understand that any physical alterations to or changes to the size of the area used for the sale, delivery, storage, or consumption of alcoholic beverages, must be reported to the Licensing Authorities and may require the prior approval of the Licensing Authorities;
- (8) I understand that the licensee's failure to operate the licensed premises in accordance with the statements and representations made in the Application may result in sanctions, including the revocation of any license for which the Application was submitted; and
- (9) I understand that any false statement or misrepresentation will constitute cause for disapproval of the Application or sanctions including revocation of any license for which this Application is submitted.
- (10) I confirm that the applicant corporation and each individual listed in the ownership section of the application is in good standing with the Massachusetts Department of Revenue and has complied with all laws of the Commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting of child support.

Signature:

Date: MARCH 8, 2019

Title: LLC MANAGER

CORPORATE VOTE

The Board of Directors or LLC Managers of

GUIDO AND SON LLC

Entity Name

duly voted to apply to the Licensing Authority of

MILFORD, MA

and the

City/Town

Commonwealth of Massachusetts Alcoholic Beverages Control Commission on

Feb 5, 2019

Date of Meeting

For the following transactions (Check all that apply):

- ☐ Change Corporate Name
☒ Change Corporate Structure (i.e. Corp / LLC)
☐ Change of DBA
☐ Other

"VOTED: To authorize

MARY L. GUIDO

Name of Person

to sign the application submitted and to execute on the Entity's behalf, any necessary papers and do all things required to have the application granted."

A true copy attest,

Mary L. Guido

Corporate Officer /LLC Manager Signature

For Corporations ONLY

A true copy attest,

Corporation Clerk's Signature

DEPARTMENT HEAD REVIEW FORM

1. The following Applicant: **Guido & Son Italian Imports**
194 West St
2. Has applied for: **Amendment to Retail Alcohol License-
Change of Business Entity**
3. Selectmen will take action on: **March 18, 2019**
4. Hearing Continued/Postponed/MGL Deadline: _____
5. Abutters Notified: N/A Published: N/A
6. Inquiry Routed to Dept. Heads: **3/11/19** Please Respond By: **3/13/2019**
7. License Approved _____ Denied _____ Tabled _____ On _____

.....
Building Commissioner (Zoning, Occupancy, Building/Handicap Access,
Restroom Handicap Access)

No violation accessible building – Matt Marcotte 3/14/19

Town Planner: (Site Plan Review/Waiver; Other Requirements/Stipulations)

Ok, No change in actual use – Larry Dunkin 3/11/19

Tax Collector: (Outstanding Taxes)

No outstanding taxes – Theresa Dias 3/11/19

Town Treasurer: (Outstanding Tax Liens)

None – Chris Pilla 3/11/19

Fire Chief (Information/Comment)

Approved – Matt Denman 3/11/19

Police Chief (Information/Comment)

No Concerns or issues – Police Chief O'Loughlin 3/13/19

Criminal Offense Record Info: (CORI) Approved ☐ Disapproved ☐

Board of Health: (Information/comment)

**The BOH office has no issues with this amendment – Paul Mazzuchelli
3/14/19**

Sewer Commission: (Information/comment) _____

Milford Water Company: (Information/comment) _____

Commission on Disability: (Information/comment) _____

.....
Department Head:

Applicant: **Guido & Son Imports**

Date:



TOWN OF MILFORD
Benefits Department
A Division of the Municipal Finance Department

KELLY A. CAPECE
Benefits Coordinator

KARA GEROMINI
Assistant Benefits Coordinator

D-2
3/18/19
March 13, 2019

Michael K. Walsh, Chairman
Board of Selectmen
52 Main Street
Milford, MA 01757

RE: Health Insurance Renewal

Dear Chairman Walsh,

At the March 18, 2019 meeting of the Board of Selectmen, I will be presenting, on behalf of the Insurance Advisory Committee (IAC), the group health, dental and life insurance rates for our upcoming renewal effective May 1, 2019. The IAC is seeking a vote from your Board to approve the rates as voted upon at the committee's most recent meeting.

The IAC is happy to report that we received a quote from Blue Cross Blue Shield of MA, Inc. that reflects a rate reduction of 3.7% for our annual renewal. The decrease was largely due to a lower Large Loss Claims total compared to the same time period last year. The Committee also voted to opt in to a new program for those enrolled into our health plan called Diabetes Care Value (DCV) offered by Blue Cross. The program engages active employees enrolled in the plan who have been diagnosed with Diabetes, and offers them a free glucose monitor, screenings, etc.

Blue Cross also presented Blue 20/20, a voluntary vision program, which the Committee voted to adopt as an offering to benefit eligible employees.

We were also pleased to report that we were presented with a premium rate hold from both Delta Dental and Boston Mutual Life Insurance Company for this upcoming plan year.

Summarized below are the renewal rates for the employee health, dental and life insurance plans as voted upon at the February 27th meeting of the Insurance Advisory Committee:

	2019 Rate	2018 Rate	\$ Change	% Change	Employee cost Monthly
HMO Blue New England – Ind.	901.55	936.19	-34.64	-3.7%	270.47
HMO Blue New England – Fam.	2,364.78	2,455.64	-90.86	-3.7%	709.43
Blue Care Elect PPO – Ind.	1,390.37	1,443.79	-53.42	-3.7%	695.19
Blue Care Elect PPO – Fam.	3,647.02	3,787.14	-140.12	-3.7%	1,823.51
Delta Dental – Ind.	44.79	44.79	0.00	0.0%	22.40
Delta Dental – Fam.	116.28	116.28	0.00	0.0%	58.14
Boston Mutual Life – Actives	15.15	15.15	0.00	0.0%	7.58
Boston Mutual Life – Retirees	7.35	7.35	0.00	0.0%	3.68

If you have questions concerning this information, I am available to meet at your convenience.

Respectfully,

A handwritten signature in cursive script that reads "Kelly A. Capece".

Kelly A. Capece
Benefits Coordinator

CC: William D. Buckley, Selectman
William E. Kingkade Jr., Selectman
Richard A. Villani, Town Administrator
Zachary Taylor, Finance Director

G-1 3/18/19
Richard Villani

From: Lauren Gluck <lgluck@parecorp.com>
Sent: Wednesday, March 06, 2019 8:59 AM
To: Richard Villani
Cc: Maria Morais; Allen Orsi
Subject: Bylaw filing fee waiver request - Lake Maspenock Dam Gate Replacement
Attachments: Board of Selectmen fee waiver request.pdf

Good morning Richard,

Attached please find a letter formally requesting a waiver from the Milford Wetlands Administration Bylaw filing fee for the Lake Maspenock Dam Gate Replacement project. Thank you, and feel free to contact me with any questions or concerns.

Lauren

Lauren Hastings Gluck, P.W.S.
Senior Environmental Scientist
Pare Corporation
10 Lincoln Road, Suite 210
Foxborough, MA 02035
508-543-1755



Engineers | Scientists | Planners

PARECORP.COM



March 5, 2019

Richard Villani, Town Administrator
Milford Board of Selectmen
Town Hall, 52 Main Street
Milford, MA 01757

Re: **Notice of Intent – Bylaw Filing Fee Waiver Request**
Lake Maspenock Dam Gate Replacement
Crockett Road
Upton/Milford, MA
(Pare Project No. 18255.00)

Dear Mr. Villani and Members of the Milford Board of Selectmen:

On behalf of the Town of Hopkinton Department of Public Works (Hopkinton DPW) and pursuant to the Regulations of the Massachusetts Wetlands Protection Act 310 CMR 10.00 (referred to herein as the WPA Regulations) and the Town of Milford Wetlands Administration Bylaw (referred to herein as the Bylaw), Pare Corporation (Pare) has submitted a Notice of Intent (NOI) to the Milford Conservation Commission seeking to replace the low-level outlet gate at the Lake Maspenock Dam. This letter is submitted to the Milford Board of Selectmen to request a waiver from the municipal NOI filing fees established by the Bylaw.

The Hopkinton DPW, as the applicant, proposes to replace the existing low-level outlet gate at the Lake Maspenock Dam, located on the Upton/Milford town line. The project is necessary in order to restore operability of the gate, which has reached the end of its service life, and to comply with the Massachusetts Department of Conservation and Recreation Dam Safety regulations (302 CMR 10.00). Most of the work area is in the Town of Upton, where a separate NOI has been filed.

The Hopkinton DPW, as a municipal entity, is exempt from the filing fee requirements of the WPA Regulations. While the Bylaw establishes additional municipal filing fees, Section 4 of the Bylaw states: *"The Conservation Commission may waive the filing fee for an application, request for determination or application for a Certificate of Compliance filed by a government agency."* Per our discussions with the Conservation Commission, a waiver request must be formally approved by the Board of Selectmen.

On behalf of the Hopkinton DPW, Pare respectfully requests that the Milford Board of Selectmen consider the waiver request at your meeting on March 18, 2019. Thank you for your consideration in this matter. If you have any questions, please feel free to contact us.

Sincerely,

Lauren H. Gluck, P.W.S.
Senior Environmental Scientist

LHG

cc: Milford Conservation Commission (via email)
File

Richard Villani

From: Mike Giampietro <mgiampietro@millisma.net>
Sent: Friday, March 01, 2019 9:48 AM
To: Michael Dean
Cc: Maria Morais; Richard Villani
Subject: Re: request for filing fee waiver - Lake Maspenock Dam Gate Replacement

Yes, By law the only body that can waive fee's in the town is the Board of Selectman.
They must obtain the approval from the board.

Thanks

Mike

Michael Giampietro, C.B.O.
Building Commissioner
Town of Millis

From: Michael Dean <mdean@townofmilford.com>
Sent: Thursday, February 28, 2019 11:29:20 AM
To: Mike Giampietro
Cc: Maria Morais
Subject: FW: request for filing fee waiver - Lake Maspenock Dam Gate Replacement

Mike,

Just checking with you, a consultant working on a project for the Town of Hopkinton, that requires a filing with the town of Milford, is inquiring about having the filing fee waived, since it is a municipality, the consultant says it says in our by-law that the Conservation may waive the fee for another government agency.

I do not see a problem with waiving the fee do you? They would still need to pay for the advertisement, I am just checking with you, thanks.

Thank You,
Mike Dean, P.E.
Town Engineer
mdean@townofmilford.com
Tel: 508-634-2317
Fax: 508-473-2394



OFFICE OF PLANNING
AND ENGINEERING

Please be advised that the Massachusetts Secretary of State considers e-mail to be a public record, and therefore subject to the Massachusetts Public Records Law, M.G.L. c. 66 § 10.

From: Lauren Gluck [<mailto:lgluck@parecorp.com>]

Sent: Thursday, February 28, 2019 10:33 AM

To: Maria Morais

Subject: request for filing fee waiver - Lake Maspenock Dam Gate Replacement

Good morning,

As discussed, we will be submitting an NOI for the proposed Lake Maspenock Dam Gate Replacement project. The Town of Hopkinton DPW is the owner and applicant. The Milford Wetlands Administration Bylaw states "The Conservation Commission may waive the filing fee for an application, request for determination or application for a Certificate of Compliance filed by a government agency." On behalf of the Town of Hopkinton DPW, we would like to request a waiver from the Bylaw filing fee.

Lauren

Lauren Hastings Gluck, P.W.S.
Senior Environmental Scientist
Pare Corporation
10 Lincoln Road, Suite 210
Foxborough, MA 02035
508-543-1755



MILFORD BOARD OF SELECTMEN

Room 11, Town Hall, 52 Main St. (Route 16), Milford, Massachusetts 01757-2679

508-634-2303

Fax 508-634-2324

www.milford.ma.us.com

PERMIT TO OBSTRUCT APPLICATION

- 1) Read appropriate By-Law on reverse side (Article and Section is identified below)
- 2) An Insurance Certificate (\$1,000,000/\$3,000,000) is required, worded as follows:
THE TOWN OF MILFORD IS AN ADDITIONAL INSURED.
- 3) If requesting a Permit to hang a Sign or Banner, first obtain a permit for the **Sign or Banner** itself from the Building Commissioner. Attach a copy of that permit.
- 4) If a Banner overhanging a public street is to be attached to a building, you must obtain permission from the property owner.
- 5) Applicant shall engage a responsible individual to hang banner: **town employees are prohibited from engaging in this activity.**
- 6) Submit complete application, including Insurance Certificate and any other required documents, to Selectmen's Office at least **two weeks prior to date requested below.**

Detach and retain top section for future use; Complete and submit bottom section to Selectmen's Office

NAME OF ORGANIZATION SAINT MARY OF THE ASSUMPTION PARISH
MAILING ADDRESS:

17 WINTER ST

MILFORD MA 01757

CONTACT PERSON: FR. PETER JOYCE

PHONE # 508-473-2000 (Brenda)

CHECK ONE:

- ☐ PERMIT TO OVERHANG PUBLIC WAY (Article 13, Section 5)
- ☒ PERMIT TO OBSTRUCT A PUBLIC WAY (Article 12, Section 3)
- ☐ PERMIT TO OBSTRUCT SIDEWALK (MERCHANDISE DISPLAY) (Article 13, Sec. 6)

DESCRIBE IN DETAIL WHAT YOU PLAN TO DO:

GOOD FRIDAY LIVING STATIONS OF THE CROSS. BEGIN SERVICE IN LOWER CHURCH, WALK THROUGH THE NEIGHBORHOOD TO ENACT THE JOURNEY OF JESUS OF NAZARETH TO HIS CRUCIFIXION WHICH WILL OCCUR ON CHURCH GROUNDS AND COMPLETE THE SERVICE INSIDE CHURCH

INDICATE EXACT LOCATION (Street(s) & Number(s), EXACT DAY(S) AND DATE(S), TIMES OF DAY, AND ALL OTHER RELEVANT INFORMATION:

FRIDAY, APRIL 19, 2019: AT 11:15 AM TO LEAVE THE LOWER CHURCH WALKING THROUGH THE PARKING LOT TO WINTER STREET. HEAD WEST ON WINTER ST AND TURN RIGHT ONTO MAIN ST. TAKE A RIGHT ONTO SARUE STREET AND RIGHT ONTO SCHOOL ST. TAKE ANOTHER RIGHT ONTO PEARL ST. TAKE LEFT TO GRANITE AND A RIGHT ON WINTER TO PARISH HOUSE GROUNDS

Peter Joyce
Signature of person authorized to apply for permit

3-6-19
Date

James Fahvey
Police Chief's Signature
Comments:

03/11/2019
Date

TOWN OF MILFORD BY-LAWS

ARTICLE 12, Section 3: OBSTRUCTING OF WAY: Any person who intends to erect, repair, or take down any building on land abutting on any way which the Town is required to keep repaired, and desires to make use of any portion of said way for the purpose of placing therein building materials or rubbish, shall give notice thereof to the Selectmen. Thereupon, the Selectmen may grant a permit to occupy such portion of said way, to be used for such purposes as, in their judgment, the necessity of the case demands and the security of the public allows; such permit, in no case, to be for a period of longer than ninety (90) days and to be on such conditions that, during the whole of every night from sunset to sunrise, sufficient lighted lanterns shall be so placed as to effectually secure all travelers from liability of coming in contact with such building materials or rubbish.

The Selectmen may, before granting such permit, require such persons to furnish a satisfactory bond to save the Town harmless for any damages which may arise from such use of the street and to insure the faithful compliance with the conditions of said permit.

ARTICLE 13, Section 5: SIGNS. Whoever shall establish or maintain over any street or highway any sign, sign-board or advertising device without a permit from Selectmen, shall be punished by a fine not exceeding Five Dollars. Such permit shall be granted if such sign, sign-board or devise is safely and securely made, fastened, supported and maintained, does not interfere with the public use of such street or way, is not affixed to any tree, tree-guard or other object within the limits of the street or way, and is not of a dangerous character.

ARTICLE 13, Section 6: SIDEWALK OBSTRUCTIONS. Whoever shall use any sidewalk or street for the display of merchandise or other articles of personal property, without first obtaining written permission to do so from the Selectmen, shall be punished by a fine not exceeding Ten Dollars.



MILFORD BOARD OF SELECTMEN

Room 11, Town Hall, 52 Main St. (Route 16), Milford, Massachusetts 01757-2679

508-634-2303

Fax 508-634-2324

www.milford.ma.us.com

APPLICATION FOR ONE-DAY LICENSE PER MGL, C138, S14

Please contact this office with any licensing questions you may have. This application must be returned at least two (2) weeks prior to requested date (s)

Name of Organization

Canvas n. Cup

Address

189 Main St. Milford, MA

Contact Person

Mahsa Ghavamian Weekday Telephone 617-947-8888

License is requested for the sale of: (check one) Fee = \$100.00 per day

All-alcoholic Beverages _____ Wine Only _____ Wine & Malt Only ☒ Malt Beverages Only _____

Purpose of Event

Fundraiser For 181 Family Readiness Group

Name of Applicant/Organization

181 Family Readiness Group

Address

Fay River

Telephone

774-644-3983

Email

Non-Profit Organization

Yes ☒

No _____

Date of Event

March 23rd, 2019

Event will take place at the following location:

Canvas n. Cup

Between the hours of

6pm - 9pm

Is the event held by, or held for the benefit of, a business or non-profit group? Yes ☒ No _____

Will there be a cash bar? Yes _____ No ☒

Is there an entrance fee or donation required? Yes ☒ No _____

Is the event open to the general public? Yes ☒ No _____

If the answer to ANY of these questions is YES:

A One-Day Special license is required. License applications must go before the Board of Selectmen. **ALL** alcohol must be purchased by the licensee from a **wholesaler**. (List can be found at www.mass.gov/abcc)

I certify under the pains and penalties of perjury that the above information is true and that I will comply with all applicable Alcohol Control Laws of the State of Massachusetts and policies and regulations of the Town of Milford.

Applicant's Signature

[Signature]



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

03/06/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Bright Agency, Inc 6 Congress St. P.O. Box 424 Milford MA 01757		CONTACT NAME: Kim Sylvestre PHONE (A/C, No, Ext): (508) 473-0556 FAX (A/C, No): (508) 478-6709 E-MAIL ADDRESS: ksylvestre@brightinsurance.com	
INSURED Mahsa Ghavamian, DBA: Canvas N Cup 189 Main Street Milford MA 01757		INSURER(S) AFFORDING COVERAGE INSURER A: Mt Vernon Fire Ins Co. INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	

COVERAGES**CERTIFICATE NUMBER:** CL193611486**REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Liquor Liability			CL2744116	03/23/2019	03/25/2019	\$100,000 \$200,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE



March 11, 2019

Mr. Richard Villani
Town Administrator
Town Hall
52 Main Street
Milford, MA 01757

Dear Richard,

I'm writing to request consideration from the Board of Selectman to proclaim Louisa Lake be off limits for fishing for a period of just 24 hours preceding our annual free fishing derby for the kids on April 27th. The Massachusetts Department of Fisheries & Wildlife will be delivering 500 trout at noon on Friday the 26th.

Over the past few years the lake has been severely "fished out" prior to our event, and the number of fish caught seems to go down each year. As I mentioned this derby is completely free for kids from the entire region. It's a great morning filled with families, donuts, milk and juice, T-shirts, trophies, prizes and more. I just want to ensure we will have the fish!!!

Thank you for your consideration, and I would be happy to attend any meetings to discuss this further. Would it also be possible, at this time, to get approval to hang our banner on the fence at Louisa Lake for the week leading up to the derby itself?

Sincerely,

Dick Ferrucci

My FM Media

C.C Police Chief Tom O'Loughlin

Richard Villani

From: O'Loughlin, Thomas <chief@milfordpolice.org>
Sent: Tuesday, March 12, 2019 10:03 AM
To: Richard Villani
Cc: James Asam
Subject: RE: Attached Image

Rick,

This is an annual event and request. The Board has to determine that the area is closed to fishing during that period of time and then I will notify the on-duty police officers to periodically monitor the area.

Tom O'Loughlin

From: Richard Villani <rvillani@townofmilford.com>
Sent: Tuesday, March 12, 2019 8:38 AM
To: O'Loughlin, Thomas <chief@milfordpolice.org>
Cc: James Asam <jasam@townofmilford.com>
Subject: FW: Attached Image

I was asked to forward the attached letter to each of you.

Rick

Richard A. Villani
Town Administrator
P*508-634-2303
F*508-634-2324
www.milfordma.gov

From: "Richard Villani" [<mailto:rvillani@townofmilford.com>]
Sent: Tuesday, March 12, 2019 8:28 AM
To: Richard Villani <rvillani@townofmilford.com>
Subject: Attached Image



MILFORD POLICE DEPARTMENT

Thomas J. O'Loughlin
Chief of Police

250 Main Street * Milford, MA 01757 * Tel. (508) 473-1113 * Fax (508) 473-5087*
chief@milfordpolice.org

March 13, 2019

TO: MR. RICK VILLANI, TOWN ADMINISTRATOR
FROM: THOMAS J. O'LOUGHLIN, CHIEF OF POLICE
SUBJECT: SCHOOL ZONE - MILFORD HIGH SCHOOL

In response to the email from Paige DeNegrís, I went to the area of Highland Street and West Fountain Street where they border the Milford High School campus.

Presently there are school zone markings on the roadway in the area of 26 West Fountain Street and 36 West Fountain Street, so I would recommend the installation of a sign indicating school zone 20 mph at the locations where the roadway is presently marked indicating the same.

With regard to Highland Street, I believe that the school property is more remote from this location, therefore, I do not believe that a school zone designation is warranted.

Sincerely yours,

A handwritten signature in blue ink, appearing to be "T. O'Loughlin", written over a horizontal line.

Thomas O'Loughlin
Chief of Police

O'Loughlin, Thomas

From: Richard Villani <rvillani@townofmilford.com>
Sent: Thursday, March 7, 2019 7:49 AM
To: O'Loughlin, Thomas
Subject: FW: [Milford MA] Safety for walking for students (Sent by Paige DeNegriss, mpjdenegris@sbcglobal.net)

Chief: Can you please review and advise? Thanks.

Rick

Richard A. Villani
Town Administrator
P*508-634-2303
F*508-634-2324
www.milfordma.gov

-----Original Message-----

From: cmsmailer@civicplus.com [mailto:cmsmailer@civicplus.com]
Sent: Wednesday, March 06, 2019 11:27 AM
To: Richard Villani <rvillani@townofmilford.com>
Subject: [Milford MA] Safety for walking for students (Sent by Paige DeNegriss, mpjdenegris@sbcglobal.net)

Hello rvillani,

Paige DeNegriss (mpjdenegris@sbcglobal.net) has sent you a message via your contact form (https://linkprotect.cudasvc.com/url?a=https%3a%2f%2fwww.milfordma.gov%2fuser%2f52%2fcontact&c=E,1,aB4SAc7JgzNSXUxjEsBIVT453Gln2wEpJYCHLM6_0vaNFd6vEza4S4S2TfZKhZUPjx8a8Ac2Q-rx9hJbE9Qxl2TLsg5oHAXvndac4ltQ,,&typo=1) at Milford MA.

If you don't want to receive such e-mails, you can change your settings at https://linkprotect.cudasvc.com/url?a=https%3a%2f%2fwww.milfordma.gov%2fuser%2f52%2fedit.&c=E,1,VBiOjVtV8icQjQvmecxiX3YxlhcrU-HH2ljiEPCP3Mvr_CAA1W5LLqFI6Bf9VaOMaq1UO01CzAMMzqL5vFw5TDLk_dDiTqsJ-5sQleCICGypXsNNP3k,&typo=1

Message:

Hi Mr Villani,

I am hoping you can direct me to the correct avenues to propose a school zone speed limit sign for the side entrance area at MHS along Highland Street and West Fountain. My son is a Freshman and walks to and from school for academics and sports, along with many others. It is a straightaway Street and speeding is common in this area. Although MPD does a good job patrolling the 35 MPH speed zone, it is not in comparison to our surrounding towns of Medway, Holliston and Hopkinton which all have 20 MPH speed zones surrounding their high school entrance/exits. Thank you in advance for your reply.