

**MILFORD SELECT BOARD: AGENDA**  
**April 24, 2023 – 6:00 PM, ROOM 03, TOWN HALL**

Remote Public Hearing/Invitation to Speak access now requires advanced registration. Please register online here: <http://tiny.cc/pnd6vz> Any member of the public may now register to access the zoom webinar as an attendee. Public attendees will be able to view the zoom LIVE and request to speak at the “Public Hearing/Invitation to Speak.”

**A.) SIGNING OF WARRANT, APPROVAL of Minutes, April 10, 2023**  
**EXECUTIVE SESSION Minutes, April 10, 2023**

**B.) PUBLIC HEARINGS**

1. 6:00 PM Quinten Nowland and Michael Lynch, re: Old Cedar Street
2. 6:10 PM CraftRoots, Inc, re: Farmer Series Pouring Permit and Entertainment License
3. 6:15 PM Massachusetts Electric Company dba National grid, re: Petition for Pole and wire Locations- 39 Princeton Drive
4. 99 West, LLC dba 99 Restaurant & Pub, re: Amendment to All Alcohol Beverages License- Change of Officers and LLC Managers

**C.) SCHEDULED APPOINTMENTS**

**D.) TOWN ADMINISTRATOR’S REPORT**

**E.) OLD BUSINESS**

1. Town Administrator, re: Annual Town Meeting Warrant

**F.) NEW BUSINESS**

1. Fiesta Shows, re: Carnival-Fino Field
2. Town Administrator, re: Renewal of Secondhand, Pool Tables and Bowling Alley Licenses
3. Town Administrator, re: Saint Mary’s Parish-One Day Liquor License
4. Town Administrator, re: Saint Mary’s Parish- Permit to Obstruct-May 7<sup>th</sup>
5. Town Administrator, re: Saint Mary’s Parish-Permit to Obstruct-May 12<sup>th</sup>
6. Town Administrator, re: Award Fuel Oil Bid
7. Town Counsel, re: Indemnification Agreement
8. Town Administrator, re: Proclamation Arbor Day
9. Milford Youth Commission, re: Resignation

**G.) INVITATION TO SPEAK**

**H.) CORRESPONDENCE**

**I.) EXECUTIVE SESSION**

1. O’Loughlin v Town of Milford et al, Worcester Superior Court Civil Action No. 1885CV01750C to receive Attorney/Client Communication of legal advice regarding reasonably anticipated litigation or legal issues the disclosure of which would compromise the Town’s Position

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.

B-1  
4-24-23

## TOWN OF MILFORD NOTICE OF HEARING

Notice is hereby given that the Milford Select Board will conduct a public hearing in Room 03, Milford Town Hall, 52 Main Street, Milford, Massachusetts on the following date and time:

Monday, April 10, 2023 at 6:00 P.M.

... on the intention of the Board to relocate and partially continue the street(s):

ROADWAY: "OLD CEDAR STREET"

DEVELOPER: Quinten Nowland and Michael Lynch  
12 Prospect Street, Upton, MA 01568

STREET: Old Cedar Street – as shown on the Plan by Allen Engineering & Associates Inc., dated March 1, 2023 and on file.

Description of the proposed relocation and discontinuance of a public way, as well as maps showing same, are on file in the office of the Town Clerk, Milford Town Hall, and are available for public inspection. Interested parties should direct inquiries to the Office of the Select Board, Room 11, or the Office of Planning and Engineering, Room 05, Milford Town Hall.

All persons interested in the intention of the Board to lay out the above-named street(s) as a public way are invited to attend this hearing:

PER ORDER MILFORD SELECT BOARD  
Thomas J. O'Loughlin, Chair  
Michael K. Walsh  
Paul A. Mazzuchelli

Date:

Cc: Town Clerk (w/description & plan)  
Town Counsel (w/legal description)  
Highway Surveyor  
Town Engineer

Planning Board  
Select Board  
Developer/Fee Holder  
Files

BEGINNING: At a point on the Westerly sideline of Cedar Street at the southeast corner of land now or formerly of Dilla Street Corporation as shown on the above referenced plan.

THENCE: S 02°54'18" E by said Westerly sideline a distance of 87.00 feet to a point of curvature;

Thence Southwesterly on a curve to the left having a radius of 25.00 feet, an arc length of 39.27 feet to a point of tangency;

Thence: S 87°05'42" W a distance of 26.98 feet to a point of curvature

Thence Northwesterly on a curve to the right having a radius of 125.00 feet, an arc length of 138.00 feet to a point of concentric curvature;

Thence Northwesterly on a curve to the right having a radius of 665.00 feet, an arc length of 330.12 feet to a point of tangency;

Thence: N 01°12'36" W a distance of 638.10 feet to a point on the Southerly sideline of Interstate Route 495;

Thence: S 49°16'32" E a distance of 140.03 feet to a point;

Thence: S 01°12'36" E a distance of 30.44 feet to a point of curvature;

Thence Southerly on a curve to the right having a radius of 52.00 feet, an arc length of 47.81 feet to a point of tangency;

Thence: S 51°28'10" W a distance of 42.37 feet to a point;

Thence: S 01°12'36" E a distance of 447.04 feet to a point of curvature;

Thence Southeasterly on a curve to the left having a radius of 615.00, an arc length of 330.66 feet to a point;

Thence: S 68°15'43" E a distance of 45.19 feet to a point;

Thence: N 87°05'42" E a distance of 53.19 feet to a point;

Thence: N 44°23'08" E a distance of 17.69 feet the point of beginning

The above described area of proposed discontinuance being 60,336+/- sf or 1.39+/- Acres

(Quentin Nowland & Michael Lynch)





B-2  
4-24-23

**DEPARTMENT HEAD REVIEW FORM**

- 1. Name of Business: **CraftRoots, Inc.**
- 2. Property Address: **4 Industrial Rd**
- 3. Assessors ID#: **Map 46 Block 0 Lot 16 Zone IB**
- 4. Has applied for: **Farmer Series Pouring Permit and Entertainment License**
- 5. **Current use:** Brewery-Malt
- 6. Select Board will take action on: **4/24/2023**
- 7. Abutters Notified: **4/7/23** Published: **4/7/23**
- 8. Inquiry Sent To Dept. Heads on: **3/29/2023**
- 9. Please Respond By: **Friday April 7, 2023**
- 10. License Approved: \_\_\_\_\_ Denied: \_\_\_\_\_ Tabled: \_\_\_\_\_ On \_\_\_\_\_

.....  
**Building Commissioner:** (Zoning, Occupancy, Building/Handicap Access, Restroom Handicap Access, etc.) **IB Zone, allowable use, occupant load 120, building is accessible, restrooms not accessible**

**Town Planner:** (Site Plan/Special Permit; Other Requirements/Stipulations) **Ok-no change of actual use**

**Tax Collector:** (Outstanding Taxes) **No outstanding taxes**

**Town Treasurer:** (Outstanding Tax Liens) **None**

**Fire Chief:** (Information/Comment) **No objections**

**Police Chief:** (Information/Comment) **No Issues**

Criminal Offense Record Info: (CORI) Approved  Disapproved

**Board of Health:** (Information/comment) **No issues**

**Dept. Head Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

.....  
**Manager:** *Hugh Leahy* **D.O.B. SS #**  
**Phone:** 508-245-3648 **e-mail:** *hugh@craftroots4good.org*



**The Commonwealth of Massachusetts  
Alcoholic Beverages Control Commission  
95 Fourth Street, Suite 3, Chelsea, MA 02150-2358  
www.mass.gov/abcc**

**APPLICATION FOR A NEW LICENSE**

Municipality

Milford

**1. LICENSE CLASSIFICATION INFORMATION**

ON/OFF-PREMISES	TYPE	CATEGORY	CLASS
	Farmer Series Pouring Permit	Malt	Annual

Please provide a narrative overview of the transaction(s) being applied for. On-premises applicants should also provide a description of the intended theme or concept of the business operation. Attach additional pages, if necessary.

CraftRoots Inc. is seeking a farmer series pouring permit pursuant to MGL c. 138, Section 19C(n).

Is this license application pursuant to special legislation?

Yes  No

Chapter

Acts of

**2. BUSINESS ENTITY INFORMATION**

The entity that will be issued the license and have operational control of the premises.

Entity Name	CraftRoots Inc.	FEIN	
DBA		Manager of Record	Hugh Leahy
Street Address	4 Industrial Road, Milford, MA 01757		
Phone	(508) 808-4274	Email	
Alternative Phone		Website	

**3. DESCRIPTION OF PREMISES**

Please provide a complete description of the premises to be licensed, including the number of floors, number of rooms on each floor, any outdoor areas to be included in the licensed area, and total square footage. You must also submit a floor plan.

The brewery premises are 6,000 SF which will be comprised of: (i) 4,000 SF of production space (including milling area and grain storage); (ii) 200 SF service area (bar & taps); (iii) 600 SF tasting room; (iv) 330 SF of bathrooms and storage space; (v) 220 SF of office space; (vi) 370 SF of retail and retail storage space; and (vii) 280 SF of utility and miscellaneous space, all as shown on the enclosed floor plan.

Total Square Footage:	+/- 6,000 SF	Number of Entrances:	3	Seating Capacity:	80
Number of Floors	1	Number of Exits:	3	Occupancy Number:	120

**4. APPLICATION CONTACT**

The application contact is the person whom the licensing authorities should contact regarding this application.

Name:	Mark A. Borenstein	Phone:	(508) 688-9136
Title:	Attorney	Email:	mborenstein@bowditch.com

**APPLICATION FOR A NEW LICENSE**

**5. CORPORATE STRUCTURE**

Entity Legal Structure	<input type="text" value="Corporation"/>	Date of Incorporation	<input type="text" value="11/14/2022"/>
State of Incorporation	<input type="text" value="Massachusetts"/>	Is the Corporation publicly traded? <input type="radio"/> Yes <input checked="" type="radio"/> No	

**6. PROPOSED OFFICERS, STOCK OR OWNERSHIP INTEREST**

List all individuals or entities that will have a direct or indirect, beneficial or financial interest in this license (E.g. Stockholders, Officers, Directors, LLC Managers, LLP Partners, Trustees etc.). Attach additional page(s) provided, if necessary, utilizing Addendum A.

- The individuals and titles listed in this section must be identical to those filed with the Massachusetts Secretary of State.
- The individuals identified in this section, as well as the proposed Manager of Record, must complete a CORI Release Form.
- Please note the following statutory requirements for Directors and LLC Managers:  
**On Premises (E.g. Restaurant/ Club/Hotel) Directors or LLC Managers** - At least 50% must be US citizens;  
**Off Premises(Liquor Store) Directors or LLC Managers** - All must be US citizens and a majority must be Massachusetts residents.
- If you are a Multi-Tiered Organization, please attach a flow chart identifying each corporate interest and the individual owners of each entity as well as the Articles of Organization for each corporate entity. Every individual must be identified in Addendum A.

Name of Principal	Residential Address	SSN	DOB
<input type="text" value="Michael Laird"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
<input type="text" value="President, Director and Shareholder"/>	<input type="text" value="33.33%"/>	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<input type="text" value="Matthew Kelly"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
<input type="text" value="Treasurer, Director and Shareholder"/>	<input type="text" value="33.33%"/>	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<input type="text" value="Hugh Leahy"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
<input type="text" value="Secretary, Director and Shareholder"/>	<input type="text" value="33.33%"/>	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
<input type="text"/>	<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
<input type="text"/>	<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Additional pages attached?  Yes  No

**CRIMINAL HISTORY**

Has any individual listed in question 6, and applicable attachments, ever been convicted of a State, Federal or Military Crime? If yes, attach an affidavit providing the details of any and all convictions.

Yes  No



## APPLICATION FOR A NEW LICENSE

### 6A. INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Does any individual or entity identified in question 6, and applicable attachments, have any direct or indirect, beneficial or financial interest in any other license to sell alcoholic beverages? Yes  No  If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality

### 6B. PREVIOUSLY HELD INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Has any individual or entity identified in question 6, and applicable attachments, ever held a direct or indirect, beneficial or financial interest in a license to sell alcoholic beverages, which is not presently held? Yes  No  If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality

### 6C. DISCLOSURE OF LICENSE DISCIPLINARY ACTION

Have any of the disclosed licenses listed in question 6A or 6B ever been suspended, revoked or cancelled? Yes  No  If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Date of Action	Name of License	City	Reason for suspension, revocation or cancellation

## 7. OCCUPANCY OF PREMISES

Please complete all fields in this section. Please provide proof of legal occupancy of the premises.

- If the applicant entity owns the premises, a deed is required.
- If leasing or renting the premises, a signed copy of the lease is required.
- If the lease is contingent on the approval of this license, and a signed lease is not available, a copy of the unsigned lease and a letter of intent to lease, signed by the applicant and the landlord, is required.
- If the real estate and business are owned by the same individuals listed in question 6, either individually or through separate business entities, a signed copy of a lease between the two entities is required.

Please indicate by what means the applicant will occupy the premises

Lease

Landlord Name The Dublin Group Realty Trust

Landlord Phone N/A

Landlord Email N/A

Landlord Address

Lease Beginning Date Purchase of Assets

Rent per Month \$3,500.00

Lease Ending Date July 31, 2026

Rent per Year \$42,000.00

Will the Landlord receive revenue based on percentage of alcohol sales?

Yes  No

## APPLICATION FOR A NEW LICENSE

### 8. FINANCIAL DISCLOSURE

A. Purchase Price for Real Estate	
B. Purchase Price for Business Assets	\$800,000.00
C. Other * (Please specify below)	
D. Total Cost	\$800,000.00

\*Other Cost(s): (i.e. Costs associated with License Transaction including but not limited to: Property price, Business Assets, Renovations costs, Construction costs, Initial Start-up costs, Inventory costs, or specify other costs):"

### SOURCE OF CASH CONTRIBUTION

Please provide documentation of available funds. (E.g. Bank or other Financial institution Statements, Bank Letter, etc.)

Name of Contributor	Amount of Contribution
Leahy Enterprises, LLC	\$53,333.00
Matthew Kelly	\$26,667.00
<b>Total:</b>	<b>\$80,000.00</b>

### SOURCE OF FINANCING

Please provide signed financing documentation.

Name of Lender	Amount	Type of Financing	Is the lender a licensee pursuant to M.G.L. Ch. 138.
Dean Bank	\$720,000.00	Term Loan	<input type="radio"/> Yes <input checked="" type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No

### FINANCIAL INFORMATION

Provide a detailed explanation of the form(s) and source(s) of funding for the cost identified above.

CraftRoots Inc. will be obtaining a \$720,000.00 loan from Dean Bank. Leahy Enterprises, LLC, which is owned by Hugh Leahy, a shareholder, director and secretary of CraftRoots, Inc., will be contributing \$53,333.00 and Matthew Kelly will be contributing \$26,667.00 to pay the \$80,000.00 additional required for the purchase of the business assets. Copies of the loan commitment letter and bank statements are attached.

### 9. PLEDGE INFORMATION

Please provide signed pledge documentation.

Are you seeking approval for a pledge?  Yes  No

Please indicate what you are seeking to pledge (check all that apply)  License  Stock  Inventory

To whom is the pledge being made?

## 10. MANAGER APPLICATION

### A. MANAGER INFORMATION

The individual that has been appointed to manage and control the licensed business and premises.

Proposed Manager Name  Date of Birth  /

Residential Address

Email  Phone

Please indicate how many hours per week you intend to be on the licensed premises

### B. CITIZENSHIP/BACKGROUND INFORMATION

Are you a U.S. Citizen?  Yes  No \*Manager must be a U.S. Citizen

If yes, attach one of the following as proof of citizenship US Passport, Voter's Certificate, Birth Certificate or Naturalization Papers.

Have you ever been convicted of a state, federal, or military crime?  Yes  No

If yes, fill out the table below and attach an affidavit providing the details of any and all convictions. Attach additional pages, if necessary, utilizing the format below.

Date	Municipality	Charge	Disposition

### C. EMPLOYMENT INFORMATION

Please provide your employment history. Attach additional pages, if necessary, utilizing the format below.

Start Date	End Date	Position	Employer	Supervisor Name
06/25/20	Present	Vice President	Duggan Mechanical Services Inc.	Len Monfredo
02/14/20	06/25/20	Vice President	Resource Lighting & Energy	Jay Benson
07/21/17	02/14/20	Vice President	RISE Engineering	Vin Graziano
07/26/16	07/21/17	Director of Operations	Energy Source Inc.	Tim Blanchard

### D. PRIOR DISCIPLINARY ACTION

Have you held a beneficial or financial interest in, or been the manager of, a license to sell alcoholic beverages that was subject to disciplinary action?  Yes  No If yes, please fill out the table. Attach additional pages, if necessary,utilizing the format below.

Date of Action	Name of License	State	City	Reason for suspension, revocation or cancellation

I hereby swear under the pains and penalties of perjury that the information I have provided in this application is true and accurate:

Manager's Signature  Date

Hugh J. Leahy Jr. (Mar 16, 2023 14:37 EDT)

APPLICANT'S STATEMENT

I,  the:  sole proprietor;  partner;  corporate principal;  LLC/LLP manager  
Authorized Signatory

of   
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:   
Michael Laird (Mar 16, 2023 14:36 EDT)

Date:

Title:

### ENTITY VOTE

The Board of Directors or LLC Managers of CraftRoots Inc.  
Entity Name

duly voted to apply to the Licensing Authority of Milford and the  
City/Town

Commonwealth of Massachusetts Alcoholic Beverages Control Commission on Mar 15, 2023  
Date of Meeting

For the following transactions (Check all that apply):

- |  |   |   |   |
|--|---|---|---|
| <input checked="" type="checkbox"/> New License                        | <input type="checkbox"/> Change of Location   | <input type="checkbox"/> Change of Class (i.e. Annual / Seasonal)         | <input 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/<br>Directors/LLC Managers | <input type="checkbox"/> Change of Ownership Interest<br>(LLC Members/ LLP Partners,<br>Trustees) | <input type="checkbox"/> Issuance/Transfer of Stock/New Stockholder       | <input type="checkbox"/> Change of Hours                              |
|  | <input type="checkbox"/> Other <span style="border: 1px solid black; padding: 2px;"> </span>      | <input type="checkbox"/> Change of DBA                                    |   |

“VOTED: To authorize Michael Laird  
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.”

“VOTED: To appoint Hugh Leahy  
Name of Liquor License Manager

as its manager of record, and hereby grant him or her with full authority and control of the premises described in the license and authority and control of the conduct of all business therein as the licensee itself could in any way have and exercise if it were a natural person residing in the Commonwealth of Massachusetts.”

A true copy attest,

Michael Laird

Michael Laird (Mar 16, 2023 14:36 EDT)

Corporate Officer /LLC Manager Signature

Michael Laird, President

(Print Name)

For Corporations ONLY

A true copy attest,

Hugh J. Leahy Jr.

Hugh J. Leahy Jr. (Mar 16, 2023 14:37 EDT)

Corporation Clerk's Signature

Hugh Leahy, Secretary

(Print Name)

March 28, 2023

**VIA EMAIL : [LPIRES@TOWNOFMILFORD.COM](mailto:LPIRES@TOWNOFMILFORD.COM)**

Town of Milford  
Select Board  
52 Main Street  
Milford, MA 01757  
Attn: Lena Pires, Assistant to Town Administrator

**Re: *CraftRoots Inc. – Applications for Section 19C(n) Farmer-Brewery Pouring Permit and Entertainment License A at 4 Industrial Road, Milford, MA***

Ms. Pires:

On behalf of CraftRoots Inc. (the “Applicant”), enclosed please find applications for a Section 19C(n) Farmer-Brewery Pouring Permit and Entertainment License at the above referenced property.

Craft Roots Brewing, LLC currently operates a Section 19C Farmer-Brewery at the above referenced property and holds a Section 19C(n) Farmer-Brewery Pouring Permit. The Applicant has entered into a purchase and sale agreement with Craft Roots Brewing, LLC to purchase the business and its assets and plans to commence operations at the above referenced property upon the grant of all applicable federal, state and local approvals and the closing of the transaction.

The Applicant has applied to the Massachusetts Alcoholic Beverages Control Commission (the “ABCC”) for a new Section 19C Farmer-Brewery License which is pending before the ABCC. The Applicant is applying for a Section 19C(n) Farmer-Brewery Pouring Permit, subject to the grant of the Section 19C Farmer-Brewery License by the ABCC. Enclosed with the Applicant’s application is a letter from the ABCC authorizing the Applicant to apply for the Section 19C Farmer-Brewery License and Section 19C(n) Farmer-Brewery Pouring Permit while Craft Roots Brewing, LLC remains in operation. Craft Roots Brewing, LLC will surrender its Section 19C Farmer-Brewery License and Section 19C(n) Farmer-Brewery Pouring Permit after the closing. The ABCC will be treating these applications effectively as a transfer of licenses and permits.

The Applicant intends to submit the workers compensation insurance certificate prior to the issuance of the Section 19C(n) Farmer-Brewery Pouring Permit by the Town of Milford.

Please file the enclosed applications with the Select Board and schedule these applications for a public hearing at the next available Select Board meeting.

Please contact me should you require any additional documentation or information. Thank you.

Very truly yours,

A handwritten signature in blue ink, appearing to read 'Mark A. Borenstein', with a long horizontal flourish extending to the right.

Mark A. Borenstein

March 14, 2023

**VIA EMAIL**

Alcoholic Beverages Control Commission  
95 Fourth Street, Suite 3  
Chelsea, MA 02150-2358  
Attn: Ralph Sacramone, Executive Director

Approved  
Jean M. Luzzio 3/15/23  
Cynthia M. [unclear] 3/15/23

**Re: CraftRoots Inc. – New Farmer-Brewery at 4 Industrial Road, Milford, MA**

Dear Mr. Sacramone,

Craftroots Brewing LLC ("CRB") currently holds a farmer-brewery license pursuant to M.G.L c. 138, §19C (FB-LIC-000128) and farmer series pouring permit in connection with the operation of a brewery at 4 Industrial Road, Milford, MA (the "Property"). Our client, CraftRoots Inc. ("CR"), has entered into an asset purchase agreement with CRB to purchase all of CRB's assets. We are assisting CR in the application for federal, state and local licensing/permitting to operate at the Property once the assets are purchased.

CRB and CR desire for CRB to remain in operation until the closing on the purchase of the assets. This desire to apply for federal, state and local licenses/permits while CRB remains in operations has created logistical issues for CR. Initially, CR applied to the Alcoholic and Tobacco Beverages Tax and Trade Bureau ("TTB") for a new brewer's notice to operate at the Property. However, the TTB would not allow the brewer's notice to be approved while an existing brewery remained in operation. The TTB informed CR that it would not approve the new brewer's notice until the transaction closed and there was a change in proprietorship as defined by the TTB. CR informed the TTB that it could not close on its financing to purchase the assets until it obtained all of the necessary federal, state and local licenses/permits. As a compromise, the TTB informed CR that it would issue the new brewer's notice on the day of the closing.

Given that CR does not have a new brewer's notice and requires federal, state and local licenses/permits to close its financing and the TTB will only issue the brewer's notice on the day of the closing, we respectfully request permission to apply for a new farmer-brewery license pursuant to M.G.L c. 138, §19C and a farmer-series pouring permit for sales at the Property on the condition that CR provide a copy of the new brewer's notice within forty eight (48) hours of the issuance by the TTB. We also respectfully request permission to allow for CRB to remain in operation while CR is applying for its new licenses/permits.



BOWDITCH

March 14, 2023  
Page 2

Please contact me should the Commission require any additional information to consider this request. Thank you.

Sincerely,

A handwritten signature in black ink, appearing to read 'Mark A. Borenstein', with a long horizontal stroke extending to the right.

Mark A. Borenstein

cc: CraftRoots Inc.



# MILFORD SELECT BOARD

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

508-634-2303 Fax 508-634-2324

[www.milfordma.gov](http://www.milfordma.gov)

## LICENSE APPLICATION

(CHECK ONE)

- APPLICATION FOR A NEW LICENSE
- TRANSFER OF AN EXISTING LICENSE
- AMENDMENT TO EXISTING LICENSE (Change of operating days/hours, change of location, etc.) *describe on reverse*

- |   |   |
|---|---|
| 1. <input type="checkbox"/> AUCTIONEER                          | 11. <input checked="" type="checkbox"/> LIVE ENTERTAINMENT ( <i>describe on reverse</i> )         |
| 2. <input type="checkbox"/> BOARDING HOUSE                      | 12. <input type="checkbox"/> AUTOMATIC AMUSEMENT<br>(Coin-Operated Games)                         |
| 3. <input type="checkbox"/> BOWLING ALLEY(S)                    | 13. <input type="checkbox"/> TRANSIENT VENDORS  |
| 4. <input type="checkbox"/> COMMON VICTUALLER                   | 14. <input type="checkbox"/> CARNIVAL/CIRCUS<br>Location: _____                                   |
| 5. <input type="checkbox"/> FORTUNE TELLER                      | 15. <input type="checkbox"/> CHRISTMAS TREE SALES   |
| 6. <input type="checkbox"/> HAWKERS/PEDDLERS                    | \$ <input type="checkbox"/> VALUE OF GOODS  |
| 7. <input type="checkbox"/> INNHOLDERS                          | 16. <input type="checkbox"/> CLASS I (NEW CARS)   |
| 8. <input type="checkbox"/> POOL TABLES                         | <input type="checkbox"/> CLASS II (USED CARS)   |
| 9. <input type="checkbox"/> 2 <sup>ND</sup> HAND/ANTIQUA DEALER | <input type="checkbox"/> CLASS III (JUNK CARS) - Public Hearing Required<br>(Describe on Reverse) |
| 10. <input type="checkbox"/> PAWNBROKER                         | 17. <input type="checkbox"/> WORKERS COMPENSATION IF NEEDED                                       |

**SEE ADDITIONAL INFORMATION REQUIRED BELOW**

**BUSINESS NAME:** CraftRoots Inc.

**BUSINESS ADDRESS:** 4 Industrial Drive, Milford, MA 01757

**DAYS/HOURS OF OPERATION** Monday through Saturday 11:00 AM - 11:00 PM, Sunday 12:00 PM - 11:00 PM  
(Some Sunday licenses may require approval of State DPS)

I/We, the undersigned, apply for this license in accordance with the provisions of all Statutes relating thereto. I/We further certify, under penalties of perjury, that, to the best of my/our knowledge and belief, I/We have filed all state tax returns and paid all state taxes required under law.

**NAME OF APPLICANT:** CraftRoots Inc.

**MAILING ADDRESS:** 4 Industrial Drive, Milford, MA 0757

**EMAIL ADDRESS:** mike@craftroots4good.org

**APPLICANT'S DATE OF BIRTH:** Date of Organization - November 14, 2022

020-68-9497 and 92-0869147  
Social Security No. (Mandatory) CraftRoots Inc. Federal Identification No. (Mandatory)

**APPLICANT'S SIGNATURE:** By: *Michael Laird* **DATE:** 03/16/2023  
(Individual or Corporate Officer)  
Michael Laird, President ( 508 ) 808-4274

Type or print name on this line CraftRoots Inc. Daytime Telephone Number 808-4274

**IMPORTANT:** Read this section carefully. Provide required information on reverse side. *Additional Information Required:*

**License # Above**

- 1 Provide copy of State and/or County Auctioneer's License
- 3, 8, 12 Indicate number of alleys, pool tables and number and types of coin-operated games
- 6, 9, 10, 13 Request Town By Laws, which states applicant's responsibility
- 6, 13 Describe in detail: type, quantity, and cost (to you) of goods to be offered for sale
- 11 Describe in detail: type of live entertainment to be licensed
- 14 Applicant must request and agree to abide by established policy

**CONTINUE APPLICATION PROCESS ON REVERSE SIDE OF THIS FORM**

**TRANSFERS:** Proposed new owner should complete application form. Current license holder must sign below, indicating agreement to transfer of license.

I/We, the undersigned, agree to the transfer of existing license(s) to the applicant named on the face of this form.

SIGNATURE \_\_\_\_\_ DATE: \_\_\_\_\_

\_\_\_\_\_ **AMENDMENTS:** specific changes desired should be explained below in detail.  
x \_\_\_\_\_ **LIVE ENTERTAINMENT:** explain below, times and location

CraftRoots Inc. will have the following entertainment:  
Live musical entertainment including single artists as well as full bands with multiple musicians and instruments, Recorded music, Streaming music, Juke Box music, TV's, Theatrical lighting, Disco style lighting and effects, Dancing, Dance instruction, Arts and craft nights and demonstrations and classes, Trivia night, Open mic night, Charity nights, Comedy nights, Tasting events, Karaoke, Social club meetings, Birthday Parties, Business social events.

**ADDITIONAL REQUIREMENTS:**

**\* This application must be returned with all required documents at least two weeks prior to a scheduled Selectmen's Meeting**

\*License will not be issued unless Tax Certification Clause is signed by the applicant.

\*License will not be issued unless all local (Town of Milford) taxes and assessments are paid by the business entity and/or all principals involved in the business activity.

\*License will not be issued without Workers Compensation Affidavit

\*Your social security number will be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing payment obligations. Licensees who fail to correct their non-filing or delinquency will be subject to license suspension or revocation. This request is made under the authority of Chapter 62A, Section 49A of the Massachusetts General Laws.



B-3  
4-24-23

## MILFORD SELECT BOARD

Room 11, Town Hall, 52 Main St. (Route 16), Milford, Massachusetts 01757-2679  
Phone 508-634-2303 Fax 508-634-2324

Paul A. Mazzuchelli, Chairman  
Michael K. Walsh  
Thomas J. O'Loughlin, Esq.

Richard A. Villani  
Town Administrator

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### TOWN OF MILFORD: NOTICE OF PUBLIC HEARING

Notice is hereby given that the Milford Select Board has received the following petition:

**PLAN NO.** 30739211  
**RECEIVED FROM:** Massachusetts Electric Company DBA National Grid  
**DESCRIPTION:** 39 Princeton Drive

Beginning at a point approximately 17 feet southeast of the centerline of the intersection of Yale Drive and Princeton Drive and continuing approximately 13 feet in a Southwest Direction. National grid to install anchor at Pole 14 Princeton Drive.

Also, for permission to lay and maintain underground laterals, cables and wires in the above or intersecting public ways for the purpose of making connections with such poles and buildings as each of said petitioners may desire for distributing purposes.

Your petitioner agrees to reserve space for one cross-arm at a suitable point on each of said poles for the fire, police, telephone, and telegraph signal wires belonging to the municipality and used by it exclusively for municipal purposes.

A Select Board meeting will be held on Monday April 24, 2023, 6:00 PM, Room 03 Milford Town Hall to discuss this petition.

Abutters are invited to attend this hearing and participate in the discussion if you wish to do so.

PER ORDER SELECT BOARD

Paul A. Mazzuchelli, Chairman  
Michael K. Walsh  
Thomas J. O'Loughlin, Esq.

cc: Massachusetts Electric  
dba National Grid  
Files  
April 10, 2023

Questions contact – Felix Aben #508-431-8162  
**PETITION FOR POLE AND WIRE LOCATIONS**

To the Board of Selectmen  
Of Milford, Massachusetts

Massachusetts Electric Company d/b/a NATIONAL GRID requests permission to locate poles, wires, and fixtures, including the necessary sustaining and protecting fixtures, along and across the following public way:

Princeton Drive- Beginning at a point approximately 17 feet Southeast of the centerline of the intersection of Yale Drive and Princeton Drive and continuing approximately 13 feet in a Southwest direction. National Grid to install anchor at Pole 14 Princeton Drive.

Location approximately as shown on plan attached.

Wherefore it prays that after due notice and hearing as provided by law, it be granted a location for and permission to erect and maintain poles and wires, together with such sustaining and protecting fixtures as it may find necessary, said poles to be erected substantially in accordance with the plan filed herewith marked – Princeton Drive - Milford, Massachusetts.

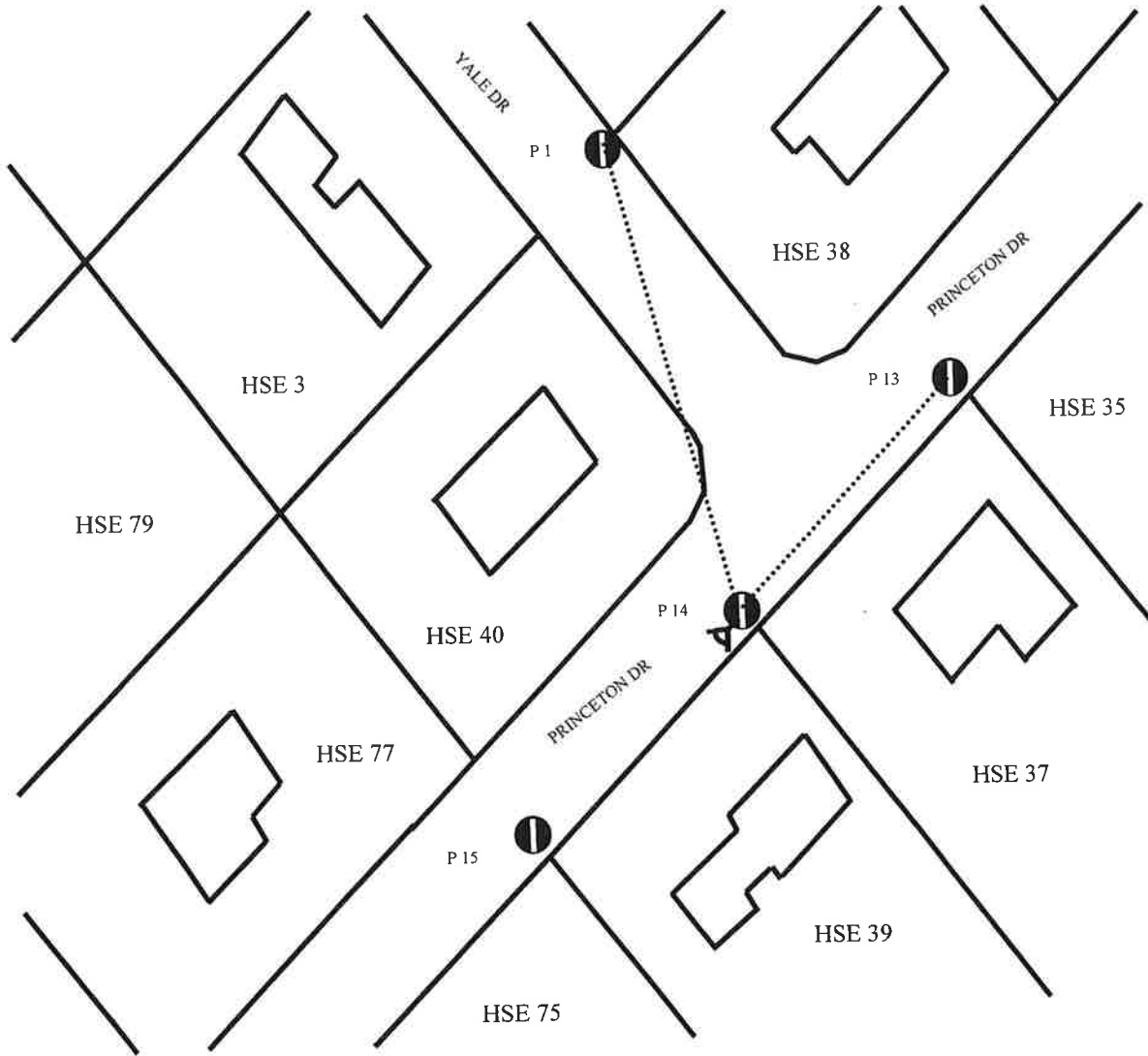
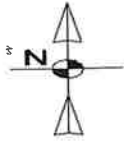
No.# 30739211

Also, for permission to lay and maintain underground laterals, cables, and wires in the above or intersecting public ways for the purpose of making connections with such poles and buildings as each of said petitioners may desire for distributing purposes.

Your petitioner agrees to reserve space for one cross-arm at a suitable point on each of said poles for the fire, police, telephone, and telegraph signal wires belonging to the municipality and used by it exclusively for municipal purposes.

Massachusetts Electric Company d/b/a  
NATIONAL GRID *Helton Lopes*  
BY \_\_\_\_\_  
Engineering Department

February 27, 2023



## ELECTRIC DISTRIBUTION PETITION

**Legend:**

Existing OH Pri Wire .....  
Existing JO Poles (circle with vertical line)

Proposed Anchor



# National Grid

Address: 39 Princeton Dr.  
Milford, MA 01757

**SKETCH TO ACCOMPANY PETITION  
FOR:** WR# 30739211

DATE: 02/16/2023

Drawn By: Felix Aben

DRAWING NOT TO SCALE. DISTANCES ARE APPROXIMATE.

B-4  
4-24-23

## DEPARTMENT HEAD REVIEW FORM

1. Name of Business: **99 West, LLC dba 99 Restaurant & Pub**  
2. Mailing Address: **196B East Main Street**  
Assessors ID#: **Map 32 Block 98 Lot 17D Zone IC**

3. Has applied for: **Amendment to Common Victualler All Alcohol Beverages License-Change of Officers and LLC Managers**

4. Current use: Restaurant

5. Selectmen will take action on: **Monday April 24, 2023**

6. Hearing Continued/Postponed/MGL Deadline: \_\_\_\_\_

7. Abutters Notified:   N/A   Published:   N/A  

8. Inquiry Sent To Dept. Heads on: **4/11/2023**

9. Please Respond By: **4/18/2023**

10. License Approved: \_\_\_\_\_ Denied: \_\_\_\_\_ Tabled: \_\_\_\_\_ On \_\_\_\_\_

.....  
**Building Commissioner:** (Zoning, Occupancy, Building/Handicap Access, Restroom Handicap Access, etc.) **CB Zone, Allowable use, Occupant Load 176, Building and Restrooms are accessible**

**Town Planner:** (Site Plan/Special Permit; Other Requirements/Stipulations) **Ok-no change of actual use**

**Tax Collector:** (Outstanding Taxes) **No outstanding taxes**

**Town Treasurer:** (Outstanding Tax Liens) **None**

**Fire Chief:** (Information/Comment) **No objections**

**Police Chief:** (Information/Comment) **No Issues**

Criminal Offense Record Info: (CORI) Approved  Disapproved

**Board of Health:** (Information/comment) **No issues**

**Dept. Head Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

.....



**APPLICATION FOR AMENDMENT-Change of Officers, Stock or Ownership Interest**

**Change of Officers/ Directors/LLC Managers**     **Change of Stock Interest**

- DOR Certificate of Good Standing
- DUA Certificate of Compliance
- Change of Officer/Directors Application
- CORI Authorization
- Vote of the Entity
- 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

(e.g. New Stockholders or Transfer or Issuance of Stock)

- DOR Certificate of Good Standing
- DUA Certificate of Compliance
- Change of Stock Application
- CORI Authorization
- Financial Statement
- Vote of the Entity
- Purchase & Sale Agreement
- Supporting Financial Records
- Advertisement (New Stockholder Only)\*
- 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 Ownership Interest**  
 (e.g. LLC Members, LLP Partners, Trustees etc.)

- DOR Certificate of Good Standing
- DUA Certificate of Compliance
- Change of Stock Application
- CORI Authorization
- Financial Statement
- Vote of the Entity
- Purchase & Sale Agreement
- Supporting Financial Records
- Advertisement (New Stockholder Only)\*
- 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

**Non-Profit Club Change of Officers/ Directors**

- DOR Certificate of Good Standing
- DUA Certificate of Compliance
- Change of Officer/Directors Application
- Vote of the club signed by an approved officer
- Business Structure Documents -**Articles of Organization** from the Secretary of the Commonwealth

**Management Agreement**

- DOR Certificate of Good Standing
- DUA Certificate of Compliance
- Management Agreement
- Vote of Entity

*\*If abutter notification and advertisement is required for transaction, please see the local licensing authority.*

**1. BUSINESS ENTITY INFORMATION**

Entity Name	Municipality	ABCC License Number
99 West, LLC	Milford	00068-RS-0706

Please provide a narrative overview of the transaction(s) being applied for. Attach additional pages, if necessary.

Wendy Harkness, Charles Noyes and Kurt Schnaubelt have left the company and are being removed as LLC Managers. Clint Lautenschlegar, Marjorie Nemzura, Phillip Purcell, Mark Spurgin, and Kara Jacobs are being added as new LLC Managers.

**APPLICATION CONTACT**

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

Name	Title	Email	Phone
Joseph H. Devlin	Attorney	jdevlin@ucdlaw.com	617-514-2828



# APPLICATION FOR AMENDMENT-Change of Officers, Stock or Ownership Interest

## **2. PROPOSED OFFICERS, STOCK OR OWNERSHIP INTEREST**

List all individuals or entities that will have a direct or indirect, beneficial or financial interest in this license (E.g. Stockholders, Officers, Directors, LLC Managers, LLP Partners, Trustees etc.). Attach additional page(s) provided, if necessary, utilizing Addendum A.

- The individuals and titles listed in this section must be identical to those filed with the Massachusetts Secretary of State.
- The individuals identified in this section, as well as the proposed Manager of Record, must complete a CORI Release Form.
- Please note the following statutory requirements for Directors and LLC Managers:  
**On Premises (E.g. Restaurant/ Club/Hotel) Directors or LLC Managers** - At least 50% must be US citizens;  
**Off Premises(Liquor Store) Directors or LLC Managers** - All must be US citizens and a majority must be Massachusetts residents.
- If you are a Multi-Tiered Organization, please attach a flow chart identifying each corporate interest and the individual owners of each entity as well as the Articles of Organization for each corporate entity. Every individual must be identified in Addendum A.

Name of Principal	Residential Address	SSN	DOB
W. Craig Barber			

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
LLC Manager, CEO, President	0%	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
Mark Spurgin			

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
LLC Manager	0%	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
Clinton Lautenschlegar			

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
LLC Manager	0%	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
Marjorie Nemzura			

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
LLC Manager, Secretary	0%	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
Phillip Purcell			

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
LLC Manager, Secretary	0%	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
Kara Jacobs			

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
LLC Manager	0%	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No

Additional pages attached?  Yes  No

**CRIMINAL HISTORY**  
 Has any individual listed in question 6, and applicable attachments, ever been convicted of a State, Federal or Military Crime? If yes, attach an affidavit providing the details of any and all convictions.  Yes  No

**MANAGEMENT AGREEMENT**  
 Are you requesting approval to utilize a management company through a management agreement? Please provide a copy of the management agreement.  Yes  No

**ADDENDUM A**

**6. Change of Officers, Stock or Ownership Interest (Continued...)**

List all proposed individuals or entities that will have a direct or indirect, beneficial or financial interest in this license (E.g. Stockholders, Officers, Directors, LLC Managers, LLP Partners, Trustees etc.).

Entity Name	Percentage of Ownership in Entity being Licensed (Write "NA" if this is the entity being licensed)
<input type="text" value="99 Restaurants, LLC"/>	<input type="text" value="100%"/>

Name of Principal	Residential Address	SSN	DOB	
<input type="text" value="Craig Barber"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
<input type="text" value="LLC Manager"/>	<input type="text" value="0%"/>	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No

Name of Principal	Residential Address	SSN	DOB	
<input type="text" value="Mark Spurgin"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
<input type="text" value="LLC Manager"/>	<input type="text" value="0%"/>	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No

Name of Principal	Residential Address	SSN	DOB	
<input type="text" value="Marjorie Nemzura"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
<input type="text" value="LLC Manager"/>	<input type="text" value="0%"/>	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No

Name of Principal	Residential Address	SSN	DOB	
<input type="text" value="Phillip Purcell"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
<input type="text" value="LLC Manager"/>	<input type="text" value="0%"/>	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No

Name of Principal	Residential Address	SSN	DOB	
<input type="text" value="Clinton Lautenschleger"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
<input type="text" value="LLC Manager"/>	<input type="text" value="0%"/>	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No

Name of Principal	Residential Address	SSN	DOB	
<input type="text" value="99 Restaurants Holdings, LLC"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
<input type="text" value="LLC Member"/>	<input type="text" value="100%"/>	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No

Name of Principal	Residential Address	SSN	DOB	
<input type="text" value="Kara Jacobs"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
<input type="text" value="LLC Manager"/>	<input type="text" value="0%"/>	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No

**CRIMINAL HISTORY**

Has any individual identified above ever been convicted of a State, Federal or Military Crime?  
If yes, attach an affidavit providing the details of any and all convictions.

Yes  No

**ADDENDUM A**

**6. PROPOSED OFFICERS, STOCK OR OWNERSHIP INTEREST (Continued...)**

List all individuals or entities that will have a direct or indirect, beneficial or financial interest in this license (E.g. Stockholders, Officers, Directors, LLC Managers, LLP Partners, Trustees etc.).

Entity Name	Percentage of Ownership in Entity being Licensed (Write "NA" if this is the entity being licensed)
<input type="text" value="ABRH, LLC"/>	<input type="text" value="0%"/>

Name of Principal	Residential Address	SSN	DOB	
<input type="text" value="Fidelity Newport Holdings"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
<input type="text" value="Member"/>	<input type="text" value="100%"/>	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
<input type="text"/>	<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
<input type="text"/>	<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
<input type="text"/>	<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
<input type="text"/>	<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
<input type="text"/>	<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
<input type="text"/>	<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

**CRIMINAL HISTORY**

Has any individual identified above ever been convicted of a State, Federal or Military Crime?  
If yes, attach an affidavit providing the details of any and all convictions.

<input type="radio"/> Yes <input checked="" type="radio"/> No
---

**ADDENDUM A**

**6. PROPOSED OFFICERS, STOCK OR OWNERSHIP INTEREST (Continued...)**

List all individuals or entities that will have a direct or indirect, beneficial or financial interest in this license (E.g. Stockholders, Officers, Directors, LLC Managers, LLP Partners, Trustees etc.).

Entity Name	Percentage of Ownership in Entity being Licensed (Write "NA" if this is the entity being licensed)
<input type="text" value="Newport Fidelity Holdings, LLC"/>	<input type="text" value="0%"/>

Name of Principal	Residential Address	SSN	DOB
<input type="text" value="Cannae Holdings, Inc."/>	<input type="text" value="publicly traded corp"/>	<input type="text"/>	<input type="text"/>
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
<input type="text" value="Member"/>	<input type="text" value="88.6%"/>	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
			MA Resident
			<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<input type="text" value="Newport Global Opp. Fund"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
<input type="text" value="Member"/>	<input type="text" value="9.9%"/>	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
			MA Resident
			<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<input type="text" value="Individuals &amp; entities"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
<input type="text" value="Member"/>	<input type="text" value="1.5%"/>	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
			MA Resident
			<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
<input type="text"/>	<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
			MA Resident
			<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
<input type="text"/>	<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
			MA Resident
			<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
<input type="text"/>	<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
			MA Resident
			<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
<input type="text"/>	<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
			MA Resident
			<input type="radio"/> Yes <input type="radio"/> No

**CRIMINAL HISTORY**

Has any individual identified above ever been convicted of a State, Federal or Military Crime? If yes, attach an affidavit providing the details of any and all convictions.	<input type="radio"/> Yes <input checked="" type="radio"/> No
---	---

# APPLICATION FOR AMENDMENT-Change of Officers, Stock or Ownership Interest

### **3. CURRENT OFFICERS, STOCK OR OWNERSHIP INTEREST**

List the individuals and entities of the current ownership. Attach additional pages if necessary utilizing the format below.

Name of Principal	Title/Position	Percentage of Ownership
Charles O. Noyes	LLC Manager, President	0%
Name of Principal	Title/Position	Percentage of Ownership
Kurt Schnaubelt	LLC Manager, CFO	0%
Name of Principal	Title/Position	Percentage of Ownership
Wendy Harkness	LLC Manager, CAO, Secretary	0%
Name of Principal	Title/Position	Percentage of Ownership
W. Craig Barber	LLC Manager, CEO	0%
Name of Principal	Title/Position	Percentage of Ownership
99 Restaurants of Massachusetts, LLC	LLC Member	100%
Name of Principal	Title/Position	Percentage of Ownership

### **4. INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE**

Does any individual or entity identified in question 6, and applicable attachments, have any direct or indirect, beneficial or financial interest in any other license to sell alcoholic beverages? Yes  No  If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality
See Exhibit A			

### **5. PREVIOUSLY HELD INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE**

Has any individual or entity identified in question 6, and applicable attachments, ever held a direct or indirect, beneficial or financial interest in a license to sell alcoholic beverages, which is not presently held? Yes  No  If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality
See Exhibit B			

### **6 DISCLOSURE OF LICENSE DISCIPLINARY ACTION**

Have any of the disclosed licenses listed in question 6A or 6B ever been suspended, revoked or cancelled? Yes  No  If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Date of Action	Name of License	City	Reason for suspension, revocation or cancellation
	See Exhibit C		

# Upton Connell & Devlin, LLP

Contact for Joseph H. Devlin, Esq.

171 High Street  
Newburyport, MA 01950  
617-514-2837  
617-514-2825

Main Office:

112 Water Street, Suite 201  
Boston, Massachusetts 02109  
617-227-3277 (Tel)  
617-227-3222 (Fax)

Town of Milford  
52 Main Street  
Milford, MA 01757

**Re: Change of Officer for the 99 Restaurant & Pub – Two Entities: 99 Restaurants of Boston, LLC (39 locations) and 99 West, LLC (22 locations)**

Dear License Administrator:

I am writing on behalf of the 99 Restaurants of Boston, LLC or 99 West, LLC, d/b/a The Ninety-Nine Restaurant (collectively the “Licensee”), one or both of which are licensed entities in your community owned by the same corporate structure.

Per the letter you received from the Massachusetts Alcoholic Beverage Control Commission (the “ABCC”), a copy of which is also enclosed, the “Licensee” has been granted preliminary approval for a Change of Officer relative to all 61 of their Massachusetts locations using the “inverted approval process”.

The Officer Change involves the appointment of Clinton Lautenschlegar, Marjorie Nemzura, Phillip Purcell, Mark Spurgin, and Kara Jacobs as LLC Managers, and the removal of Wendy Harkness as LLC Manager and Secretary, removal of Charles Noyes as LLC Manager and President, and removal of Kurt Schnaubelt as LLC Manager and CFO.

Due to the size of the transactions, the ABCC has reviewed and investigated the applications and found that the transaction is in compliance with M.G.L. Chapter 138. In addition to the LLA Form, please send the Application package and all other relative forms and documents back to the ABCC. **If you have any questions, you can call Investigator Brad Doyle at 617-727-3065, ext. 713.**

Enclosed please find the following documents relative to the transaction for your records:

1. Letter from Ralph Sacramone, Executive Director of the Alcohol Beverage Control Commission (the “ABCC”).
2. Municipality Filing Fee.
3. DOR and DUA Certificates.

3. Monetary Transmittal Form.
4. Retail alcoholic beverages application – change of officers.
5. CORI Request Forms for the new officers.
6. Proof of US Citizenship for the new officers.
7. Exhibits.
8. Certificate of Authorization.
9. Certificate of Organization.

We would appreciate you putting this on your next available meeting schedule. We will call shortly hereafter to follow up to confirm you've received our application and see if you need us to attend the meeting, though we are anticipating from past experiences that many communities will not require it.

We look forward to speaking and working with you again. If you should have any questions with regard to this Application, please feel free to call my associate, Elizabeth Pisano, at (860) 712-2799, or email her at [episano@ucdlaw.com](mailto:episano@ucdlaw.com).

Very truly yours,

*Joseph H. Devlin*

Joseph H. Devlin

E-1  
4-24-23



# **ANNUAL TOWN MEETING**

**MAY 22, 2023**

**MILFORD, MASSACHUSETTS**

**COMMONWEALTH OF MASSACHUSETTS**

**WORCESTER, SS:**

To either Constable of the Town of Milford in said County,

## **GREETINGS:**

In the name of the Commonwealth aforesaid, you are hereby required to notify and warn the inhabitants of the Town of Milford, qualified by law to vote in town affairs, to meet in the Upper Hall of the Milford Town Hall, 52 Main Street, on the 22<sup>nd</sup> day of May, 2023 A.D. at 7:00 P.M.

The Annual Town Meeting will, there and then, act upon the following articles:

**ARTICLE 1:** To hear and act upon reports of all Town officers and committees of the Town.



- 13 Director of Information Technology  
Finance Director\*  
Deputy Police Chief  
Human Resources Director  
Director of Sewer Operations  
Director of Water Operations\*
- 14 Police Chief\*  
Fire Chief\*  
Town Counsel\*
- 15 Town Administrator\*

**B COMPENSATION SCHEDULE – SALARIED POSITIONS**

Steps	Grade 7	Grade 8	Grade 9	Grade 10	Grade 11	Grade 12	Grade 13	Grade 14	Grade 15
1	63,681	68,457	73,591	87,550	94,116	101,175	108,763	116,920	149,976
2	66,157	71,119	76,453	90,955	97,776	105,109	112,993	121,467	155,809
3	68,634	73,781	79,315	94,359	101,436	109,044	117,222	126,014	161,641
4	71,110	76,444	82,176	97,765	105,096	112,979	121,452	130,561	167,474
5	73,586	79,106	85,039	101,169	108,757	116,913	125,682	135,108	173,306
6	76,063	81,768	87,900	104,574	112,416	120,848	129,912	139,655	179,139
7	78,540	84,430	90,763	107,978	116,077	124,782	134,141	144,202	184,970
8	81,016	87,093	93,624	111,383	119,736	128,717	138,371	148,748	190,803
9	83,493	89,754	96,486	114,787	123,397	132,652	142,600	153,296	196,635
10	85,969	92,417	99,348	118,193	127,057	136,586	146,831	157,842	202,468

**D COMPENSATION SCHEDULE – HOURLY RATED POSITIONS**

Steps	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5	Grade 6
1	23.11	24.84	26.71	28.72	30.16	32.42
2	24.01	25.81	27.75	29.83	31.33	33.68
3	24.92	26.78	28.79	30.95	32.51	34.95
4	25.81	27.75	29.83	32.06	33.68	36.20
5	26.71	28.72	30.87	33.19	34.86	37.47
6	27.60	29.67	31.91	34.30	36.03	38.73
7	28.51	30.64	32.94	35.41	37.20	39.99
8	29.41	31.61	33.98	36.53	38.38	41.25
9	30.30	32.58	35.02	37.65	39.55	42.51
10	31.21	33.55	36.06	38.77	40.72	43.78

**D1 COMPENSATION SCHEDULE – “OVER MAX” HOURLY RATED POSITIONS**

<u>GRADE</u>	<u>HOURLY SALARY</u>	<u>POSITION TITLE</u>	<u>EMPLOYEE NAME</u>
Grade 3	\$51.11	Water Office Manager/Accounting	Linda Grondin

<b>E</b>	<b>HOURLY NON-RATED POSITIONS</b>	<b>PER HOUR</b>
	Assistant Pool Manager PT	18.90
	Clerks/Seasonal – All Departments	20.04
	Clerks/Substitute – All Departments	20.04
	Dental Health Specialist	20.04
	Highway Seasonal Heavy Equipment Operator	31.70
	Highway Seasonal Light Equipment Operator	27.46
	Laborers/Seasonal PT: Parks, Cemetery, Other	15.00
	Laborers/PPT: Parks, Cemetery, Etc.	20.04
	Matrons/Police	20.04
	Milford Youth Center: Activities Coordinator PT	15.00
	Milford Youth Center: Front Desk Monitor PT	15.00
	Milford Youth Center: Supervising Coordinator PT	21.30
	Milford Youth Center: Camp Counselor	15.00
	Mosquito Spray Applicator/Control	19.33
	Pool Lifeguard PT	17.08
	Pool Manager PT	20.42
	Seasonal Public Health Nurse PT	21.54
	Soil Testing Assistant	17.80
	Student Police Officer	26.19
	Transfer Station Attendant	19.33
	Transfer Station Supervisor	20.04

**I. COMPENSATION SCHEDULE – YOUTH WORKS GRANT PROGRAM**

YouthWorks Tier 2 -Entry Level Placement	\$16.25
YouthWorks Tier 3 – Returning Students	\$17.50
YouthWorks Tier 4 – Continued Employment	\$18.75

or take any other action in relation thereto.

(Personnel Board)

**ARTICLE 3:** To see if the Town will vote to fix the salary and compensation of all elected officers of the Town, as provided by Section 108 of Chapter 41 of the General Laws, as follows:

	<b>FY 22</b>
Town Clerk	\$98,201.00
Assessor (Chairman)	\$ 8,874.00
Assessor (Members)	\$ 7,953.00
Highway Surveyor	\$115,282.00
Tree Warden	\$ 7,660.00
Select Board (Chairman)	\$10,113.00
Select Board (Members)	\$ 8,985.00
Board of Health (Chairman)	\$ 2,896.00
Board of Health (Members)	\$ 2,530.00
Sewer Commissioner (Chairman)	\$ 2,896.00
Sewer Commissioner (Members)	\$ 2,530.00
Park Commissioner (Chairman)	\$ 2,896.00
Park Commissioner (Members)	\$ 2,530.00
Planning Board (Chairman)	\$ 2,896.00
Planning Board (Members)	\$ 2,530.00
Moderator	\$ 2,783.00
Vernon Grove (Trustees)	\$4,303.00
Water Commissioners	\$5,562.00

(Select Board)

**ARTICLE 4:** To see if the Town will vote to raise and appropriate such sum or sums of money as may be necessary to defray expenses for the financial year beginning July 1, 2023, or take any other action in relation thereto.

(Select Board)

**ARTICLE 7:** To see if the Town will vote to transfer a sum of money, consistent with the funds raised from vending machines in the Milford School District, to be spent under the of the School Committee for the purpose of student activities not funded in the School Department budget, or take any other action in relation thereto.

(School Committee)

**ARTICLE 8:** To see if the Town will vote to raise and appropriate or transfer from available funds, a sum of money to fund the first two years of the Milford Police Department Collective Bargaining Agreement retroactive July 1, 2021, or take any other action in relation thereto.

(Select Board)

**ARTICLE 9:** To see if the Town will vote to raise and appropriate or transfer from available funds, a sum of money to fund the first year of the Fire Union Collective Bargaining Agreement retroactive July 1, 2022, or take any other action in relation thereto.

(Select Board)

**ARTICLE 10:** To see if the Town will vote to raise and appropriate or transfer from available funds, a sum of money to fund the first year of the Library Union Collective Bargaining Agreement retroactive to July 1, 2022, or take any other action in relation thereto.

(Select Board)

**ARTICLE 11:** To see if the Town will vote to rescind its vote under Article 21 of the May 21, 2007 Annual Town Meeting, which vote sought the relocation and alternation of Old Cedar Street, or take any other action in relation thereto.

(Select Board)

**ARTICLE 13:** To see if the Town will vote to grant the Select Board the authority to research, develop and participate in a contract, or contracts, to aggregate the electricity load of residents and businesses in the Town of Milford and for other related service, independently, or in joint action with other municipalities, retaining the right of individual residents and businesses to opt-out of the aggregation or take any other action in relation thereto.

(Select Board)

**ARTICLE 14:** To see if the Town will vote to raise and appropriate or transfer from available funds, a sum of money to be utilized to fund the Finance Director personal services contract, or take any other action in relation thereto.

(Select Board)

**ARTICLE 15:** To see if the Town will vote to authorize the Treasurer to withdraw \$2,000,000 from the Sewer Stabilization Account 83500 for the purpose of utilization to offset partial borrowing for the Field Pond Project, or take any other action in relation thereto.

(Town Treasurer)

**ARTICLE 16:** To see if the Town will vote to raise and appropriate or transfer from available funds, a sum of money to be utilized to fund the Town Administrator personal services contract, or take any other action in relation thereto.

(Select Board)

**ARTICLE 17:** To see if the Town will vote to amend the Zoning Bylaw relating to the Zoning Map and to the Water Resource Protection District Map as follows:

BY REPLACING in Section 2.1 Establishment of Districts the third paragraph of Subsection 2.1.1 with the following new paragraph:

“The boundaries of these districts are defined and bounded on the maps accompanying this By-Law entitled “Town of Milford Zoning Map, Updated October 2018” and “Town of Milford Water Resource Protection District, Updated May 2023” which maps and all explanatory matter thereon are hereby made a part of this By-Law and are on file with the Milford Town Clerk.”

AND BY ADDING in Section 7.4 Establishment and Delineation of Water Resource Protection District at the end of the first sentence of Sub-section 7.4.1. the words “Updated May 2023”.

AND BY DELETING in Section 7.4 Establishment and Delineation of Water Resource Protection District the last sentence of Sub-section 7.4.2.

AND IN ADDITION by replacing in Section 7.4 Establishment and Delineation of Water Resource Protection District the text of Sub-section 7.4.2(a) with the words “Where the boundaries of Water Resource Protection District 1 (WR1) do not coincide with said street or town lines, or are not locatable in any other way from the Water Resource Protection District Map, boundaries shall be determined by scale from the map.”

or take any other action related thereto.

(Planning Board)

- (3) The same notice, plans, and specifications required to be filed by an applicant under Massachusetts General Law, Chapter 131, Section 40, and 310 CMR 10 et seq., as amended, may be accepted as fulfilling the requirements of this bylaw. The said Commission, in its discretion, may hear any oral presentation under this bylaw at the same public hearing required to be held under the provisions of said Chapter 131, Section 40 of the Massachusetts General Laws.”

AND BY REPLACING in Section 4 Applications for Permits and Requests for Determination the second paragraph thereof with the following words:

“The application shall also include a Board of Assessors certified list of abutters within 100 feet of the subject property, for all filings except for Requests for Determination of Applicability. Where an abutter is a condominium complex or other multi-family property, the Commission or its agent shall have the authority to allow notification of the applicable units within 100 feet of the property or the Owners Association where such notification meets the intent of notifying abutters that may be affected by the work.”  
or take any other action in relation thereto.

(Conservation Commission)

**ARTICLE 20:** To see if the Town will vote to raise and appropriate or transfer from available funds, a sum of money to fund the first two (2) years of a Collective Bargaining Agreement with the Milford Waste Water Treatment Plant employees retroactive to July 1, 2021, or take any other action in relation thereto.

(Select Board)

**ARTICLE 21:** To see if the Town will vote to amend Article 34 of the Town of Milford General By-Laws regulating the use of Town of Milford Bicycle Paths, Trails, and Associated Areas to allow the use of electric bicycles (E-Bikes) and electric tricycles on bicycle paths in the Town of Milford and such other modifications to Article 34 including the deletion of references to “Rail Trails”, adding a helmet requirement for persons 16 years of age or younger, and adding a 15 mph speed limit for bicycles and authorized vehicles, said amendments to be as follows:

Add the following new Definitions to Section 1:

Electric Bicycle (E-Bike) – A pedal bicycle which has a helper motor.

Class 2 Electric Bicycle – An electric bicycle or tricycle equipped with a motor that may be used exclusively to propel the bicycle and that is not capable of providing assistance when the bicycle reaches the speed of 20 miles per hour.

strike the Definition of “Rail Trail”; and further, amend Section 3 as follows:

A. Change the title of Section 3 to “Regulations for Use of Bicycle Paths, Trails and Associated Areas”, and

B. Strike the current subsection a. and insert a new subsection a. as follows:

**ARTICLE 24:** To see if the Town will vote to raise and appropriate or transfer from available funds, a sum of money to be spent under the jurisdiction of the Select Board in order to complete the music/multi-purpose media center in the basement of the Milford Youth Center, or take any other action in relation thereto.

(Milford Youth Commission)

**ARTICLE 25:** To see if the Town will vote to amend the Personnel By-Laws by striking Section 3.10 and replacing it with a new Section 3.10 as follows:

“The starting rate for new hires shall be the minimum of the rate range for the position as classified. In some case, upon the recommendation of the appointing authority, the department head, and the Personnel Board, the new hire may start at a higher rate than the minimum, but not in excess of the maximum. Grade changes will only occur with a change of scope to the existing position and appropriate documentation must be submitted by the department head to the appointing authority, and must receive approval by Town Meeting”,

or take any other action in relation thereto.

(Personnel Board)

**ARTICLE 26:** To see if the Town will vote to raise and appropriate or transfer from available funds, a sum of money to be utilized with funds previously appropriated, to be spent under the jurisdiction of the Select Board for engineering, consulting, and legal expenses in relation to the cleanup of environmental hazard on town property off the Charles River Trail behind property of Benjamin Moore Company and Sumner Realty Trust, or take any other action in relation thereto.

(Select Board)

**ARTICLE 27:** To see if the Town will vote to raise and appropriate or transfer from available funds, a sum of money to be spent under the jurisdiction of the Select Board for purposes of planning and other activity necessary to the establishment of a dog park in Milford, and further to authorize said Board to apply for, receive and expend any available grant funds that may be available and necessary for the establishment of such dog park, or take any other action in relation thereto.

(Dog Park Study Committee)

**ARTICLE 28:** To see if the Town will vote to close out certain Special Article Accounts to the General Funds of the Town, or take any other action in relation thereto.

(Finance Director)

**ARTICLE 29:** To see if the Town will vote to transfer funds between certain line items voted under Article 4 of the May 23, 2022 Annual Town Meeting for the purpose of making funds available in line-item accounts not sufficiently funded through the end of Fiscal Year 2023, or take any other action in relation thereto.

(Finance Director)


A true copy attest:

  
Mark Calzolaio, Constable

Commonwealth of Massachusetts  
Worcester, ss.  
Milford

Date March 27, 2023.

By virtue of this warrant, I notified the legal voters of the Town of Milford to meet at the times and places and for the purposes within named as directed.

  
Mark Calzolaio,  
Constable of Milford



F-1  
4-24-23

## DEPARTMENT HEAD REVIEW FORM

1. Name of Business: **Fiesta Shows**  
2. Business Address: **32 Stard Rd.**  
**P.O. Box 460 Seabrook, NH 03875**

3. Has applied for: **CARNIVAL LICENSE-Fino Field**

4. Select Board will take action on: 4/24/2023

5. Hearing Continued/Postponed/MGL Deadline: \_\_\_\_\_

6. Abutters Notified: N/A Published: N/A

7. **Inquiry Sent To Dept. Heads on: 3/27/2023**

8. **Please Respond By: 4/5/2023**

9. License Approved: \_\_\_\_\_ Denied: \_\_\_\_\_ Tabled: \_\_\_\_\_ On \_\_\_\_\_

.....  
**Building Commissioner:** (Zoning, Occupancy, Building/Handicap Access, Restroom Handicap Access, etc.) **Industrial Zone, Allowable use with permit from Select Board, Occupancy and Accessibility Not Applicable as there is no building in use for this proposed event**

**Fire Chief:** (Information/Comment) **Approval with comments-see attached**

**Police Chief:** (Information/Comment) **One (1) Sergeant and four (4) Officers**

Criminal Offense Record Info: (CORI) Approved  Disapproved

**Board of Health:** (Information/comment) **No issues**

**Dept. Head Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

.....  
**Contact Name/Manager:** Eugene Dean **D.O.B** **SS #**

**Phone:** \_603/474/5424 **e-mail:** ejdean@msn.com



# MILFORD FIRE DEPARTMENT

21 BIRCH STREET  
MILFORD, MASSACHUSETTS 01757

MARK A. NELSON, CHIEF  
MICHAEL J. DETORE, DEPUTY

Telephone: 508-473-1214 • Fax: 508-473-4858 • Inspections: 508-473-2256

March 30, 2023

Richard A. Villani, Esq.  
Town Administrator  
52 Main Street  
Milford, Massachusetts 01757

RE: Carnival Proposal for Fino Field

Dear Attorney Villani,

Mr. Eugene Dean of Fiesta Shows submitted a site layout for a carnival at Fino Field. We corresponded by email and he provided further information.

- The fire lane width and design is in compliance. An interior loop with a constant minimum width of 25 feet exceeds the requirement of 24 feet.
- The tallest rides will be located on the north side of the field near the paved parking lot surface. This location will allow fire department ladder truck access to the rides. Mr. Dean stated these rides use gravity with controlled descent to grade level in the event of malfunction.

Prior to operation on the first day, inspections will be required and conducted for the following:

- Sleeping quarters of modified trailers, smoke and carbon monoxide alarms (if fossil fuel appliances present)
- Food services fire protection and kitchen ventilation systems
- Portable fire extinguishers
- Propane storage
- Diesel storage (diesel tanks are double-wall construction)

Mr. Dean will have two firefighters on detail during carnival operation Wednesday through Sunday.

Sincerely,

Mark A. Nelson



# MILFORD SELECT BOARD

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

508-634-2303

Fax 508-634-2324

[www.milfordma.gov](http://www.milfordma.gov)

## LICENSE APPLICATION

(CHECK ONE)

- APPLICATION FOR A NEW LICENSE
- TRANSFER OF AN EXISTING LICENSE
- AMENDMENT TO EXISTING LICENSE (Change of operating days/hours, change of location, etc.) *describe on reverse*

- |   |   |
|---|---|
| 1. <input type="checkbox"/> AUCTIONEER                          | 11. <input type="checkbox"/> LIVE ENTERTAINMENT ( <i>describe on reverse</i> )                    |
| 2. <input type="checkbox"/> BOARDING HOUSE                      | 12. <input type="checkbox"/> AUTOMATIC AMUSEMENT<br>(Coin-Operated Games)                         |
| 3. <input type="checkbox"/> BOWLING ALLEY(S)                    | 13. <input type="checkbox"/> TRANSIENT VENDORS  |
| 4. <input type="checkbox"/> COMMON VICTUALLER                   | 14. <input checked="" type="checkbox"/> CARNIVAL/CIRCUS<br>Location: <u>Fine Field</u>            |
| 5. <input type="checkbox"/> FORTUNE TELLER                      | 15. <input type="checkbox"/> CHRISTMAS TREE SALES   |
| 6. <input type="checkbox"/> HAWKERS/PEDDLERS                    | \$ <input type="checkbox"/> VALUE OF GOODS  |
| 7. <input type="checkbox"/> INNHOLDERS                          | 16. <input type="checkbox"/> CLASS I (NEW CARS)   |
| 8. <input type="checkbox"/> POOL TABLES                         | <input type="checkbox"/> CLASS II (USED CARS)   |
| 9. <input type="checkbox"/> 2 <sup>ND</sup> HAND/ANTIQUA DEALER | <input type="checkbox"/> CLASS III (JUNK CARS) - Public Hearing Required<br>(Describe on Reverse) |
| 10. <input type="checkbox"/> PAWNBROKER                         | 17. <input type="checkbox"/> WORKERS COMPENSATION IF NEEDED                                       |

*SEE ADDITIONAL INFORMATION REQUIRED BELOW*

BUSINESS NAME: Fiesta Shows

BUSINESS ADDRESS: 32 Stard Rd., Seabrook, NH 03874

DAYS/HOURS OF OPERATION July 26-30 Wed/Thu 6-10:30; Fri 6-11; Sat 1-11pm; Sun 1-8pm  
*(Some Sunday licenses may require approval of State DPS)*

I/We, the undersigned, apply for this license in accordance with the provisions of all Statutes relating thereto. I/We further certify, under penalties of perjury, that, to the best of my/our knowledge and belief, I/We have filed all state tax returns and paid all state taxes required under law.

NAME OF APPLICANT: Fiesta Shows - Eugene J. Dean

MAILING ADDRESS: P.O. Box 460, Seabrook, NH 03874

EMAIL ADDRESS: ejdeane@msn.com

APPLICANT'S DATE OF BIRTH: 02/10/1976

033-560650 and 02-0405446  
Social Security No. (Mandatory) Federal Identification No. (Mandatory)

APPLICANT'S SIGNATURE: Eugene J. Dean DATE: 3/23/23  
(Individual or Corporate Officer)

Eugene J. Dean (603) 474-5424  
Type or print name on this line Daytime Telephone Number

**IMPORTANT:** Read this section carefully. Provide required information on reverse side. *Additional Information Required:*

- License # Above
- 1 Provide copy of State and/or County Auctioneer's License
  - 3, 8, 12 Indicate number of alleys, pool tables and number and types of coin-operated games
  - 6, 9, 10, 13 Request Town By Laws, which states applicant's responsibility
  - 6, 13 Describe in detail: type, quantity, and cost (to you) of goods to be offered for sale
  - 11 Describe in detail: type of live entertainment to be licensed
  - 14 Applicant must request and agree to abide by established policy

**CONTINUE APPLICATION PROCESS ON REVERSE SIDE OF THIS FORM**



- Rides
  - Games / Food
  - Entrance Exit
  - Restrooms
  - Generator
  - Hydrant
  - Housing/Storage
  - 25' Fire Access
- 1 Fireball  
2 Giant Wheel

F-2  
4-24-23

## **LICENSE RENEWALS 2022**

### **RENEWAL OF SECONDHAND/ANTIQUA DEALER & PAWNBROKER LICENSES 2022**

Baza Jewelry and Gifts	196 East Main Street, Unit 48
Zelda's Closet	2 Central Street
Nathan's Jewelers	157 Main Street
TJ Cafe & Games	146 South Main Street

### **RENEWAL OF POOL TABLE LICENSES 2022**

Fun Zone of Milford LLC d/b/a Pinz	110 South Main Street
------------------------------------	-----------------------

### **RENEWAL OF BOWLING ALLEY LICENSE 2022**

Fun Zone of Milford LLC d/b/a Pinz	110 South Main Street
------------------------------------	-----------------------

F-3  
4-24-23

### MILFORD SELECT BOARD

Room 11, Town Hall, 52 Main St. (Route 16), Milford, Massachusetts 01757-2679  
508-634-2303 Fax 508-634-2324  
[www.milfordma.gov](http://www.milfordma.gov)

#### APPLICATION FOR A ONE DAY LIQUOR LICENSE PER MGL, C138, S14

#### APPLICANT/HOST INFORMATION:

Name or Organization: SAINT MARY'S PARISH

Type of Organization (Individual/Non-Profit Corp./For-Profit Corp.) NON-PROFIT

Organization Address: 17 WINTER ST MILFORD

#### DETAILS OF EVENT:

Type of Event (i.e. banquet/fundraiser/party) BANQUET/FUNDRAISER

Where will it be held PARISH CENTER HALL, 17 WINTER ST

Who owns the premises RC BISHOP OF WORCESTER Contact Day Time# 508-473-2000

Date(s) of Event SATURDAY, MAY 13, 2023

Hours of Event 4:00 pm - 12 Midnight

Expected # of people 300 Admission Charge \$30

Type of License: All Alcohol (*Non-Profits Only*) \$100  or Beer & Wine Only \$100

Alcohol will be sold or given away (check one) Sold  Given Away

Is the event open to the general public (check one) Yes  No

*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 Signature: Peter Jager

Applicant Cell Phone #: 774-230-0356

Applicant Email Address: frpeter@stmary.milford.org

Town Official Signature of Approval (if applicable) \_\_\_\_\_  
(If using a Town Facility)



F-4  
4-24-23

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## 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 Select Board Office at least **two weeks prior to date requested below.**

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

NAME OF ORGANIZATION SAINTE MARY OF THE ASSUMPTION PARISH  
 MAILING ADDRESS: 17 WINTER ST  
MILFORD MA

CONTACT PERSON: FR. PETER JOYCE PHONE # 774-230-0356

CHECK ONE:  
 PERMIT TO OVERHANG PUBLIC WAY (Article 13, Section 5) \$10.00 Fee  
 PERMIT TO OBSTRUCT A PUBLIC WAY (Article 12, Section 3) \$5.00 PER DAY Fee  
 PERMIT TO OBSTRUCT SIDEWALK (MERCHANDISE DISPLAY) (Article 13, Sec. 6) \$5.00 PER DAY Fee

DESCRIBE IN DETAIL WHAT YOU PLAN TO DO:  
 PROCESSION WITH STATUE TO REVIVE THE ROSARY IN HONOR OF OUR LADY OF THE CLOUD, A PATRONESS OF ECUADOR. COMMUNITY WILL HAVE A PICK TRUCK WITH A SOUND SYSTEM FOR THE ROSARY AND SONGS. WE WILL START AT THE PARISH CENTER WALK THROUGH OUR NEIGHBORHOOD TO ARRIVE AT CHURCH FOR 12 NOON MASS.

INDICATE EXACT LOCATION (Street(s) & Number(s), EXACT DAY(S) AND DATE(S), TIMES OF DAY, AND ALL OTHER RELEVANT INFORMATION: SUNDAY MAY 7, 2023  
 DEPART PARISH CENTER AT 11AM. FROM PARISH CENTER TURN ONTO SUMNER ST TOWARD MAIN ST. FOLLOW TO SPRUCE ST AND TAKE A RIGHT TO SCHOOL ST. FOLLOW SCHOOL AND TURN RIGHT TO DEARL ST. AT GRANITE ST TAKE A LEFT TO ARRIVE AT CHURCH

Peter Joyce \_\_\_\_\_ Date 4-19-23  
 Signature of person authorized to apply for permit

\_\_\_\_\_  
 Police Chief's Signature Date  
 Comments:



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4-24-23

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NAME OF ORGANIZATION SAINT MARY & THE ASSUMPTION PARISH

MAILING ADDRESS: 17 WINTER ST  
MILFORD MA

CONTACT PERSON: FR. PETER JOYCE PHONE # 774-230-0356

CHECK ONE:

- PERMIT TO OVERHANG PUBLIC WAY (Article 13, Section 5) \$10.00 Fee
- PERMIT TO OBSTRUCT A PUBLIC WAY (Article 12, Section 3) \$5.00 PER DAY Fee
- PERMIT TO OBSTRUCT SIDEWALK (MERCHANDISE DISPLAY) (Article 13, Sec. 6) \$5.00 PER DAY Fee

DESCRIBE IN DETAIL WHAT YOU PLAN TO DO:

PROCESSION WITH AN IMAGE OF OUR LADY OF FATIMA WITH CANDLES TO  
RECITE THE ROSARY AS IS DONE IN FAMIMA, PORTUGAL FOLLOWING A MASS  
IN HER HONOR AT CHURCH

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

FOLLOWING 7PM MASS, BETWEEN 8 AND 8:15 PM FRIDAY, MAY 12, 2023. LEAVE  
CHURCH HEADING SOUTH ON WINTER ST, TURN RIGHT AT MAIN STREET. TURN RIGHT  
AT PEARL ST, THEN RIGHT AT GRANITE ST. TO RETURN TO CHURCH

Peter Joyce  
Signature of person authorized to apply for permit

4-19-23  
Date

\_\_\_\_\_  
Police Chief's Signature

\_\_\_\_\_  
Date

Comments:



F-6  
4-24-23

CONTRACT AWARD

TOWN OF MILFORD

INVITATION FOR BIDS

DESCRIPTION – FUEL OIL BIDS

AWARDING AUTHORITY – SELECT BOARD

DATE – April 24, 2020

BIDDER NAME/ADDRESS

QUOTE AMOUNT

**1. DEVANEY ENERGY**

One Year per Gallon - **\$2.9423**

177 WELLS AVENUE, PO BOX 9120

Three year per Gallon - **\$2.9423**

NEWTON, MA 02459-9120

Contract Award - After reviewing the proposal the decision was made to award the Contract to **DEVANEY ENERGY** as the most responsible vendor, based upon their quote.

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4-24-23

**Release and Indemnification**

The Town of Milford, a municipal entity in the Commonwealth of Massachusetts, for good and valuable consideration the receipt of which is hereby acknowledged, does hereby fully remise, release and indemnify Rte. 85 Realty Corp., a corporation duly organized under the laws of the Commonwealth of Massachusetts, of and from all debts, demands, actions, causes of action, suits, accounts, covenants, agreements, physical and emotional personal injury, damages and any and all claims, demands and liabilities whatsoever of every name and nature, both in law and equity, which against the said Rte. 85 Realty Corp. and it's successors and assigns the Town of Milford now has, may have or ever had at any time related only to, but in any manner, the personnel of the Town of Milford Fire Department conducting and undergoing training exercises at 53-55 Medway Road in said Milford prior to the demolition and removal of the building(s) on said premises by Rte. 85 Realty Corp.

Signed this \_\_\_ day of April, 2023

The Town of Milford  
By:

Richard A. Villani, Town Administrator

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4-24-23

# Proclamation

**Whereas:** The Commonwealth of Massachusetts celebrates Arbor Day on the last Friday in April of each year; and

**Whereas:** On April 28, 2023, Massachusetts will observe another Arbor Day, giving its citizens an opportunity to plant trees and celebrate the gifts that community trees give all year long; and

**Whereas:** The Town of Milford recommits itself to its community streetscapes and forest, and seeks to become a better steward of its community trees; and

**Whereas:** Milford establishes trees as a priority for the Town and will endeavor to make good decisions about their care and management; and

**NOW THEREFORE,** be it resolved that we, Paul A. Mazzuchelli, Michael K. Walsh and Thomas J. O'Loughlin as Select Board Members of the Town of Milford, Massachusetts, proclaim Arbor Day, April 28, 2023 to be a day of celebration in our Town. On this day we shall be thoughtful of the role trees play in improving the quality of our neighborhoods, streets, yards, and lives and shall respect our trees as a great natural resource that contributes to the cycle of life.

In Witness Whereof, we hereby set our hands and cause the seal of the Town of Milford to be affixed this 24<sup>th</sup> day of April in the year of our Lord, Two Thousand Twenty-Three.

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**Paul A. Mazzuchelli, Chairman**

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**Michael K. Walsh**

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**Thomas J. O'Loughlin**

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4-24-23

Hi There

I have decided to pursue some other volunteer opportunities that I think are a better fit for where my family is right now. I have 3 active kiddos and would like to be more involved in their activities. In order to manage it all, I am going to resign from the YC board and take a more active role in other areas.

I am headed out for the weekend but will be back on Monday and will send you an official letter. Wanted to contact the two of you ASAP.

I admire all the work both of you have contributed on the board and to the success of our Youth Center. It truly is a wonderful place for the children of Milford. I am proud to have served.

Have a great weekend,

Michelle Stokes