

**Department of Public Safety  
Division**

**Liquor Licensing & Inspection**



Promise by any person that he or she can expedite a liquor license through influence should be completely disregarded. To avoid possible financial loss an applicant, or prospective applicant, should consult with the Division before making any substantial investment in an establishment that now is, or may be, attended by a liquor license.

BUREAU USE ONLY	
License No. Assigned:	
Class:	
Deposit Date:	
Amt. Deposited:	

PRESENT LICENSE EXPIRES 4/19/14

INDICATE TYPE OF PRIVILEGE:  MALT  SPIRITUOUS  VINOUS

INDICATE TYPE OF LICENSE:

- |                                                          |                                                                  |
|----------------------------------------------------------|------------------------------------------------------------------|
| <input type="checkbox"/> RESTAURANT (Class I,II,III,IV)  | <input checked="" type="checkbox"/> RESTAURANT/LOUNGE (Class XI) |
| <input type="checkbox"/> HOTEL-OPTIONAL FOOD (Class I-A) | <input type="checkbox"/> HOTEL (Class I,II,III,IV)               |
| <input type="checkbox"/> CLASS A LOUNGE (Class X)        | <input type="checkbox"/> CLUB-ON PREMISE CATERING (Class I)      |
| <input type="checkbox"/> CLUB (Class V)                  | <input type="checkbox"/> GOLF CLUB (Class I,II,III,IV)           |
| <input type="checkbox"/> TAVERN (Class IV)               | <input type="checkbox"/> OTHER: _____                            |

REFER TO PAGE 3 FOR FEE SCHEDULE

ALL QUESTIONS MUST BE ANSWERED IN FULL

1. APPLICANT(S) --(Sole Proprietor, Corporation, Limited Liability Co., etc.) <u>Bernath Kay</u> DOB: <u>3/14/58</u>			2. Business Name (D/B/A) <u>Club 302 LLC</u>		
<u>Club 302</u> DOB:					
			Location (Street Address) <u>165 Roosevelt Trail</u>		
Address <u>165 Roosevelt Trail</u>			City/Town <u>Windham</u>	State <u>Maine</u>	Zip Code <u>04062</u>
			Mailing Address <u>PO Box 388</u>		
City/Town <u>Windham</u>	State <u>ME</u>	Zip Code <u>04062</u>	City/Town <u>Windham</u>	State <u>ME</u>	Zip Code <u>04062</u>
Telephone Number <u>207-892-1302</u>	Fax Number <u>892-1308</u>	Business Telephone Number <u>207-892-1302</u>		Fax Number	
Federal I.D. # <u>26-3898479</u>			Seller Certificate #		

3. If premises are a hotel, indicate number of rooms available for transient guests: N/A
4. State amount of gross income from period of last license: ROOMS \$ \_\_\_\_\_ FOOD \$ 2 LIQUOR \$ \_\_\_\_\_
5. Is applicant a corporation, limited liability company or limited partnership? YES  NO

complete Supplementary Questionnaire, if YES

6. Do you permit dancing or entertainment on the licensed premises? YES  NO

7. If manager is to be employed, give name: Michael Brantier son

8. If business is NEW or under new ownership, indicate starting date: Tue Wed - 11-11 Thurs-Fri Sat 11-1 am

Requested inspection date: ASAP Business hours: \_\_\_\_\_

9. Business records are located at: \_\_\_\_\_

10. Is/are applicants(s) citizens of the United States? YES  NO

11. Is/are applicant(s) residents of the State of Maine? YES  NO

12. List name, date of birth, and place of birth for all applicants, managers, and bar managers. Give maiden name, if married:  
Use a separate sheet of paper if necessary.

Name in Full (Print Clearly)	DOB	Place of Birth
1. Kenneth Ray - Applicant	3/14/58	Lewiston, ME
2. Michael Beaulieu - mgr	3/10/66	Connecticut
3. Debra Emmons Bar mgr.	4/19/62	Emmons-Beaulieu Maine

Residence address on all of the above for previous 5 years (Limit answer to city & state)  
 1. Cumberland Falls, Windham? 2. Waterboro 3. All Maine

13. Has/have applicant(s) or manager ever been convicted of any violation of the law, other than minor traffic violations, of any State of the United States? YES  NO

Name: \_\_\_\_\_ Date of Conviction: \_\_\_\_\_  
Offense: \_\_\_\_\_ Location: \_\_\_\_\_  
Disposition: \_\_\_\_\_

14. Will any law enforcement official benefit financially either directly or indirectly in your license, if issued?  
Yes  No  If Yes, give name: \_\_\_\_\_

15. Has/have applicant(s) formerly held a Maine liquor license? YES  NO

16. Does/do applicant(s) own the premises? Yes  No  If No give name and address of owner: Kenneth Ray

17. Describe in detail the premises to be licensed: (Supplemental Diagram Required) Approx 10,000 SF of Commercial Space used for Sports Bar, Lounge, Pool, Restaurant

18. Does/do applicant(s) have all the necessary permits required by the State Department of Human Services?  
YES  NO  Applied for: \_\_\_\_\_

19. What is the distance from the premises to the NEAREST school, school dormitory, church, chapel or parish house, measured from the main entrance of the premises to the main entrance of the school, school dormitory, church, chapel or parish house by the ordinary course of travel? 1/4 Which of the above is nearest? Church

20. Have you received any assistance financially or otherwise (including any mortgages) from any source other than yourself in the establishment of your business? YES  NO   
If YES, give details: \_\_\_\_\_

The Division of Liquor Licensing & Inspection is hereby authorized to obtain and examine all books, records and tax returns pertaining to the business, for which this liquor license is requested, and also such books, records and returns during the year in which any liquor license is in effect.

NOTE: "I understand that false statements made on this form are punishable by law. Knowingly supplying false information on this form is a Class D offense under the Criminal Code, punishable by confinement of up to one year or by monetary fine of up to \$2,000 or both."

Dated at: Windham Maine on April 15, 20 14  
Town/City, State Date

Kenneth J. Ray  
Signature of Applicant or Corporate Officer(s)

Please sign in blue ink

\_\_\_\_\_  
Signature of Applicant or Corporate Officer(s)

STATE OF MAINE  
Liquor Licensing & Inspection Unit  
164 State House Station  
Augusta, Maine 04333-0164  
Tel: (207) 624-7220 Fax: (207) 287-3424

**SUPPLEMENTARY QUESTIONNAIRE FOR CORPORATE APPLICANTS, LIMITED LIABILITY COMPANIES AND LIMITED PARTNERSHIPS**

1. Exact Corporate Name: Club 302 LLC  
 Business D/B/A Name: Club 302
2. Date of Incorporation: 12/17/2008
3. State in which you are incorporated: Maine
4. If not a Maine Corporation, date corporation was authorized to transact business within the State of Maine:  
 \_\_\_\_\_

5. List the name and addresses for previous 5 years, birth dates, titles of officers, directors and list percent of stock owned:

Name	Address Previous 5 Years	Birth Date	% of Stock	Title
Kenneth Ray	57 Foreside Rd. Cumberland, ME 04110	3/14/58	100%	Owner

6. What is the amount of authorized stock? 100 Outstanding Stock? \_\_\_\_\_
7. Is any principal officer of the corporation a law enforcement official? ( ) YES (X) NO
8. Has applicant(s) or manager ever been convicted of any violation of the law, other than a minor traffic violation(s), of the United States? ( ) YES (X) NO.
9. If yes, please complete the following: Name: \_\_\_\_\_

Date of Conviction: \_\_\_\_\_ Offense: \_\_\_\_\_

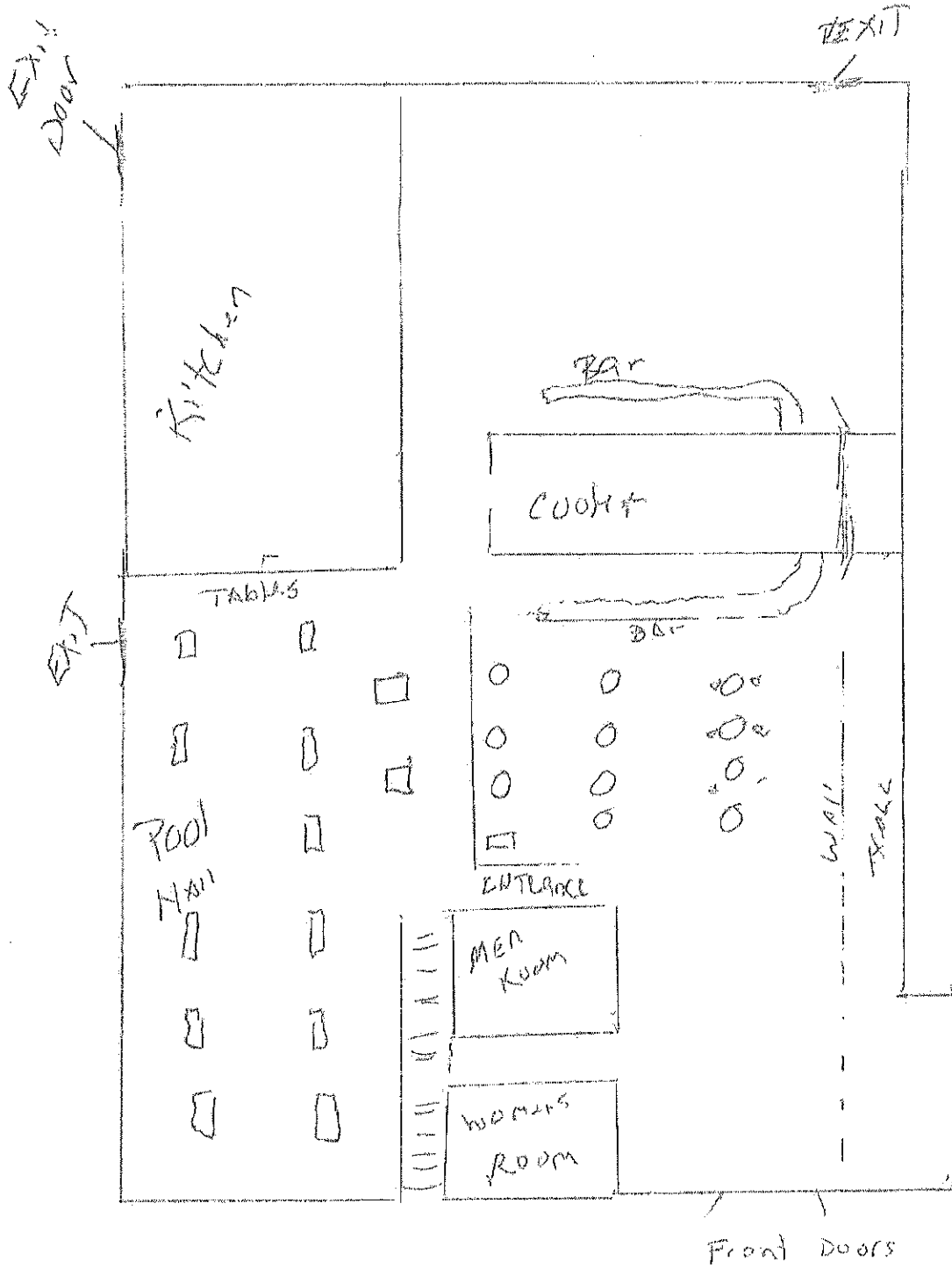
Location: \_\_\_\_\_ Disposition: \_\_\_\_\_

Dated at: \_\_\_\_\_ City/Town \_\_\_\_\_ On: \_\_\_\_\_ Date \_\_\_\_\_

Kenneth J. Ray Date: 4/15/14  
 Signature of Duly Authorized Officer

\_\_\_\_\_  
 Print Name of Duly Authorized Officer

PREMISE DIAGRAM



TOWN OF WINDHAM  
ADDENDUM TO LIQUOR LICENSE APPLICATION

Applicant: Club 302

REVIEW BY POLICE CHIEF

I have made a search of our records for police contacts with the above listed Applicant and find:

\_\_\_\_\_ No remarkable incidents during the past 12 months that would jeopardize a liquor license application.

\_\_\_\_\_ I request permission to personally address the Town Council for public record. (Relevant materials attached)

Signed: See Attached Report Date: \_\_\_\_\_

REVIEW BY COMMUNITY DEVELOPMENT DIRECTOR

✓  
\_\_\_\_\_ The applicant's establishment is in conformance with The Town's Land Use Code and has an occupancy permit

\_\_\_\_\_ I request permission to personally address the Town Council For public record. (Relevant materials attached)

Signed: [Signature] Date: 4/15/14

MEMO

TO: Tony Plante, Town Manager  
FROM: Rick Lewsen, Police Chief *RBL*  
SUBJ: Kenneth S. Ray DBA Club 302 LLC/ liquor license hearing  
CC: Linda Morrell, Town Clerk  
DATE: April 30, 2014

**Recommendation:**

I recommend, the Windham Town Council approve a liquor license for Club 302 at 765 Roosevelt Trail, Windham.

**Background checks:**

Primary applicant/owner: Kenneth S. Ray  
Mr. Kenneth S. Ray is the primary liquor license applicant/owner of Club 302.  
No criminal record, no remarkable traffic record.

Manager: Michael Beaulier  
Mr. Beaulier has a considerable amount of experience managing Club 302.  
No criminal record, no remarkable traffic record.

Bar Manager: Debra J. Emmons  
Mrs. Debra Emmons has limited experience as a bartender at Club 302.  
Michael Beaulier hired his sister Debra Emmons for her organizational skills. Emmons has 15 years experience managing offices in the medical field.  
No criminal record, no remarkable traffic record.