

**TOWN OF WINDHAM**  
**ADDENDUM TO LIQUOR LICENSE APPLICATION**

Applicant: Ruggiero's Pizza

**REVIEW BY POLICE CHIEF**

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

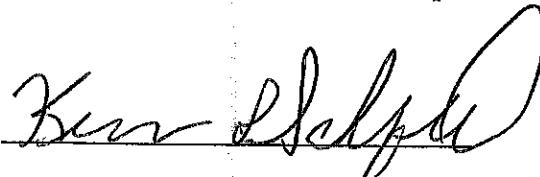
X

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:



Date: 12-8-15

**REVIEW BY COMMUNITY DEVELOPMENT DIRECTOR**

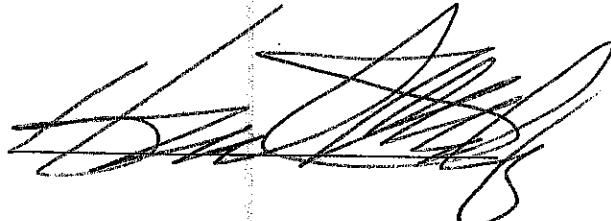
X

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:



Date: 12/8/15

**Department of Public Safety  
Division**

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.



**Liquor Licensing & Inspection**

**BUREAU USE ONLY**

License No. Assigned:

Class:

Deposit Date:

Amt. Deposited:

PRESENT LICENSE EXPIRES 12-8-2015

INDICATE TYPE OF PRIVILEGE:  MALT  SPIRITUOUS  VINOUS

INDICATE TYPE OF LICENSE:

RESTAURANT (Class I,II,III,IV)  
 HOTEL-OPTIONAL FOOD (Class I-A)  
 CLASS A LOUNGE (Class X)  
 CLUB (Class V)  
 TAVERN (Class IV)

RESTAURANT/LOUNGE (Class XI)  
 HOTEL (Class I,II,III,IV)  
 CLUB-ON PREMISE CATERING (Class I)  
 GOLF CLUB (Class I,II,III,IV)  
 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.) <i>JOSEPH Ruggiero</i>		2. Business Name (D/B/A) <i>Ruggieros Pizzaz</i>	
DOB: <i>11/11/64</i>		DOB: _____	
Address <i>7 Washoull Way</i>		Location (Street Address) <i>106 Main St.</i>	
City/Town <i>Windham</i>		State <i>ME</i>	Zip Code <i>04062</i>
Mailing Address <i>Windham ME 04062</i>		City/Town State Zip Code	
Telephone Number <i>207-653-4422</i>		Fax Number Business Telephone Number Fax Number	
Federal I.D. # <i>410-3666194</i>		Seller Certificate # <i>1165-134</i>	

3. If premises are a hotel, indicate number of rooms available for transient guests: \_\_\_\_\_

4. State amount of gross income from period of last license: ROOMS \$ \_\_\_\_\_ FOOD \$ 200,000 LIQUOR \$ 10,000

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: \_\_\_\_\_

8. If business is NEW or under new ownership, indicate starting date: \_\_\_\_\_

Requested inspection date: \_\_\_\_\_ 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
JOSEPH ANTHONY RUGGIERO II	11/1/62	wayne county, NY

Residence address on all of the above for previous 5 years (Limit answer to city & state)

Windham ME

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: \_\_\_\_\_

MICHAEL HARRIS River Rd. Windham

17. Describe in detail the premises to be licensed: (Supplemental Diagram Required) \_\_\_\_\_

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 mile Which of the above is nearest? \_\_\_\_\_

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: owner financing

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 ME on 8-7-15, 2015  
Town/City, State Date

Please sign in blue ink

Signature of Applicant or Corporate Officer(s)

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: Sole Proprietor

Business D/B/A Name: Ruggieras Pizz

2. Date of Incorporation: n/a

3. State in which you are incorporated: \_\_\_\_\_

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
<u>Joseph Ruggiero</u>	<u>7 Washout way</u> <u>Windham</u>	<u>1/1/64</u>		

6. What is the amount of authorized stock? \_\_\_\_\_ Outstanding Stock? \_\_\_\_\_

7. Is any principal officer of the corporation a law enforcement official? ( ) YES  NO

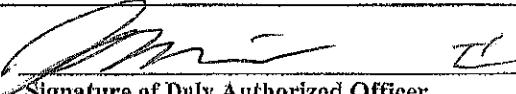
8. Has applicant(s) or manager ever been convicted of any violation of the law, other than a minor traffic violation(s), of the United States? ( ) YES  NO

9. If yes, please complete the following: Name: \_\_\_\_\_

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

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

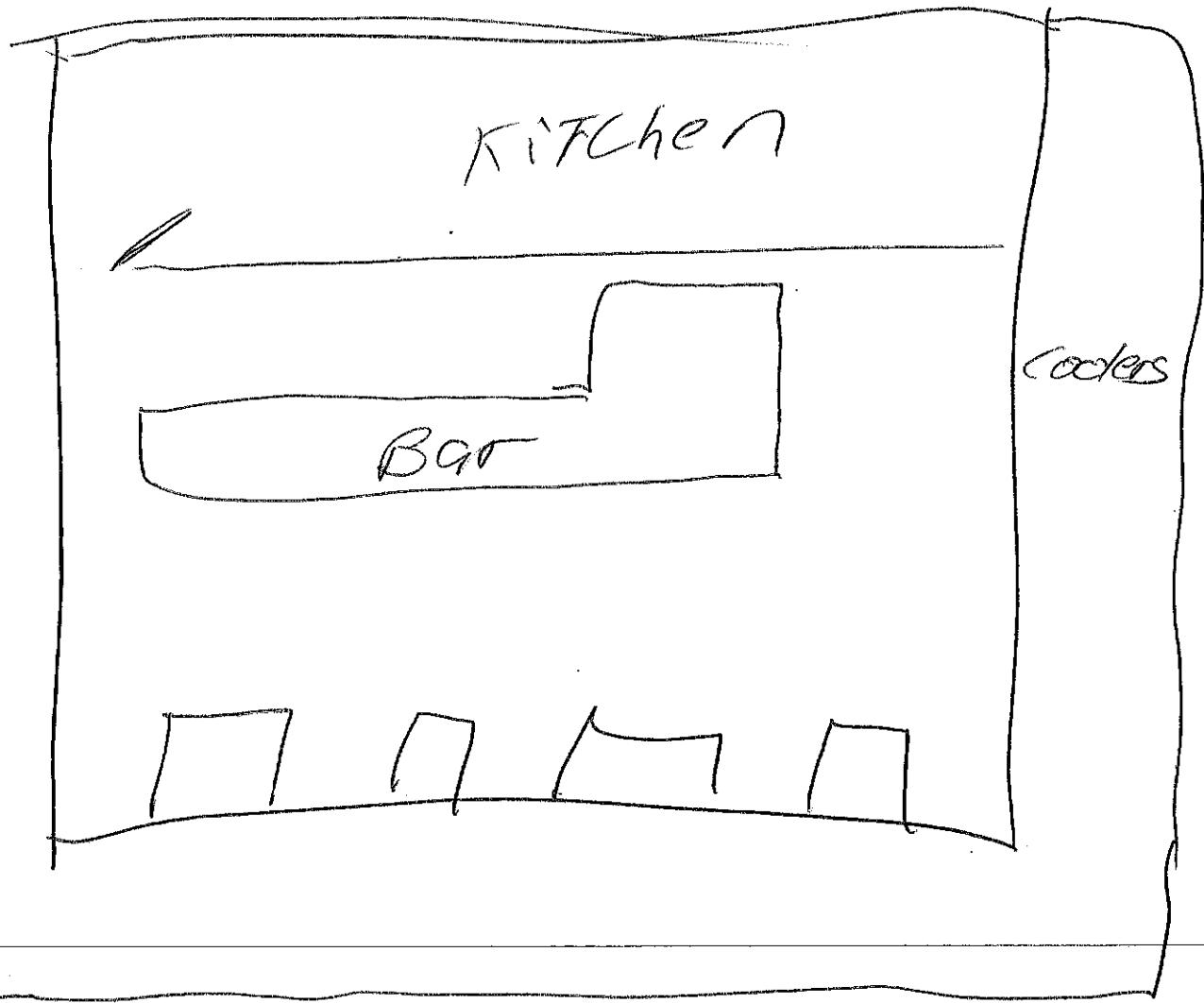
Dated at: \_\_\_\_\_ On: \_\_\_\_\_  
City/Town \_\_\_\_\_ Date \_\_\_\_\_

  
Signature of Duly Authorized Officer

Date: 12-7-15

Joseph Anthony Ruggiero  
Print Name of Duly Authorized Officer

PREMISE DIAGRAM



cash