

TOWN OF WINDHAM  
ADDENDUM TO LIQUOR LICENSE APPLICATION

Deck House Sports Tavern  
Formerly Seacoast Fun Park  
Applicant: Seacoast Fun Park

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: R. Don J.

Date: 11/24/2014

REVIEW BY COMMUNITY DEVELOPMENT DIRECTOR

\_\_\_\_\_

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

X

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

Signed: Debra McNeil / DSM

Date: 12-3-14

**BUREAU OF ALCOHOLIC BEVERAGES  
DIVISION OF LIQUOR LICENSING & ENFORCEMENT  
164 STATE HOUSE STATION  
AUGUSTA, ME 04333-0164**



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.

DEPARTMENT USE ONLY	
LICENSE NUMBER:	CLASS:
DEPOSIT DATE	
AMT. DEPOSITED:	BY:
CK/MO/CASH:	

PRESENT LICENSE EXPIRES 12/11/2014

INDICATE TYPE OF PRIVILEGE:  MALT  SPIRITUOUS  VINOUS

INDICATE TYPE OF LICENSE:

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> RESTAURANT (Class I,II,III,IV) | <input type="checkbox"/> RESTAURANT/LOUNGE (Class XI)       |
| <input type="checkbox"/> HOTEL-OPTINONAL 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>ROY A MOORE</u> DOB: <u>2/19/55</u>	2. Business Name (D/B/A) (formerly Seacoast Snow Park) <u>Deck House Sports Tavern at</u>
DOB: _____	<u>R.A. Moore, Construction, Inc</u>
DOB: _____	Location (Street Address) <u>930 Roosevelt Trl.</u>
Address <u>960 Roosevelt Trl.</u>	City/Town <u>Windham</u> State <u>ME</u> Zip Code <u>04062</u>
	Mailing Address <u>PO Box 620</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>207-756-4624</u> Fax Number _____	Business Telephone Number <u>207-892-5952</u> Fax Number <u>207-892-1324</u>
Federal I.D. # <u>01-0444819</u>	Seller Certificate # _____

3. If premises is a hotel, indicate number of rooms available for transient guests: N/A
4. State amount of gross income from period of last license: ROOMS \$ NA FOOD \$ \_\_\_\_\_ LIQUOR \$ 0
5. Is applicant a corporation, limited liability company or limited partnership? YES  NO

If YES, complete Supplementary Questionnaire

6. Do you permit dancing or entertainment on the licensed premises? YES  NO
7. If manager is to be employed, give name: Ginny Davis
8. If business is NEW or under new ownership, indicate starting date: Feb 1, 2015  
Requested inspection date: Jan 30 2014 Business hours: Mon-Sun 11am-10pm
9. Business records are located at: 930 Roosevelt Trail, Windham, 04062

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
Roy A Moore	02/19/55	Portland, ME
Ginny C Davis	08/26/79	Monticello, IN

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

1) Windham, ME

2) 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: \_\_\_\_\_

17. Describe in detail the premises to be licensed: (Supplemental Diagram Required) Deck House Sports Tavern at Seacoast Adventure

18. Does/do applicant(s) have all the necessary permits required by the State Department of Human Services? YES  NO  Applied for: New Building/Remodel - Inspector Requested us to reapply

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? 44 mi 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, ME on Nov 19, 20 14

Ginny C Davis  
Signature of Applicant or Corporate Officer(s)

Ginny C Davis, General Mgr  
Print Name

Please sign in blue ink

Roy A Moore  
Signature of Applicant or Corporate Officer(s)

Roy A Moore  
Print Name

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

1. Exact Corporate Name: RA Moore Construction, Inc  
 Business D/B/A Name: Seacoast Snow Park  
 2. Date of Incorporation: 1989  
 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
Roy A. Moore	960 Roosevelt St.	9/19/55	100	Pres

6. What is the amount of authorized stock? 100 Outstanding Stock? 0  
 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 \_\_\_\_\_

Roy A. Moore, Pres Date: 11/14/14  
 Signature of Duly Authorized Officer  
Roy A. Moore, Pres.  
 Print Name of Duly Authorized Officer

