



Town of Windham
8 School Rd, Windham ME, 04062

Chapter 87

APPLICATION FOR MOBILE FOOD SERVICE UNIT LICENSE

☒ NEW ☐ RENEWAL TEMPORARY 1 OR 2 DAY

TEMPORARY LICENSES MUST APPLY AT LEAST 10 BUSINESS DAYS IN ADVANCE OF EVENT

Name of Business Herri's One Night Stand/Wicked Smalls Chouco CATT
Business Mailing Address 25 Neal Road Windham, ME
Owner's Name Herri Aguiar DOB 7/15/1974
Owner's Mailing Address 25 Neal Road Windham, ME 04062
Owner's Phone 508-837-1651 Operator's Phone 508-837-1651
E-Mail klagg541@gmail.com Website in process

Please check where you would like your license Mailed: (Facebook: Wicked Smalls Chouco CATT)

☒ Owner's Mailing Address

☐ Business Mailing Address

**** Mobile Food Service Unit Licenses expire on May 31 of each year. ****

Type of License: ☒ Mobile Food Unit (\$100) ☐ Pushcart (\$50) ☐ Temporary (\$50)

There is a \$20 (per person) background check fee for all licenses.

Vehicle Make & Color

Red Toyota Tacoma (6x12 Trailer)

License Plate #

395-HMS

VIN

3TMCZ5AN4HM Red

Sites where MFSU will operate

Maverick Cannabis Co. 090496

Rt. 302 2 maverick lane, Windham, ME 04062

Have you ever been convicted of a criminal offense which was punishable by imprisonment for more than one year? ☐ Yes ☒ No

If yes, what was the offense?

Please attach the following:

- A. Signed release form (for each employee and owner)
- B. Copy of your Dept. of Human Services License
- C. Picture of Vehicle
- D. List of items to be sold
- E. Certificate of insurance as required by Sect 7 of the Mobile Food Service Unit Ordinance
- F. Site plan drawing
- G. Letter of permission from owner of property
- H. List each of your currently permitted places for your Food Truck or Pushcart

Trailer VIN#

4D6EB1417SA

050288

Trailer - License Plate

#C505970

Notice to Applicant

Please take notice that if the Municipal Officers grant this license, you must still comply with all the requirements of the provisions of the Town's Land Use Ordinance, Health Code, and all other municipal ordinances, codes, and regulations. It is your responsibility to investigate the applicability of these requirements to your proposed use.

6/26/25

Date

Herri Aguiar
Applicant, Acknowledgement of Receipt

Please return all paperwork & fees to: Town Clerk, 8 School Road, Windham, ME 04062

EST ID: 32921
EATING PLACE - MOBILE

WICKED SMAHHT CHOURICO CART
139 SEARSPORT AVE
BELFAST ME 04915

EXPIRES: 06/24/2026

FEE: \$270.00

ATTN KERRI AGUIAR
KERRI'S ONE NIGHT STAND LLC
WICKED SMAHHT CHOURICO CART
25 NEAL RD
WINDHAM ME 04062



Commissioner

Employers must establish a written smoking policy that prohibits smoking in any business facility, including in vehicles used for work, and in outdoor areas where employees perform services under the control of the employer. Smoking in workplaces shall only be permitted outdoors. Employers shall only permit employer and employees to smoke outside within a Designated Smoking Area that is at least 20 feet away from the business facility and designed in a way to prevent smoke from escaping back into a workplace, public place or other areas where smoking is prohibited.

Eating Establishments shall prohibit smoking in outdoor eating areas and all enclosed areas of public places. Smoking includes the use of electronic smoking devices, whether or not they contain nicotine.

Tobacco Retailers are required to card all persons 30 years of age or younger by photographic identification that contains the persons date of birth. Tobacco products may not be sold to any person under 21 years of age unless the person obtained 18 years of age on or before July 1, 2018. Tobacco products include, but not limited to, a cigarette, a cigar, a hookah, pipe tobacco, chewing tobacco, snuff or snus, electronic smoking devices, and any component or accessory used in the consumption of a tobacco product, such as filters, rolling papers, pipes and liquids used in electronic smoking devices, whether or not they contain nicotine.

For free guidance regarding Maine's retail tobacco and workplace smoking laws, please contact the Maine CDC Tobacco and Substance Use Prevention and Control program at tsup.dhhs@maine.gov or call 207-287-4627.

ATTN KERRI AGUIAR
KERRI'S ONE NIGHT STAND LLC
WICKED SMAHHT CHOURICO CART
25 NEAL RD
WINDHAM ME 04062

Owner: KERRI'S ONE NIGHT STAND LLC
Licensee: **WICKED SMAHHT CHOURICO CART**
Location: 139 SEARSPORT AVE
BELFAST
ATTN KERRI AGUIAR
Mail: 25 NEAL RD

WINDHAM ME 04062
Lic Type: **EATING PLACE - MOBILE**

ISSUED: 06/24/2025
EXPIRES: 06/24/2026
FEE: \$270.00
TEL: 505-837-1651

Est ID: 32921

StateFoodSafety

A CERTUS COMPANY



StateFoodSafety

FOOD MANAGER CERTIFICATION

PRESENTED TO

Kerri Aguiar

for successfully completing the StateFoodSafety Food Protection Manager Certification Exam.

This exam is accredited by the ANSI National Accreditation Board (ANAB).

May 30, 2025

DATE OF ISSUANCE

Valid five (5) years from date of issuance.



2022ki-k834cb1

VERIFICATION NUMBER

Verify certificate online at
www.statefoodsafety.com/Verify



VERIFICATION CODE

Use any QR code reader on a
mobile device to verify.

47

EXAMINATION FORM

John Comly
John Comly
Chief Executive Officer

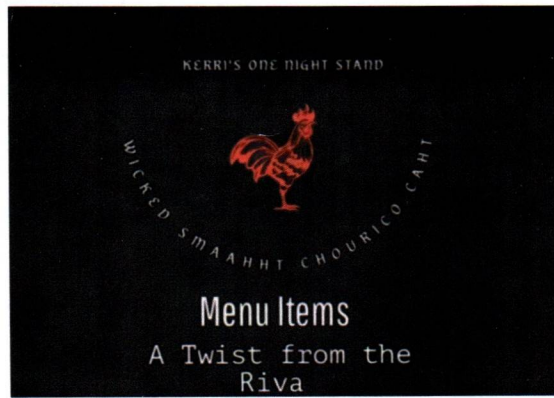
Contact us at www.statefoodsafety.com.



ID 1020



EST..... 2025
#A-TEAM



MENU SANDWICHES

PORTUGUESE SLICED CHOURICO & PEPPERS ON A ROLL	\$10.50 W/FRIES \$13.50
GROUND CHOURICO & PEPPERS ON A ROLL OR BUN	\$9.50 W/FRIES \$12.50
"THE WORKS" CONEY ISLAND HOT DOG	\$3.50 W/FRIES \$6.50
MADE WITH HAMBURG (NO BEANS)	2 WITH THE WORKS & FRIES \$12.00
CACOILA SANDWICH *PULLED PORK* ON A ROLL OR BUN	<i>Honey Cotes/Aw</i> <i>Mustard</i> \$12.00 W/FRIES \$14.50
PLAIN HOT DOG	\$2.00
CHIPS	\$0.75
SIDE OF FRIES	\$3.00
LOADED FRIES	\$4.50
<u>DRINKS</u>	
SUMOL	\$3.50
BOTTLED WATER	\$2.00
SELTZER	\$2.75

Tel: 1-508-837-1651

Klaggs41@gmail.com





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

06/17/2025

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

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

PRODUCER Hiscox Inc. 5 Concourse Parkway Suite 2150 Atlanta GA, 30328	CONTACT NAME:	
	PHONE (A/C, No, Ext): (888) 202-3007	FAX (A/C, No):
	E-MAIL ADDRESS: contact@hiscox.com	
INSURED Kerri's One Night Stand 25 Neal Road Windham, ME 04062	INSURER(S) AFFORDING COVERAGE	
	INSURER A: Hiscox Insurance Company Inc	NAIC # 10200
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

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

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY			P104.665.647.1	03/22/2025	03/22/2026	EACH OCCURRENCE	\$ 1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	Y	Y				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
							MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$ 1,000,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						PRODUCTS - COMP/OP AGG	\$ 1,000,000
	OTHER:							\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)	\$
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per accident)	\$
	<input type="checkbox"/> HIRED AUTOS						PROPERTY DAMAGE (Per accident)	\$
	<input type="checkbox"/> SCHEDULED AUTOS							\$
	<input type="checkbox"/> NON-OWNED AUTOS							
	UMBRELLA LIAB						EACH OCCURRENCE	\$
	EXCESS LIAB						AGGREGATE	\$
	<input type="checkbox"/> OCCUR							\$
	<input type="checkbox"/> CLAIMS-MADE							
	DED							\$
	RETENTION \$							
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE	OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y / N					E.L. EACH ACCIDENT	\$
	If yes, describe under DESCRIPTION OF OPERATIONS below	<input type="checkbox"/> N / A					E.L. DISEASE - EA EMPLOYEE	\$
							E.L. DISEASE - POLICY LIMIT	\$

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

CERTIFICATE HOLDER

139 SEAPORT AVE LLC DBA CHEEKY FOOD TRUCK PARK
139 Seaport Ave
BELFAST, ME 04915

CANCELLATION

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

AUTHORIZED REPRESENTATIVE

6/26/25

I Andrew Cole hereby give
permission to Kerri Aguiar to
place her Food Trailer on my
property. (2 Maverick Ln.)



G

- Current Permitted Places:
- Cheeky Food Truck Park:
Breakfast.
- Gorham Food Truck Park
- Sea Vu - Campground (wells)
- "Jellystone Campground"
Auburn.

6/26/25 Kerri's
Kerri's one night
stand
508-837-1657.