

TOWN OF WINDHAM
8 SCHOOL RD
WINDHAM, ME 04062

MOBILE FOOD SERVICE UNIT LICENSE APPLICATION

1) Name Kelly's Ice Cream Truck
2) Address 9 River Meadows Dr. Steep Falls, ME 0485
3) E-Mail Kellysicecreamtruck@gmail.com

4) Telephone Number of Owner 207-787-1012
5) Telephone number of Operator 207-787-1012
6) Vehicle Make 2004 Chevy Astro
7) License Number 9A-4554 Vin # 16CNDM19X04B124453
8) Sites where M.F.S.U. will operate: Streets of Windham,

- 9) Have you ever been convicted of a criminal offense which was punishable by imprisonment for more than one year? No Yes,

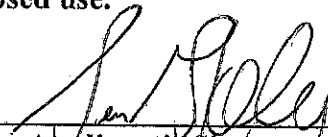
No. If yes, what was the offense?

- 10) Please attach; 1) a picture of the vehicle; 2) a copy of your Department of Human Services license; 3) a signed release form; 4) a list of items to be sold; and 5) a certificate of insurance as required by section (7) of the Mobile Food Service Unit Ordinance.

Return with fee of \$50.00 to Town Clerk, 8 School Rd, Windham, Maine 04062.

NOTICE TO APPLICANT

Please take notice that if the municipal officers grant the attached license, you must still comply with all the requirements of the provisions of the Town's Zoning 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.



Applicant's Signature

8/1/10

Acknowledgement of Receipt

TOWN OF WINDHAM
8 SCHOOL RD
WINDHAM, ME 04062

AUTHORITY TO RELEASE INFORMATION

TO WHOM IT MAY CONCERN:

I hereby authorize the representative of the Town of Windham bearing this release, or copy thereof, within one year of its date, to obtain any information in your files pertaining to my employment, military, credit or educational records including, but not limited to, academic, achievement, attendance, athletic, personal history, and disciplinary records; medical records, and credit records. I hereby direct you to release such information upon request of the bearer. This release is executed with full knowledge and understanding that the information is for the official use of the Town of Windham. I hereby release you, as the custodian of such records, and any school, college, university, or other educational institution, hospital, or other repository of medical records, credit bureau, lending establishment including its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information, or any attempt to comply with this authorization and should there be any question as to the validity of this release, you may contact me as indicated below. All records obtained pursuant to 16 M.R.S.A §620 (6) are confidential and may not be made available for public inspection or copying.

FULL NAME Sean Kelly

Signature

FULL NAME Sean Kelly

Typed or printed

DATE 8/1/16

CURRENT ADDRESS 9 River Meadows Dr
Steep Falls, ME 04085

TELEPHONE 207-787-1012

SOCIAL SECURITY # _____

FULL CURRENT NAME OF ALL EX-SPOUSES
(if any) _____

WITNESS: Judith Vance

and while you'll
in our preapproved
vehicle.

Progressive Customer



PROGRESSIVE

PERFORATION AND TEAR >>>

MAINE MOTOR VEHICLE INSURANCE IDENTIFICATION CARD

Policy Number: 910244699 NAIC Number: 42919
Effective Date: 05/24/2016 Expiration Date: 11/24/2016
Insurer: Progressive Northwestern Ins Co 1-800-876-5581
P.O. Box 5807 Cleveland, OH 44101
Named Insured(s):
Sean G Kelly

Your Agent:
EDUCATED INSURANCE 1-207-247-0186
740 MAIN ST #2
WATERBORO, ME 04087

Year	Make	Model	VIN
2004	CHEVROLET	ASTRO	1GCDM19X04B124453

FOIA b (7)(D) - Exemption of information from release because it is the property of a confidential source.

This policy provides the minimum insurance prescribed by law.

This card should be kept in the insured vehicle and presented on demand of a law enforcement officer.

PERFORATION AND TEAR >>>

Processed on May 29, 2016 at 04:14 p.m.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/15/2016

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 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 GHM Agency 51 Main Street PO Box 649 Waterville ME 04903-0649	CONTACT NAME: (Joanne) PHONE (A/C, No, Ext): (207) 873-5101 FAX (A/C, No): (207) 873-5784 E-MAIL ADDRESS: joanne@ghmagency.com														
INSURED Sean Kelly, DEA: Kelly's Ice Cream Truck 9 River Meadow Dr Steep Falls ME 04085	<table border="1"><thead><tr><th>INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr></thead><tbody><tr><td>INSURER A MMG Insurance Co.</td><td>15997</td></tr><tr><td>INSURER B:</td><td></td></tr><tr><td>INSURER C:</td><td></td></tr><tr><td>INSURER D:</td><td></td></tr><tr><td>INSURER E:</td><td></td></tr><tr><td>INSURER F:</td><td></td></tr></tbody></table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A MMG Insurance Co.	15997	INSURER B:		INSURER C:		INSURER D:		INSURER E:		INSURER F:	
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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 <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			TBA	7/15/2016	7/15/2017	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB EXCESS LIAB DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/>	N/A				PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ 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

(207) 571-0701

City of Biddeford, Maine
205 Main Street
Biddeford, ME 04005**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

Joanne Kinney/JOANNE

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State of Maine

Department of Agriculture, Conservation & Forestry
Division of Quality Assurance & Regulations
28 State House Station, Augusta, ME 04333-0028
(207) 287-3841

SERIAL NUMBER

102312

2-31748

June 7, 2016

July 7, 2017

LICENSE NUMBER

DATE OF ISSUE

DATE OF EXPIRATION

This certifies that

Kelly's Ice Cream Truck

Sean Kelly

9 River Meadows DR

Steep Falls, ME 04085-

MOBILE VENDOR

Location: 9 River Meadows DR, Steep Falls

This certificate is valid only between the date issued and expiration date appearing herein. Only the named holder at the location for which issued may use it.

The person named herein is authorized to sell or manufacture food products, fuel and/or sell or repair weighing and measuring devices as permitted by law for the listed authorizations.

This certificate and/or each type of authorization represented is subject to suspension, revocation or cancellation as authorized by Maine Revised Statutes.

LICENSE TYPE

DESCRIPTION OF LICENSE AUTHORIZATIONS

FEE

License Type		Authorizations	Fee
Mobile Vendor	0 to 10	Frozen Food Prepackaged Food	20.00
TOTAL:			20.00



Department of Agriculture

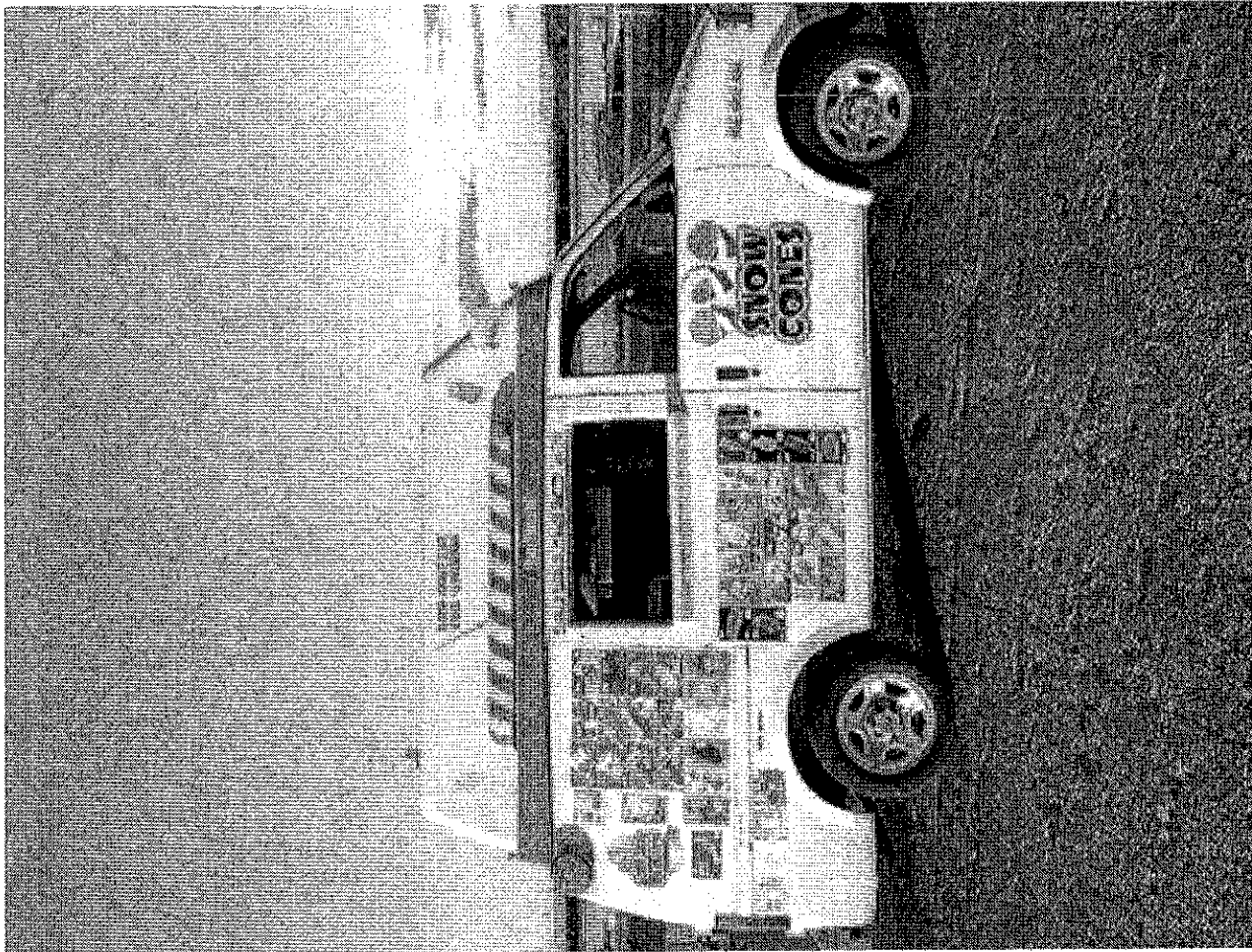
Commissioner

Division of Quality Assurance

Director

Judith Vance

From: Sean Kelly <seang0310@gmail.com>
Sent: Monday, August 01, 2016 1:31 PM
To: Judith Vance
Subject: Re: test



Sent from

my iPhone

On Aug 1, 2016, at 13:30, Judith Vance <jhvance@windhammaine.us> wrote:

Judith H.Vance CCM
Deputy Town Clerk
Registrar of Voters
Notary Public & Dedimus Justice
Town of Windham
windhammaine.us
892-1900

Judith Vance

From: Sean Kelly <kellysicecreamtruck@gmail.com>
Sent: Monday, August 01, 2016 1:35 PM
To: Judith Vance
Subject: Fwd: inventory items

Sent from my iPhone

Begin forwarded message:

From: Angela Kelly <angkelly24@gmail.com>
Date: August 1, 2016 at 13:34:41 EDT
To: Sean Kelly <kellysicecreamtruck@gmail.com>
Subject: inventory items

Item

Blue Bunny Batman

Blue Bunny Big Dipper chocolate
lovers cone

Blue Bunny Big Dipper cookies &
cream

Blue Bunny Big Dipper strawberry
cone

Blue Bunny Big Dipper vanilla
cone

Blue Bunny Bratz

Blue Bunny bubblegum snow cone

Blue Bunny Chips Galore

BB Jolly Rancher Cool Tube

Blue Bunny Jolly Rancher Rainbow
Snowcone

Blue Bunny Minion

Blue Bunny Neopolitan

Blue Bunny Ninja Turtles

Blue Bunny Sonic

Blue Bunny Two Ball Screw Ball
(cherry)

Blue Bunny Two Ball Screw Ball
(blue rasp)

Blue Bunny Vanilla Crunch

Blue Ribbon Screamers

Bomb Pop Banana Fudge

Bomb Pop Original red/white/blue

Bomb Pop JR red/white/blue

Bomb Pop Warheads

Bomb Pop Watermelon
Cotton Candy
Good Humor Oreo
Good Humor Toasted Almond
Hood chocolate eclair
Hood fudge bars
Hood ice cream sandwich
Hood orange cream bar
Hood Rocket Pop
Hood strawberry shortcake
Klondike Choco Tacos
Popsicle Cyclone
Popsicle Shots
Popsicle sour patch
Popsicle Spiderman
Popsicle Spongebob
Reeses PB Cup
Richies Italian Ice - Blue
Rasp/Watermelon
Sour Wower Blue Raspberry
So Delicious Bar-strawberry
So Delicious Bar-van/choc
Stony Field Organic Dark Chocolate
Stony Field Organic Van/Choc
Yasso Coffee Chip/Cookies &
Cream