

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

Applicant: Smitty's Cinema - Windham LLC

**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: 1/30/17

**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: 1-31-17

**BUREAU OF ALCOHOL BEVERAGES AND LOTTERY OPERATIONS**  
**DIVISION OF LIQUOR LICENSING AND ENFORCEMENT**  
**8 STATE HOUSE STATION, AUGUSTA, ME 04333-0008**  
**10 WATER STREET, HALLOWELL, ME 04347**  
**TEL: (207) 624-7220 FAX: (207) 287-3434**  
**EMAIL INQUIRIES: MAINELIQUOR@MAINE.GOV**

DIVISION USE ONLY	
License No:	
Class:	By:
Deposit Date:	
Amt. Deposited:	
Cash Ck Mo:	

NEW application: ☐ Yes ☒ No

PRESENT LICENSE EXPIRES 3/25/17

INDICATE TYPE OF PRIVILEGE: ☒ MALT ☐ VINOUS ☒ SPIRITUOUS

**INDICATE TYPE OF LICENSE:**

- |                                                         |                                                       |                                                              |
|---------------------------------------------------------|-------------------------------------------------------|--------------------------------------------------------------|
| <input type="checkbox"/> RESTAURANT (Class I,II,III,IV) | <input type="checkbox"/> RESTAURANT/LOUNGE (Class XI) | <input type="checkbox"/> CLASS A LOUNGE (Class X)            |
| <input type="checkbox"/> HOTEL (Class I,II,III,IV)      | <input type="checkbox"/> HOTEL NO FOOD (Class I-A)    |                                                              |
| <input type="checkbox"/> CLUB w/o Catering (Class V)    | <input type="checkbox"/> CLUB with CATERING (Class I) | <input type="checkbox"/> GOLF COURSE (Class I,II,III,IV)     |
| <input type="checkbox"/> TAVERN (Class IV)              | <input type="checkbox"/> QUALIFIED CATERING           | <input checked="" type="checkbox"/> OTHER: <u>Cinema Pub</u> |

**REFER TO PAGE 3 FOR FEE SCHEDULE**

**ALL QUESTIONS MUST BE ANSWERED IN FULL**

Corporation Name: <u>Smitty's Cinema - Windham LLC</u>	Business Name (D/B/A) <u>Smitty's Cinema - Windham LLC</u>
APPLICANT(S) -(Sole Proprietor) DOB:	Physical Location: <u>795 Roosevelt Tr Unit #21</u>
DOB:	City/Town State Zip Code <u>Windham ME 04062</u>
Address <u>123 West Main St</u>	Mailing Address <u>123 West Main St</u>
City/Town State Zip Code <u>Merrimac MA 01860</u>	City/Town State Zip Code <u>Merrimac MA 01860</u>
Telephone Number Fax Number <u>978-346-7830 978-346-7870</u>	Business Telephone Number Fax Number <u>978-346-7830 978-346-7870</u>
Federal I.D. # <u>46-1401344</u>	Seller Certificate #: or Sales Tax #: <u>1039706</u>
Email Address: Please Print <u>Milton @ smitty'scinema.com</u>	Website: <u>www.smitty'scinema.com</u>

If business is NEW or under new ownership, indicate starting date: N/A

Requested inspection date: \_\_\_\_\_ Business hours: 10AM-1AM Mon - Sunday

- If premise is a Hotel or Bed & Breakfast, indicate number of rooms available for transient guests: N/A
- State amount of gross income from period of last license: ROOMS \$ N/A FOOD \$ 1,034K LIQUOR \$ 236K
- Is applicant a corporation, limited liability company or limited partnership? YES ☒ NO ☐

If Yes, please complete the Corporate Information required for Business Entities who are licensees.

- Do you permit dancing or entertainment on the licensed premises? YES ☐ NO ☒
- If manager is to be employed, give name: ROSS ARSENAULT
- Business records are located at: ON premise and at 123 West Main St Merrimac MA
- Is/are applicants(s) citizens of the United States? YES ☒ NO ☐
- Is/are applicant(s) residents of the State of Maine? YES ☐ NO ☒

9. 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
Milton Stephan Smith	9/7/71	Haverhill MA
Benton Glover Smith	8/17/66	Haverhill MA
Carol Bruce Smith	12/22/61	Haverhill MA
Residence address on all of the above for previous 5 years (Limit answer to city & state)		
West Newbury, MASS		
Merrimack MASS		

10. 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: \_\_\_\_\_ (use additional sheet(s) if necessary)

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

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

13. Does/do applicant(s) own the premises? Yes ☐ No ☒ If No give name and address of owner: \_\_\_\_\_  
Jonee Witham LLC 5050 Belmont Ave Youngstown OH 44505

14. Describe in detail the premises to be licensed: (On Premise Diagram Required) Approx 19137 sq ft  
in A Shopping Mall plaza

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

16. 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? \_\_\_\_\_ Which of the above is nearest? \_\_\_\_\_

17. 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: \_\_\_\_\_

18. Does/do applicant(s) have all the necessary permits required by the Department of Health & Human Services?

YES ☐ NO ☐ Applied for on: \_\_\_\_\_

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? .5 Miles Which of the above is nearest: School

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: Sanford Institute for Savings

The Division of Liquor Licensing & Enforcement 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: Mendham MA on January 24, 20 17  
Town/City, State Date

**Please sign in blue ink**

Signature of Applicant or Corporate Officer(s)

Signature of Applicant or Corporate Officer(s)

Milton S. Smith  
Print Name

Print Name

### FEE SCHEDULE

**FILING FEE: (must be included on all applications)..... \$ 10.00**

**Class I** Spirituous, Vinous and Malt ..... \$ 900.00

**CLASS I:** Airlines; Civic Auditoriums; Class A Restaurants; Clubs with catering privileges; Dining Cars; Golf Clubs; Hotels; Indoor Ice Skating Clubs; Indoor Tennis Clubs; Vessels; Qualified Caterers; OTB.

**Class I-A** Spirituous, Vinous and Malt, Optional Food (Hotels Only) ..... \$1,100.00

**CLASS I-A:** Hotels only that do not serve three meals a day.

**Class II** Spirituous Only ..... \$ 550.00

**CLASS II:** Airlines; Civic Auditoriums; Class A Restaurants; Clubs with catering privileges; Dining Cars; Golf Clubs; Hotels; Indoor Ice Skating Clubs; Indoor Tennis Clubs; and Vessels.

**Class III** Vinous Only ..... \$ 220.00

**CLASS III:** Airlines; Civic Auditoriums; Class A Restaurants; Clubs with catering privileges; Dining Cars; Golf Clubs; Hotels; Indoor Ice Skating Clubs; Indoor Tennis Clubs; Restaurants; Vessels; Pool Halls; and Bed and Breakfasts.

**Class IV** Malt Liquor Only ..... \$ 220.00

**CLASS IV:** Airlines; Civic Auditoriums; Class A Restaurants; Clubs with catering privileges; Dining Cars; Golf Clubs; Hotels; Indoor Ice Skating Clubs; Indoor Tennis Clubs; Restaurants; Taverns; Pool Halls; and Bed and Breakfasts.

**Class V** Spirituous, Vinous and Malt (Clubs without Catering, Bed & Breakfasts) ..... \$ 495.00

**CLASS V:** Clubs without catering privileges.

**Class X** Spirituous, Vinous and Malt – Class A Lounge ..... \$2,200.00

**CLASS X:** Class A Lounge

**Class XI** Spirituous, Vinous and Malt – Restaurant Lounge ..... \$1,500.00

**CLASS XI:** Restaurant/Lounge; and OTB.

**UNORGANIZED TERRITORIES** \$10.00 filing fee shall be paid directly to County Treasurer. All applicants in unorganized territories shall submit along with their application evidence of payment to the County Treasurer.

All applications for NEW or RENEWAL liquor licenses must contact their Municipal Officials or the County Commissioners in unincorporated places for approval and signatures for liquor licenses prior to submitting them to the bureau.

*Bureau of Alcoholic Beverages and Lottery Operations  
Division of Liquor Licensing & Enforcement  
8 State House Station, Augusta, ME 04333-0008  
10 Water Street, Hallowell, ME 04347  
Tel: (207) 624-7220 Fax: (207) 287-3434  
Email Inquiries: [MaineLiquor@maine.gov](mailto:MaineLiquor@maine.gov)*

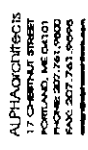
DIVISION USE ONLY
<input type="checkbox"/> Approved
<input type="checkbox"/> Not Approved
BY:

**ON PREMISE DIAGRAM**

In an effort to clearly define your license premise and the area that consumption and storage of liquor is allowed. The Division requires all applicants to submit a diagram of the premise to be licensed in addition to a completed license application.

Diagrams should be submitted on this form and should be as accurate as possible. Be sure to label the areas of your diagram including entrances, office area, kitchen, storage areas, dining rooms, lounges, function rooms, restrooms, decks and all areas that you are requesting approval from the Division for liquor consumption.

- Attached -



CONFIDENTIALITY: Information supplied to you is confidential and is intended only for you. If you are not the named addressee, please do not disseminate, copy, or otherwise use this information. If you are the named addressee, please do not disseminate, copy, or otherwise use this information without the express written consent of the sender.

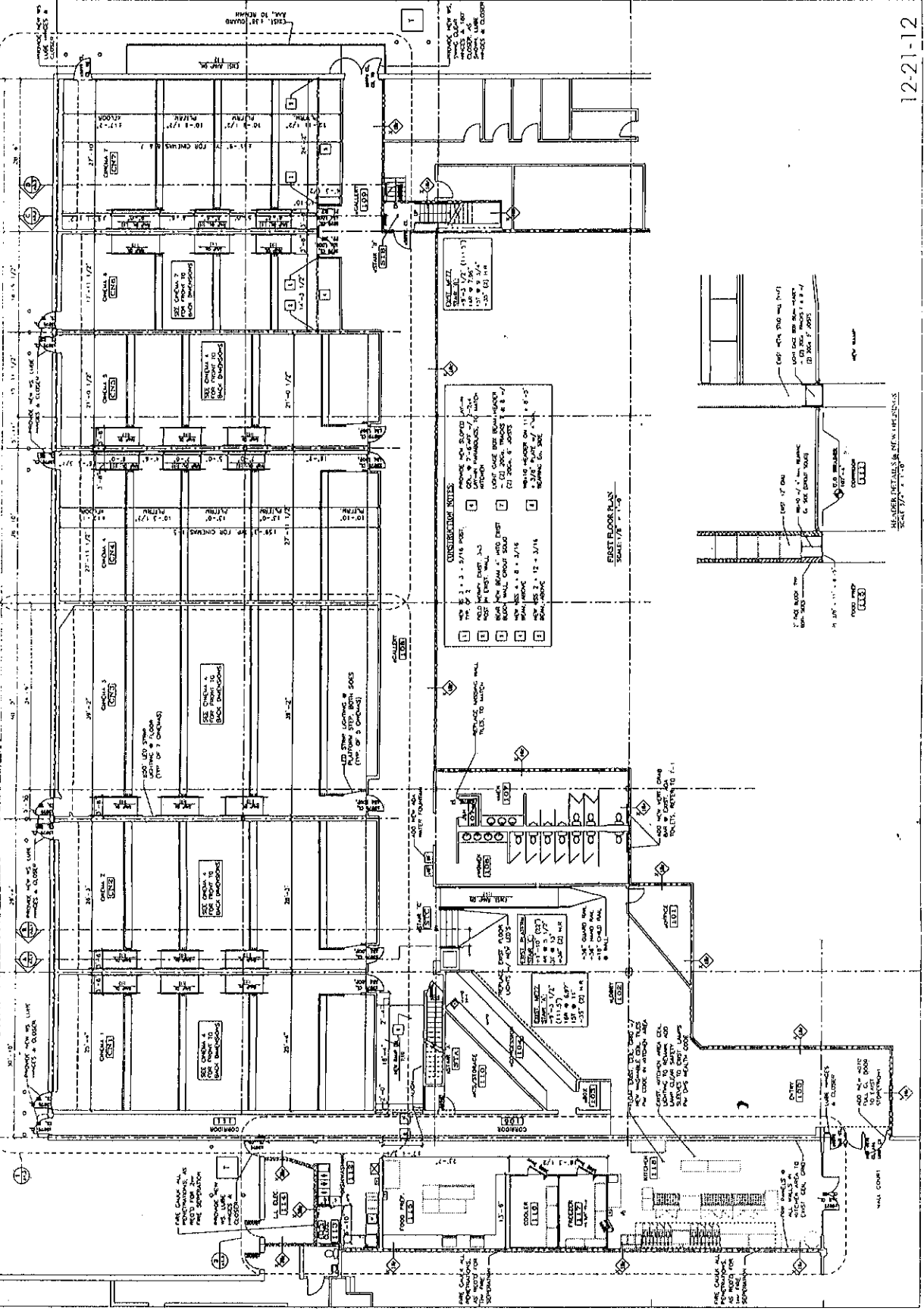
**REVISED PRICING SET:**  
**NOT FOR**  
**CONSTRUCTION**

**Smitty's Windham 7**  
795 Roosevelt Trail - Windham Mall  
Windham ME 04062

JOS	12154
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ISSUE DATE	08-28-12
PRELIM	
P BOARD	
SFNO	
CDT	
REV 1	
PRINT	12-21-12

### A1.1



12-21-12



Division of Alcoholic Beverages and Lottery  
Operations  
Division of Liquor Licensing and Enforcement

**Corporate Information Required for  
Business Entities Who Are Licensees**

**For Office Use Only:**

License #: \_\_\_\_\_

SOS Checked: \_\_\_\_\_

100% Yes ☐ No ☐

Questions 1 to 4 must match information on file with the Maine Secretary of State's office. If you have questions regarding this information, please call the Secretary of State's office at (207) 624-7752.

Please clearly complete this form in its entirety.

1. Exact legal name: Smitty's Cinema - Windham LLC
2. Doing Business As, if any: same
3. Date of filing with Secretary of State: 12/2012 State in which you are formed: Maine
4. If not a Maine business entity, date on which you were authorized to transact business in the State of Maine:  
\_\_\_\_\_
5. List the name and addresses for previous 5 years, birth dates, titles of officers, directors and list the percentage ownership: (attach additional sheets as needed)

NAME	ADDRESS (5 YEARS)	Date of Birth	TITLE	Ownership %
Milton S. Smith	West Newbury MA	9/7/71	pres	25
Benton G Smith	West Newbury MA	8/17/66	VP	25
Calvin B Smith	Menaimac MA	12/22/61	THEAS	25
MacGregor Smith	Menaimac MA	12/23/51	Secr.	25

(Stock ownership in non-publicly traded companies must add up to 100%.)

6. If Co-Op # of members: \_\_\_\_\_ (list primary officers in the above boxes)

7. Is any principal person involved with the entity a law enforcement official?

Yes ☐ No ☒ If Yes, Name: \_\_\_\_\_ Agency: \_\_\_\_\_

8. Has any principal person involved in the entity ever been convicted of any violation of the law, other than minor traffic violations, in the United States?

Yes ☐ No ☒

9. If Yes to Question 8, please complete the following: (attached additional sheets as needed)

Name: \_\_\_\_\_

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

Offense: \_\_\_\_\_

Location of Conviction: \_\_\_\_\_

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

Signature: \_\_\_\_\_

Signature of Duly Authorized Person

Date \_\_\_\_\_

Print Name of Duly Authorized Person

Submit Completed Forms to:

Bureau of Alcoholic Beverages  
Division of Liquor Licensing and Enforcement  
8 State House Station, Augusta, Me 04333-0008 (Regular address)  
10 Water Street, Hallowell, ME 04347 (Overnight address)  
Telephone Inquiries: (207) 624-7220 Fax: (207) 287-3434  
Email Inquiries: [MaineLiquor@Maine.gov](mailto:MaineLiquor@Maine.gov)