

TOWN OF WINDHAM
8 SCHOOL RD
WINDHAM, ME 04062

MOBILE FOOD SERVICE UNIT LICENSE APPLICATION

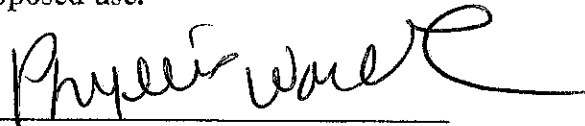
- 1) Name Phyllis Warchol
2) Address 159 Albion Rd
3) E-Mail Phillynew1128@gmail.com
-
- 4) Telephone Number of Owner 207-450-8112
5) Telephone number of Operator same
6) Vehicle Make Home made food trailer
7) License Number _____ Vin # _____
8) Sites where M.F.S.U. will operate: 4 White Bridge Rd

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

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

Signature

FULL NAME

Typed or printed

DATE

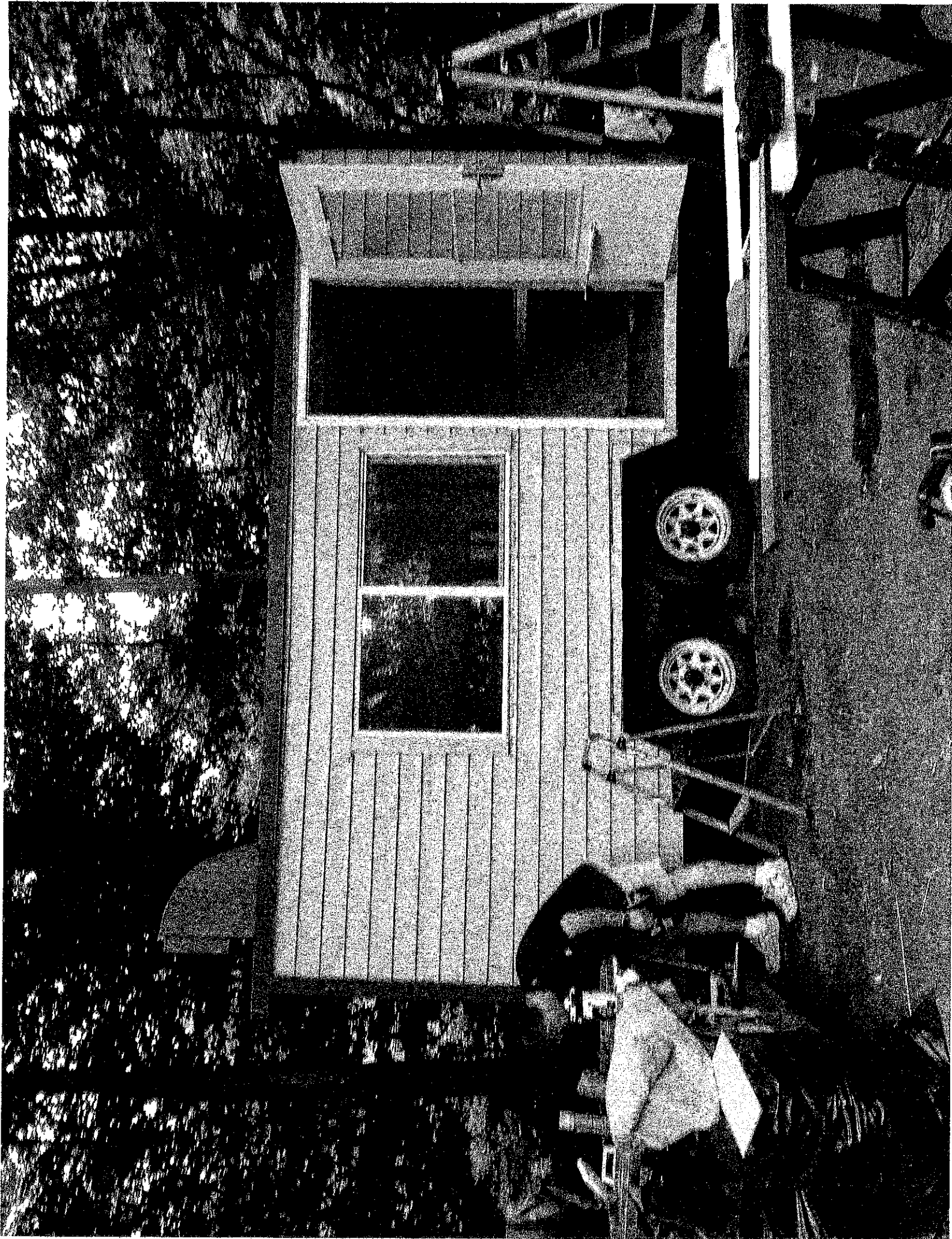
CURRENT ADDRESS

TELEPHONE

D.O.B.

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

WITNESS:



Linda Morrell

From: Perry, Kenneth <Kenneth.Perry@maine.gov>
Sent: Wednesday, May 17, 2017 10:00 AM
To: Linda Morrell
Subject: Fwd: PHYLS
Attachments: PHYLS.pdf

Linda let me know if you receive this. This is a file copy of Phyls mobile license. This license has been approved and is in the mail.

Sent from my device using ZixOne

On Wed, May 17, 2017 9:54am,
"Oak, Kathryn" <Kathryn.Oak@maine.gov> wrote:

Kathryn Oak

Compliance Specialist

Department of Health and Human Services

Maine Center for Disease Control and Prevention - Preserve ~Promote ~ Protect

Division of Environmental and Community Health

Health Inspection

286 Water Street, 3rd Floor

11 State House Station

Augusta, ME 04333-0011

Tel: (207) 287-4282

Fax: (207) 287-3165

TTY: Call 711 (Maine Relay)

EST ID: 26121
EATING PLACE - MOBILE

PHYLS
159 ALBION RD
WINDHAM ME 04262

EXPIRES: 05/12/2018

FEE: \$200.00

WARCHOL, PHYLLIS & DAVID
PHYLS
159 ALBION RD
WINDHAM ME 04062

Mary C. Mayhew
COMMISSIONER

The Maine Public Smoking Act, 22 M.R.S.A. §1542, prohibits smoking in any enclosed public place, including eating establishments. Pursuant to 22 M.R.S.A. §1550, smoking is also prohibited in all outdoor eating areas which are available for dining or beverage service, including self-service. Smoking by employees of any eating establishment is governed by the Workplace Smoking Act, 22 M.R.S.A. §1580-A, which requires employers to establish and post written policies concerning smoking or non-smoking by employees. In the event workplace smoking is allowed, employees may only smoke in designated smoking areas at least 20 feet from any entryway, vent or doorway, and in no event may environmental tobacco smoke be permitted to circulate into enclosed areas of the eating establishment. For free guidance regarding smoking policy and to receive smoke-free signage, please contact the Maine Center for Disease Control and Prevention's Partnership For A Tobacco-Free Maine at www.tobaccofreemaine.org or call 207-287-4627.

WARCHOL, PHYLLIS & DAVID
PHYLS
159 ALBION RD
WINDHAM ME 04062

Phyl's

Charge of hours:

11-3pm

m-Sun.

Dogs:

Plan Dog: dress with your choice of toppings

Chili Dog: mustard & onions

Chili Dog: mustard & coleslaw

Frito Dog: beef chili, shredded cheddar, pickled jalapeno and Frito's

Burgers:

Plain Burger: dress with your choice of toppings

Crunch burger: cheddar cheese burger, lettuce, tomato, red onion, special horseradish sauce & handful chips on the burger

Spicy Burger: BBQ sauce, coleslaw and pickle

Burger: special seasoning, bacon and apple slices

Burrito & Bowl:

Crispy Black Bean Burrito: corn, onions, red & green pepper, shredded cheese and served with avocado dip

Ground Beef Burrito: onions, veggies, black beans and rice

Pinto Bean Burrito: cheese, salsa and rice

Vegetarian Bowl: dish served with black beans, rice, sliced avocado, homemade salsa and shredded cheddar

Soda

Water

Chips



CERTIFICATE OF LIABILITY INSURANCE

 DATE (MM/DD/YYYY)
05/18/2017

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 Anderson-Watkins Insurance 31 Central Street Westbrook ME 04092-	CONTACT NAME: Kathy Joy PHONE (A/C No., Ext.): (207)856-5500 FAX (A/C No.): (207)856-0004 E-MAIL ADDRESS: kjoy@andersonwatkinsinsurance.com INSURER(S) AFFORDING COVERAGE INSURER A: USLI NAIC # 25895 INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:
INSURED Phyllis Warchol Bumpa's Lunch 159 Albion Road Windham ME 04062-	

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 GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			MCP017Y43C5	05/18/2017	05/18/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Per occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/OP AGG \$ Included \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Per accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DEF. <input type="checkbox"/> 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	N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> 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

CANCELLATION

AI 044422

Town of Windham Attn: Linda 8 School Road Windham ME 04062-	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 <i>Kathleen M Joy</i>
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May 17, 2017

Re: Food truck on property

Please consider this our written consent to have the food truck on our property on the 302 frontage at 4 Whites Bridge in Windham, ME. I am co-owner of the business "Seahorse Alley, LLC", and property owner.

Thank you,

A handwritten signature in cursive script, appearing to read "Maggie Terry".

Maggie Terry

The Seahorse Alley team

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