TOWN OF WINDHAM ADDENDUM TO LIQUOR LICENSE APPLICATION

Applicant: La	Ke Kegion Cagles Aerie # 4352
	REVIEW BY POLICE CHIEF
I have made a search Applicant and find:	a of our records for police contacts with the above listed
	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: Kur	Date: 8/22/18
REVIE	EW BY COMMUNITY DEVELOPMENT DIRECTOR 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
Signed: _Club_	For public record. (Relevant materials attached) Date: 8/21/18

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:	Ву:	
Deposit Date:		
Amt. Deposited:		
Cash Ck Mo:		

			Cash C	k Mo:	
· · · · · · · ·		PRESENT	LICENSE EXPIRES_	9-21-20	216
NEW application: Yes No New York Williams is NEW or under new owner with the second s		starting data			
Requested inspection date:	smp, maicate		ss hours:	· · · · · · · · · · · · · · · · · · ·	
INDICATE TYPE OF PRIVILEGE:	MMALT				
INDICATE TITE OF TRIVILEGE.	7 WALI	AVINOUS	Lysi Ita 1000s		
	IN	DICATE TYP	E OF LICENSE:		
☐ RESTAURANT (Class I,II,III,IV)	☐ REST	AURANT/LOU	NGE (Class XI)	☐ CLASS A LOUP	NGE (Class X)
HOTEL (Class I,II,III,IV)	\square HOTE	L, FOOD OPTI	ONAL (Class I-A)	☐ BED & BREAK	FAST (Class V)
CLUB w/o Catering (Class V)	☐ CLUB	with CATERIN	NG (Class I)	☐ GOLF COURSE	(Class I,II,III,IV)
☐ TAVERN (Class IV)	☐ QUAI	LIFIED CATER	ING \square OTHER:		
	REFER	TO PAGE 3 F	OR FEE SCHEDULE		
	ALL QUEST	TIONS MUST	BE ANSWERED IN FU		
Corporation Name:			Business Name (D/B/A))	.
			Lake Praio	o Esches	.4358
APPLICANT(S) -(Sole Proprietor)	Γ	OOB:	Physical Location:		
	······································		Windham	me	CHQ09
		DOB:	City/Town RCC	State State T	Zip Code
Address			Mailing Address	ha.	01/01
City/Town	Ctata	7in Codo	<u> Cyndhan</u>		<u>04000</u>
City/ Lown	State	Zip Code	City/Town	3343	Zip Code
Telephone Number	Fax Number		Business Telephone Nu	mber	Fax Number
Federal I.D. #	A		Seller Certificate #: .		
01-0491-03	16		or Sales Tax #:	04163	
Email Address:	· C	· · · · · · · · · · · · · · · · · · ·	Website:	0 1100	· · · · · · · · · · · · · · · · · · ·
Please Print					
1. If premise is a Hotel or Bed & Break			s available for transient g	guests:	
2. State amount of gross income from p	eriod of last li	cense: ROOMS	\$ \$ FOOD \$	300367LIQUO	R \$ <u>(800</u> ,300) ~~
 Is applicant a corporation, limited lial If Yes, please complete the Corporate In 			-	NO □ sees.	
4. Do you own or have any interest in an	y another Ma	ine Liquor Lice	nse? □ Yes 💢 N	lo	
If yes, please list License Number, Name		al location of an	y other Maine Liquor Lic		
License # Name of Business		(Use	an additional sheet(s) if	necessary.)	
Dhysical Location City/Toy					

5. Do you permit dancing or entertainment on the licensed premises?	YES NO □	
6. If manager is to be employed, give name:		
7. Business records are located at: 456 Recognition To	ail Windham, M	<u>bine</u>
8. Is/are applicants(s) citizens of the United States? YEs	SMÍ NO□	
9. Is/are applicant(s) residents of the State of Maine? YES	NO 🗆	
10. List name, date of birth, and place of birth for all applicants,	managers, and bar managers.	
Full Name (Please Print)	DOB	Place of Birth
Bran Aaskou	10-31-58	
Dawn Kime		Portland me
	0 30 4	La sisten me
Residence address on all of the above for previous 5 years (Lim	it answer to city & state)	
1 41 Laskey Rd Windborn, M	Ne.	
3) 643 Pond Rd Standish M	-470	
JOB OH M. OKANISH, II	36	
11. Has/have applicant(s) or manager ever been convicted of any of any State of the United States? YES □ NO □		
Name:		· · · · · · · · · · · · · · · · · · ·
Offense:	Location:	dennes de la constant
Disposition:	(use additional sheet(s) if n	ecessary)
12. Will any law enforcement official benefit directly in your lice Yes □ No □ If Yes, give name:	ense, if issued?	
13. Has/have applicant(s) formerly held a Maine liquor license?	yes 🕱 no 🗆	
14. Does/do applicant(s) own the premises? Yes ✓ No □	If No give name and address of	owner:
15. Describe in detail the premises to be licensed: (On Premise I Windham Maine (see die	Diagram Required) 456	Roosevelt Trai
16. Does/do applicant(s) have all the necessary permits required ∀YES NO □ Applied for:		nan Services?
17. What is the distance from the premises to the NEAREST sch measured from the main entrance of the premises to the main or parish house by the ordinary course of travel?	entrance of the school, school of	
Which of the above is nearest?		
18. Have you received any assistance financially or otherwise (in self in the establishment of your business? YES NO	- • - ·	ny source other than your-
If VES give details: Martin and TD	141	

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."

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Dated at: Window Maine on Aug 219, 2018			
	Town/City, State Date		
1	Please sign in blue ink		
Signature	of Applicant or Corporate Officer(s) Signature of Applicant or Corporate Officer	(a)	
		(S)	
Dri	n~ MASKOV Down A. Kime.		
	Print Name Print Name		
	FEE SCHEDULE		
FILING I	FEE: (must be <u>included</u> on all applications)	10.00	
Class I	Spirituous, Vinous and Malt	00.00	
	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		00.00	
	CLASS I-A: Hotels only that do not serve three meals a day.		
Class II	Spirituous Only	50.00	
	CLASS II: Airlines; Civic Auditoriums; Class A Restaurants; Clubs with catering privileges; Dining		
Class III	Cars; Golf Clubs; Hotels; Indoor Ice Skating Clubs; Indoor Tennis Clubs; and Vessels.	20.00	
Class III	Vinous Only\$ 2 CLASS III: Airlines; Civic Auditoriums; Class A Restaurants; Clubs with catering privileges;	20.00	
	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\$ 2	20.00	
	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; Taver	rns; Pool	
	Halls; and Bed and Breakfasts.		
Class V	Spirituous, Vinous and Malt (Clubs without Catering, Bed & Breakfasts)\$ 4	95.00	
	CLASS V: Clubs without catering privileges.		
Class X	Spirituous, Vinous and Malt – Class A Lounge	00.00	
(1) ४ /₹	CLASS X: Class A Lounge	00.00	
Class XI	Spirituous, Vinous and Malt – Restaurant Lounge	UU.UU	
	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.

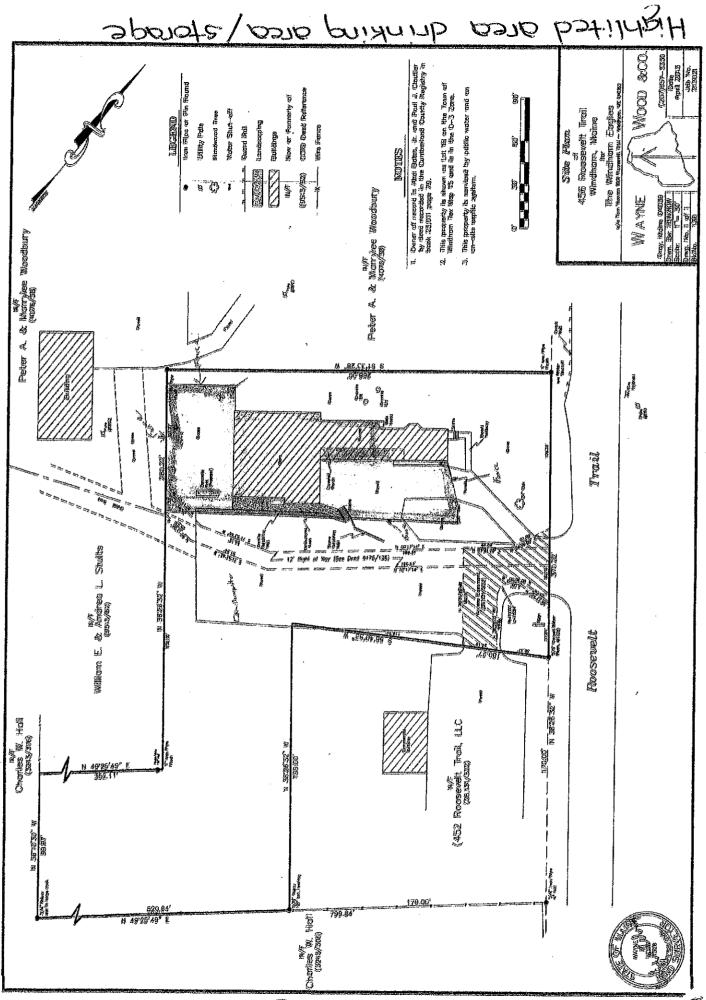
All fees must accompany application, make check payable to the Treasurer, State of Maine.



Bureau of Alcoholic Beverages Division of Liquor Licensing & Enforcement **8 State House Station** Augusta, ME 04333-0008

Tel: (207) 624-7220 Fax: (207) 287-3434

	SUPPLEMENTARY QUESTIO	NNAIRE FOR CLUB APPLIC	ANTS
1. Legal Club N	Jame: Lake Region Ec	igles Aerie# 435	E
2. D/B/A Name			
3. Complete Tit	tle, name, date of birth and telephone	e number for each principal office	er of the club:
Title	Name	Birth Date	Telephone
President	Lekoy Quer	9-29-46	
Secretary	Dawn Kime	4-81-67	
Trustee!	Brian Alaskou	10.31.58	were the second
Trustee	Kick Jones	3-8-52	
Past Pres	Robert Wheaton	10-1-55	
4. Date Club was i	ncorporated: Scot. 14th	995 /	
		Patriotic Fraternal	
6 Data regular ma	eetings are held: 15th 4 3rd U	ratione practima	1
	_	<i>i</i> ,	
7. Date of election	of Club Officers: Annual	y May	· · · · · · · · · · · · · · · · · · ·
8. Date elected off	icers are installed: Annuall	y June	
9. Total Membersh	nip: 300 Annual Du	nes: 30°C Payabl	le When: May 31 ⁵¹
10. Does the Club	cater to the public or to groups of no	on-members on the premises? Ye	es □ No 🛣
11. Excluding salar	ries, will any person, other than the C	Club, receive any of the financial	profits from the sales of
liquors? Yes		•	^
*	steward is employed, complete the t	following:	
12. II a managor or	stevard is employed, complete the i	Onowing.	
Name:		Date of Birth:	
\mathcal{L}	Sign in blue ink	4. 8.3) - 20 B
Signature	& Title of Club Officer	Jan - 0,0	Date
Down A Print Name	Kime - Scartan	4	



Menige Diggram