

PopPies Kettle Corn
2019-2020

TOWN OF WINDHAM
8 SCHOOL RD
WINDHAM, ME 04062

pd
lsm

MOBILE FOOD SERVICE UNIT LICENSE APPLICATION

- 1) Name Robert James Finley
2) Address 35 SEANDISH Neck Rd
3) E-Mail RJ Fin 1212 @ g mail . Com
-
- 4) Telephone Number of Owner 207 2285942
5) Telephone number of Operator 207- 2285942
6) Vehicle Make STEALTH Trailer
7) License Number 1063688 Vin # 5WF5214KW083507
8) Sites where M.F.S.U. will operate: 4- Whites Bridge Rd

- 9) Have you ever been convicted of a criminal offense which was punishable by imprisonment for more than one year? Yes,
1 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.

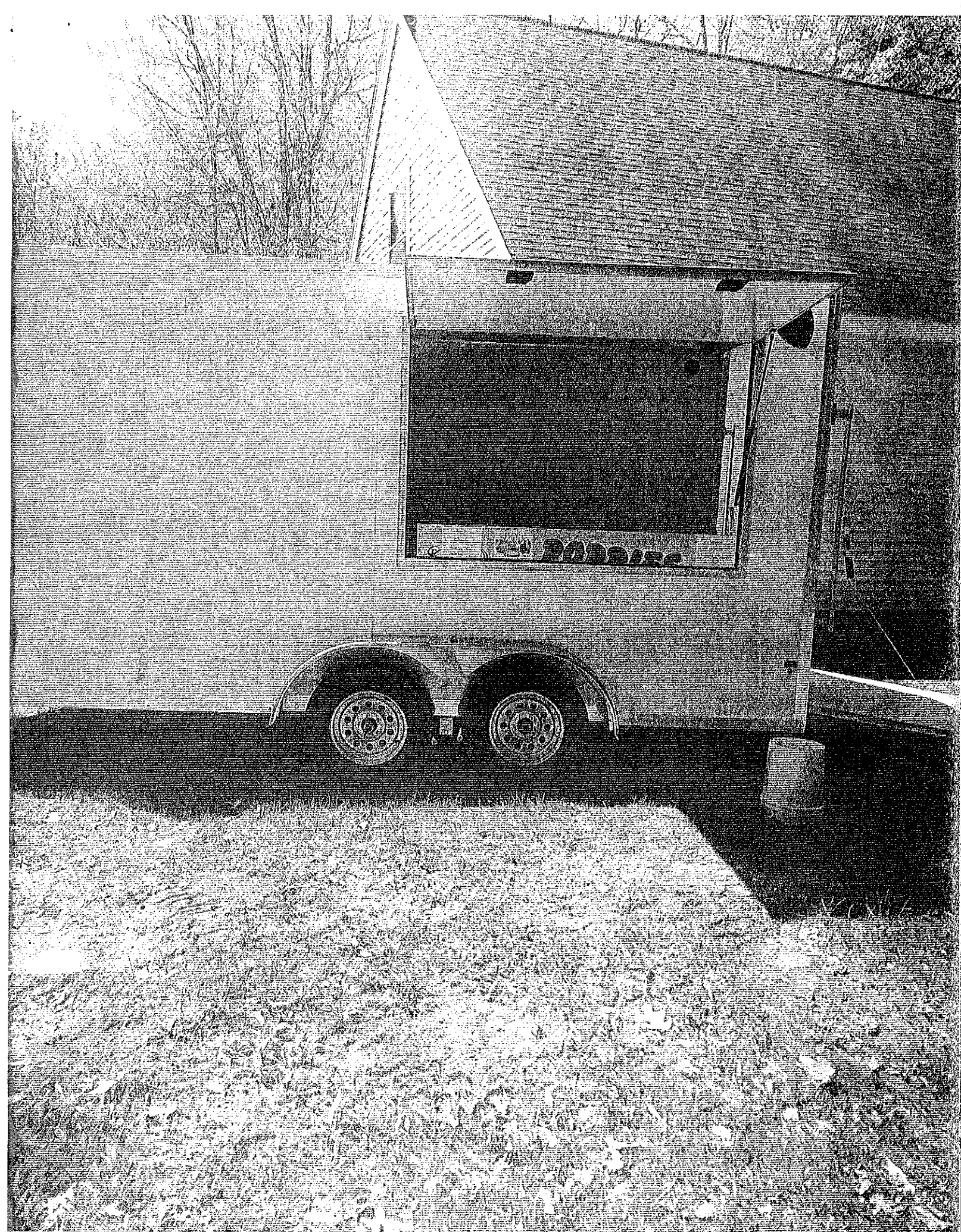
Return with fee of \$50.00 to Town Clerk, 8 School Rd, Windham, Maine 04062.

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.

RJ Finley
Applicant's Signature

Acknowledgement of Receipt





My Tent on my, New Trailer

State of Maine

DEPARTMENT OF HEALTH AND HUMAN SERVICES

EST ID: 27237

EATING PLACE - MOBILE

POPPIES KETTLE CORN
35 STANDISH NECK RD
STANDISH ME 04084

EXPIRES: 04/20/2020

FEE: \$200.00

FINLEY JR, ROBERT J
POPPIES KETTLE CORN
35 STANDISH NECK RD
STANDISH ME 04084



Jeanne M. Lombard

Commissioner

NON-TRANSFERABLE



**STATE OF MAINE
MAINE REVENUE SERVICES**

**THIS REGISTRATION CERTIFICATE FOR A
RETAILER**

is issued under the provisions of MRSA, Title 36, Part 3, §1754-B to:

FINLEY ROBERT J
35 STANDISH NECK RD
STANDISH, ME 04084-5431

Registration Number: 1190365

Date Issued: MAY 01 2018

Business Code: 084
Filing Frequency: MONTHLY

**IMPORTANT INFORMATION CONCERNING THIS
RETAILER'S CERTIFICATE**

This certificate must be available for inspection by the State Tax Assessor, the Assessor's representatives and agents and authorized municipal officials. This retailer's certificate verifies that this retailer and this retail location hold a valid Maine sales tax account and is authorized to collect and remit the sales tax on behalf of the State of Maine. This certificate has no expiration date. If you cease to do business in Maine please return this certificate to Maine Revenue Services.

IMPORTANT PLEASE NOTE: This retailer's certificate may NOT be used to purchase merchandise for resale tax exempt (in Maine). A resale certificate is a separate document. If you qualify to receive a resale certificate, one has been printed and mailed to you.



STATE OF MAINE
MAINE REVENUE SERVICES
RESALE CERTIFICATE



THIS CERTIFICATE IS VALID
MAY 01 2018 THRU DECEMBER 31 2021

<u>Business Name and Location Address</u>	<u>Certificate Number</u>	<u>Business Type</u>
FINLEY ROBERT J D/B/A POPPIES KETTLE CORN 35 STANDISH NECK RD STANDISH, ME 04084-5431	1190365	FOOD PROC.

This is to certify that the above named business is authorized to purchase tangible personal property for resale during the period identified on this certificate. **This certificate cannot be reassigned or transferred and can only be used by the above business or its authorized employees. This certificate is void if the business has ceased operating or if the certificate has been altered.**

The above named business certifies that the following items will be resold as tangible personal property in the ordinary course of their business.

Presented to: _____ (Insert name of seller on photocopy) (date) Presented by: _____
Authorized Signature (purchaser) (date)

DO NOT WRITE ON THIS ORIGINAL FORM

The document printed above is your new Resale Certificate. **Retain this copy as an original in your file.** This certificate is valid only for the period indicated.

Prior to the expiration of this certificate, Maine Revenue Services will automatically renew and reissue a new resale certificate for the next period if:

- your account is active and
- you have reported \$3,000 or more in gross sales during the previous 12 months

Make copies of this original, fill in the appropriate data and provide it to the vendors from whom you purchase goods for resale.

If you cease doing business, this certificate is void and must be returned to Maine Revenue Services.

Use of a resale certificate to purchase goods not intended for resale is a criminal offense.

If you have any questions regarding this document, please call (207) 624-9693.

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 Robert Finley
Signature

FULL NAME Robert Finley
Typed or printed

DATE 5/22/19

CURRENT ADDRESS 35 Standish Neck Rd
Standish ME 04089

TELEPHONE 207-2285942

DATE OF BIRTH 11/29/51

DRIVER'S LICENSE # [REDACTED]

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

WITNESS:

Jim Finley 5-21-19

PopPies Kettle Corn

Items to Be Sold

- 1- Kettle Corn
- 2- Water - Soda
- 3- Hot dogs
- 4- Snow - Cones
- 5- chips

Thanks
Bob Fick



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
05/21/2019

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 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: kjoy@andersonwatkinsinsurance.com
	INSURER(S) AFFORDING COVERAGE
	INSURER A: Peerless Ins Comm NAIC #: 24198
INSURED Robert Finley Poppies Kettle Corn 35 Standish Neck Road Standish ME 04084-	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			BKS58779963	04/20/2019	04/20/2020	EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000
							MED EXP (Any one person) \$ 15,000
							PERSONAL & ADV INJURY \$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE \$ 2,000,000
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						PRODUCTS - COM/OP AGG \$ 2,000,000
	OTHER:						\$
A	AUTOMOBILE LIABILITY			BAS58621212	02/21/2019	02/21/2020	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS						BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident) \$
							\$
	UMBRELLA LIAB						EACH OCCURRENCE \$
	EXCESS LIAB						AGGREGATE \$
	DED						\$
	RETENTION \$						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						OTH-ER
	If yes, describe under DESCRIPTION OF OPERATIONS below						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 051732

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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Whites Bridge Rd

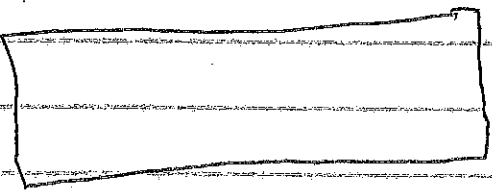
Drive way

POPPIES

Sigra

30 Right

302



Bob Finley
POPPIES FETTL
CORN