



# TOWN OF HOPEDALE

78 Hopedale Street - P.O. Box 7  
Hopedale, Massachusetts 01747

Tel: 508-634-2203 Fax: 508-634-2200

## BOARD OF SELECTMEN

Brian R. Keyes, Chair  
Louis J. Arcudi, III  
Glenda A. Hazard

November 30, 2021

To: Abutters  
National Grid – Gabriela Ayala  
Robert Leonida, Engineering Supervisor Distribution Design  
Albert Bessette, Manager, R.O.W.

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### NOTICE

In conformity with the requirements of Section 22 of Chapter 166 of the General Laws (Ter. Ed.) you are hereby notified that a **Public Hearing** has been scheduled for **Monday, December 13, 2021 at 7PM**, via Zoom Meeting based upon the petition of MASSACHUSETTS ELECTRIC COMPANY and VERIZON NEW ENGLAND, INC., request permission to erect and maintain poles and wires to be placed thereon, together with such sustaining and protecting fixtures as said Companies may deem necessary to be owned and used in common by your petitions in the following public way or ways:

#### **Howard Street:**

**National Grid respectfully request permission to install new pole 4-84 as shown on sketch for purpose of guying existing pole 4 Howard St. This proposed pole to be located on Town property with support anchor.**

Wherefore they pray that after due notice and hearing as provided by law, it be granted joint or identical locations for and permission to erect and maintain poles and wires, together with such sustaining and protecting fixtures as they may find necessary, said poles to be erected substantially in accordance with the plan filed herewith marked

**MASSACHUSETTS ELECTRIC COMPANY and VERIZON NEW ENGLAND, INC.**

**Plan No. 29251325 Dated 11/19/2019**

**HOPEDALE BOARD OF SELECTMEN  
Brian R. Keyes, Chairman**

**View the Zoom Link on the back of this page**

Topic: Select Board Meeting  
Time: 7PM

Join Zoom Meeting

<https://us02web.zoom.us/j/81873864755?pwd=NU1IU1Y2dXJXNnBqU0hGRm5RODU0QT09>

Meeting ID: 818 7386 4755

Passcode: 746557

One tap mobile

+13126266799,,81873864755#,,,\*746557# US (Chicago)

+16465588656,,81873864755#,,,\*746557# US (New York)

Dial by your location

+1 312 626 6799 US (Chicago)

+1 646 558 8656 US (New York)

+1 301 715 8592 US (Washington DC)

+1 346 248 7799 US (Houston)

+1 669 900 9128 US (San Jose)

+1 253 215 8782 US (Tacoma)

Meeting ID: 818 7386 4755

Passcode: 746557

Find your local number: <https://us02web.zoom.us/j/kwr5a9KXW>



**Hopedale  
OFFICE OF THE TOWN CLERK  
PO BOX 7  
78 HOPEDALE STREET  
HOPEDALE, MA 01747**

November 4, 2021

To whom it may concern:

Enclosed please find a petition of NATIONAL GRID and VERIZON NEW ENGLAND INC., covering joint NATIONAL GRID-VERIZON NEW ENGLAND pole locations

If you have any questions regarding this permit, please contact **Note change of contact information**

Gabriela Ayala

Please notify Ms. Ayala of the hearing date / time:

[Gabriela.Ayala@nationalgrid.com](mailto:Gabriela.Ayala@nationalgrid.com)

508-897-5577

If this petition meets with your approval, please return an executed copy to:

National Grid/ Gabriela Ayala 100 E Ashland St, Brockton MA 02302

Very truly yours,

*Robert Leonida*

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Rob Leonida  
Supervisor, Distribution Design

Enclosures

**ORDER FOR JOINT OR IDENTICAL POLE LOCATIONS**

November 3, 2021

By the Board of Selectmen  
of the Town of Hopedale, Massachusetts

Notice having been given and public hearing held, as provided by law, IT IS HEREBY ORDERED: that MASSACHUSETTS ELECTRIC COMPANY and VERIZON NEW ENGLAND, INC. be and they are hereby granted joint or identical locations for and permission to erect and maintain poles and wires to be placed thereon, together with such sustaining and protecting fixtures as said Companies may deem necessary, in the public way or ways hereinafter referred to, as requested in petition of said Companies dated the 3rd day of November

All construction under this order shall be in accordance with the following conditions:-

Poles shall be of sound timber, and reasonably straight, and shall be set substantially at the points indicated upon the plan marked-- filed with this order  
Plan No. 29251325 Dated: 11/19/2019

There may attached to said MASSACHUSETTS ELECTRIC COMPANY not to exceed twenty wires and by said VERIZON NEW ENGLAND, INC. not to exceed forty wires and four aerial cables, and all of said wires and cables shall be placed at a height of not less than eighteen feet from the ground.

The following are the public ways or parts of ways along which the poles above referred to may be erected, and the number of poles which may be erected thereon under this order:-

**Howard St**

National Grid respectfully request permission to Install New Pole 4-84 as Shown on sketch for purpose of Guying existing Pole 4 Howard St. This Proposed pole to be located on towa property with support Anchor.

Also for permission to lay and maintain underground laterals, cables and wires in the above or intersecting public ways for the purpose of making connections with such poles and buildings as each of said petitioners may desire for distributing purposes.

I hereby certify that the foregoing order was adopted at a meeting of the Board of Selectmen of the Town of Hopedale, Massachusetts held on the \_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_  
Clerk of Selectmen

Received and entered in the records of location orders of the Town of Hopedale, Massachusetts

Book: \_\_\_\_\_ Page: \_\_\_\_\_

\_\_\_\_\_  
Town Clerk



**PETITION FOR JOINT OR IDENTICAL POLE LOCATIONS**

November 3, 2021

To the Board of Selectmen  
of the Town of Hopedale, Massachusetts

**MASSACHUSETTS ELECTRIC COMPANY and VERIZON NEW ENGLAND, INC.**

request permission to erect and maintain poles and wires to be placed thereon, together with such sustaining and protecting fixtures as said Companies may deem necessary to be owned and used in common by your petitioners, in the following public way or ways:

**Howard St**

**National Grid respectfully request permission to install New Pole 4-84 as Shown on sketch for purpose of Guying existing Pole 4 Howard St. This Proposed pole to be located on town property with support Anchor.**

Wherefore they pray that after due notice and hearing as provided by law, it be granted joint or identical locations for and permission to erect and maintain poles and wires, together with such sustaining and protecting fixtures as they may find necessary, said poles to be erected substantially in accordance with the plan filed herewith marked: **MASSACHUSETTS ELECTRIC COMPANY and VERIZON NEW ENGLAND, INC.**

Plan No. 29251325 Dated: 11/19/2019

Also for permission to lay and maintain underground laterals, cables and wires in the above or intersecting public ways for the purpose of making connections with such poles and buildings as each of said petitioners may desire for distributing purposes.

Your petitioners agree to reserve space for one cross arm at a suitable point on each of said poles for the fire, police, telephone and telegraph signal wires belonging to the municipality and used by it exclusively for municipal purposes.

**MASSACHUSETTS ELECTRIC COMPANY**

By:  DBA Robert Leonida  
Manager of Distribution Design

**VERIZON NEW ENGLAND, INC.**

By:  Albert Bassetta  
Manager, R.O.W.

**ORDER FOR JOINT OR IDENTICAL POLE LOCATIONS**

November 3, 2021

By the Board of Selectmen  
of the Town of Hopedale, Massachusetts

Notice having been given and public hearing held, as provided by law, **IT IS HEREBY ORDERED:**  
**that MASSACHUSETTS ELECTRIC COMPANY and VERIZON NEW ENGLAND, INC.** be and they are hereby granted joint or identical locations for and permission to erect and maintain poles and wires to be placed thereon, together with such sustaining and protecting fixtures as said Companies may deem necessary, in the public way or ways hereinafter referred to, as requested in petition of said Companies dated the **3rd day of November**

All construction under this order shall be in accordance with the following conditions:-

Poles shall be of sound timber, and reasonably straight, and shall be set substantially at the points indicated upon the plan marked-- filed with this order

Plan No. **29251325** Dated: **11/19/2019**

There may attached to said **MASSACHUSETTS ELECTRIC COMPANY** not to exceed twenty wires and by said **VERIZON NEW ENGLAND, INC.** not to exceed forty wires and four aerial cables, and all of said wires and cables shall be placed at a height of not less than eighteen feet from the ground.

The following are the public ways or parts of ways along which the poles above referred to may be erected, and the number of poles which may be erected thereon under this order:--

**Howard St**

**National Grid respectfully request permission to Install New Pole 4-84 as Shown on sketch for purpose of Guying existing Pole 4 Howard St. This Proposed pole to be located on town property with support Anchor.**

Also for permission to lay and maintain underground laterals, cables and wires in the above or intersecting public ways for the purpose of making connections with such poles and buildings as each of said petitioners may desire for distributing purposes.

I hereby certify that the foregoing order was adopted at a meeting of the Board of Selectmen of the Town of Hopedale, Massachusetts held on the \_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_  
Clerk of Selectmen

Received and entered in the records of location orders of the Town of Hopedale, Massachusetts

Book: \_\_\_\_\_ Page: \_\_\_\_\_

\_\_\_\_\_  
Town Clerk

We hereby certify that on \_\_\_\_\_ at \_\_\_\_\_ o'clock, \_\_\_\_\_ M.  
at \_\_\_\_\_ a public hearing was held on the petition of the

**MASSACHUSETTS ELECTRIC COMPANY and VERIZON NEW ENGLAND, INC.**

for permission to erect the poles, wires, cables, fixtures and connections described in the order herewith recorded, and that we mailed at least seven days before said hearing a written notice of the time and place of said hearing to each the owners of real estate (as determined by the last preceding assessment for taxation) along the ways or parts of ways upon which the Companies are permitted to erect poles, wires, cables, fixtures and connections under said order. And that thereupon said order was duly adopted.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Selectmen of the Town of

Hopedale, Massachusetts

**CERTIFICATE**

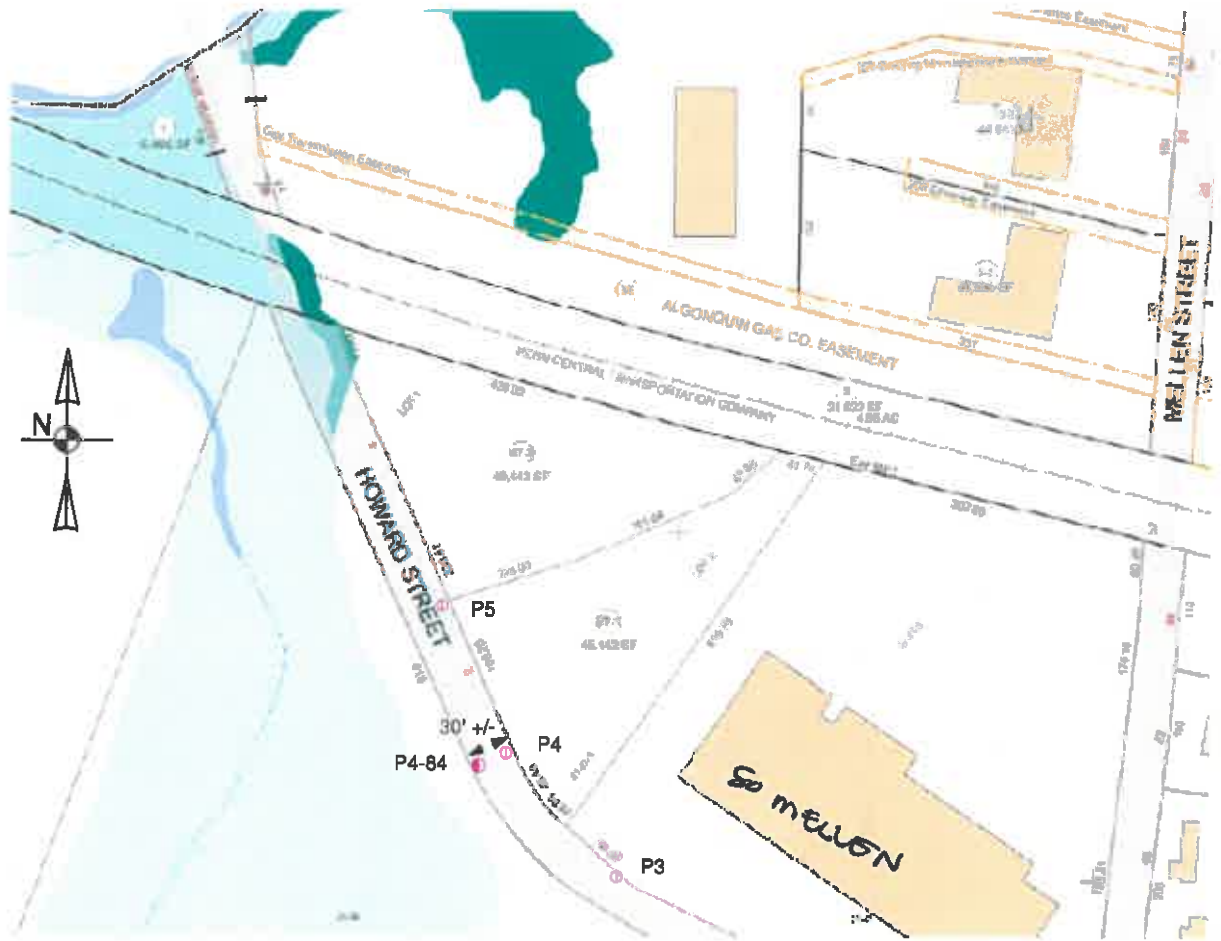
I hereby certify that the foregoing is a true copy of a joint location order and certificate of hearing with notice adopted by the Board of Selectmen of the Town of Hopedale, Massachusetts, on the \_\_\_\_\_ day of

\_\_\_\_\_ recorded with the records of location orders of said Town,


Book \_\_\_\_\_, Page \_\_\_\_\_

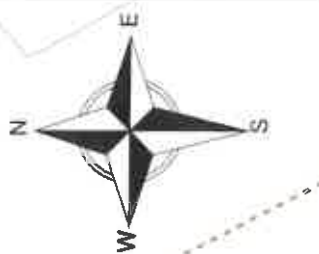
This certified copy is made under the provisions of Chapter 166 of General Laws and any additions thereto or amendments thereof.

Attest: \_\_\_\_\_  
Town Clerk

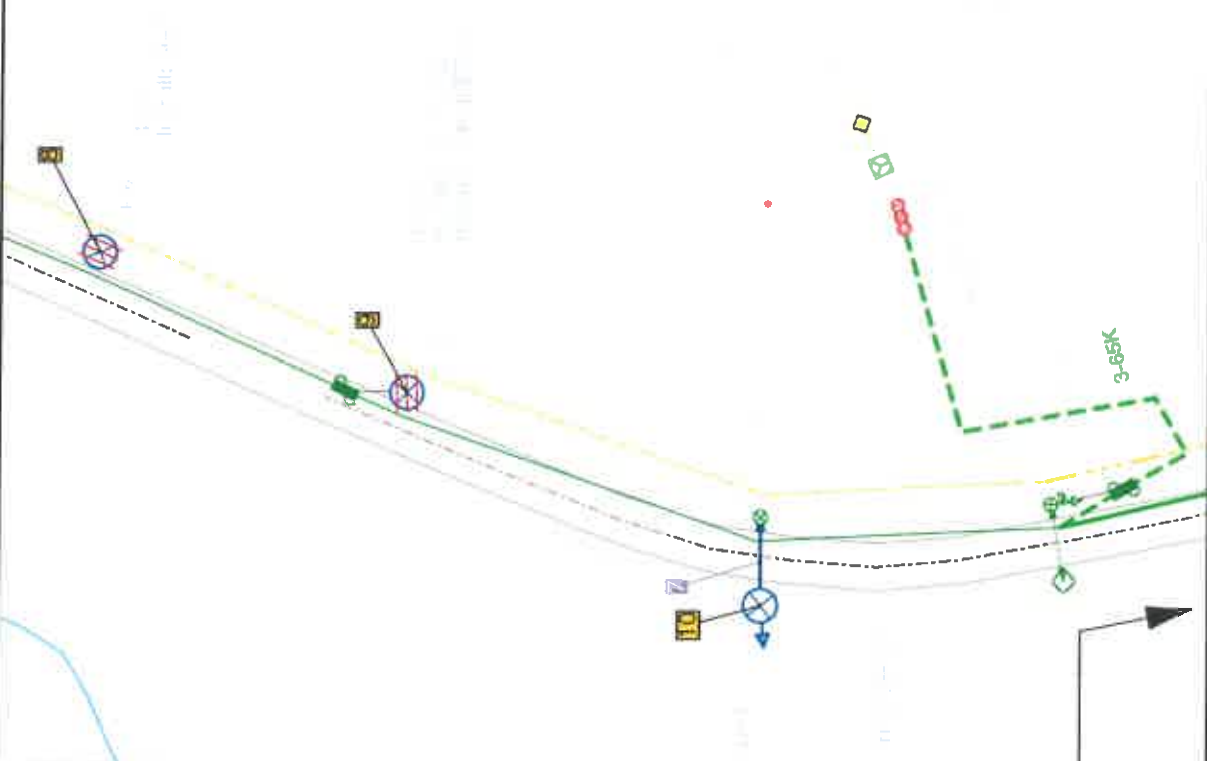


NATIONAL GRID RESPECTFULLY REQUEST PERMISSION TO INSTALL NEW POLE 4-84 AS SHOWN ON SKETCH FOR PURPOSE OF GUYING EXISTING POLE 4 HOWARD ST. THIS PROPOSED POLE TO BE LOCATED ON TOWN PROPERTY WITH SUPPORT ANCHOR.

<b>JOINT OWNED POLE PETITION</b>		 <b>And</b> <b>Verizon New England, Inc.</b>	
● Proposed NGRID Pole Locations		Date:	11/19/2019
○ Existing NGRID Pole Locations		Plan Number:	29251325
● Proposed J.O. Pole Locations		To Accompany Petition Dated:	11/19/19
○ Existing J.O. Pole Locations		To The:	TOWN Of HOPEDALE
● Existing Telephone Co. Pole Locations		For Proposed:	NEW Pole: 4-84 Location: HOWARD ST
○ Existing NGRID Pole Location To Be Made J.O.		Date Of Original Grant:	11/19/2019
✕ Existing Pole Locations To Be Removed			
<b>DISTANCES ARE APPROXIMATE</b>			



	Anchor - existing
	Anchor - install
	Cutout (Closed) - existing
	Elbow - A phase
	Elbow - B phase
	Elbow - C phase
	General Note
	Guy Wire - existing
	Guy Wire - install
	Misc Support (Tree) - existing
	Ped - existing
	Pole (Joint) - existing
	Pole (Joint) - install
	Pole (Joint) - replace
	Primary OH (Tph) - existing
	Primary OH (3ph) - existing
	Primary UG (3ph) - existing
	Riser - existing
	Secondary OH - existing
	Secondary Neutral OH - existing
	Secondary Service (UG) - existing
	Service Point - non-critical
	UG Transformer (3ph Wye) - existing



NATIONAL GRID TO REPLACE POLES 5 AND 6 WITH 40/2 JO POLES. FRAME NEW AS INDICATED AND TRANSFER NGRID FACILITIES FROM OLD TO NEW. VERIZON TO REMOVE OLD POLES.

- INSTALL NEW 35/2 JO GUY STUB POLE 4-84 AS MARKED IN FIELD.  
 INSTALL NEW ANCHOR WITH 12 FT LEAD AND PRIMARY INSULATED DOWN GUY. NEW 12.5M POLE TO POLE GUY P4 TO 4-84.

WORKING UNDER (3) 40K LCO'S POLE 35 SOUTH MAIN ST, HOPEDALE AT INTERSECTION OF MELLON ST. (335W1 FDR)

Select Board  
Regular Meeting Minutes  
November 22, 2021, 7:00 pm

Present: Chair Keyes, Selectman Arcudi, Selectwoman Hazard, Town Administrator Schindler.

Chair Keyes called the meeting to order at 7:00PM, Chair Keyes began the meeting with the Pledge of Allegiance.

Chair Keyes called the pole petition hearing to order at 7:01PM. Chair Keyes read the public hearing notice to the public and the Select Board. Al Galvin, National Grid Representative stated that the Town of Hopedale had requested that Pole 3 be relocated due to a wheelchair ramp being installed.

**Pole Petition Public Hearing – Hope Street (*Al Galvin from National Grid to attend*).** In conformity with the requirements of Section 22 of Chapter 166 of the General Laws (Ter. Ed.) you are hereby notified that a Public Hearing has been scheduled for Monday, November 22, 2021 at 7PM, via Zoom Meeting based upon the petition of MASSACHUSETTS ELECTRIC COMPANY and VERIZON NEW ENGLAND, INC., to request permission to relocate poles, wires, cables and fixtures, including anchors, guys and other such necessary sustaining and protecting fixtures, along and across the following public way or ways: Hope Street: 75 South of Existing pole 6 Dutcher St install new relocated pole 3 and 99Ft South of this newly relocated pole install new pole 4 as marked in field. See permit sketch. Wherefore they ask that they be granted a joint relocation for and permission to erect and maintain poles, wires, cables, and fixtures to be placed thereon, together with anchors, guys and other such sustaining and protecting fixtures as they must find necessary, said poles to be located substantially in accordance with the plan filed here with marked.: MASSACHUSETTS ELECTRIC COMPANY. Plan No. 28461542. Dated 10/25/2021

Chair Keyes opened the hearing for Board Member and Public comment. No comments were given. Chair Keyes adjourned the Pole Petition Public Hearing at 7:09PM

Selectman Arcudi moved to approve the pole petition from Hope Street: 75 South of Existing pole 6 Dutcher St install new relocated pole 3 and 99Ft South of this newly relocated pole install new pole 4 as marked in field, per the sketch provided. Selectwoman Hazard seconded the motion.

Hazard – Aye, Arcudi – Aye, Keyes – Aye

Chair Keyes called the 2022 Tax Classification Hearing to order at 7:10PM. Chair Keyes read the 2021 Tax Classification Hearing text below.

7:10PM 2022 Tax Classification Hearing – Review Board of Assessors' Recommendation; Ann Williams, Principal Assessor, Don Howes Chair of the Board of Assessors. The Hopedale Board of Selectmen will hold a public hearing at 7:10 PM on Monday, November 22, 2021, in the Draper Meeting Room of the Hopedale Town Hall at 78 Hopedale Street, Hopedale MA via ZOOM. The purpose is to receive comments on the classification of taxable real property in the town of Hopedale, and to determine the percentage of the tax levy for Fiscal Year 2022 that each class shall bear by multiple tax rate or by a single classification and single tax rate. Interested Hopedale taxpayers are encouraged to provide written or oral comments prior to or during the hearing.

Board of Assessors Chair, Don Howes stated that this is an annual process for the Town. The Town has a slightly higher rate for business, taxes, this helps the residences tax rates somewhat. Chair Howes stated that historically, a business has never declined to be in Hopedale due to the higher business tax rate than residential. Selectman Arcudi stated that 90% of the monies coming in from taxes are from residential, 10% is coming from commercial/industrial. Arcudi noted that with the split tax rate that the BOA is recommending, the tax rate goes down for single family residential from 17.87% to 17.10% this is also due to the housing market being assessed differently than the previous year. Selectman Arcudi stated that when the Town has a larger number of industrial/commercial areas the Town should reevaluate the split tax rate recommendation. Chair Howes agreed with this statement.

Chair Howes stated that the BOA recommends maintaining the split tax rate of 1.50 and not to adopt the residential exemption and small commercial exemption.

Selectwoman Hazard moved the Town of Hopedale to maintain the split tax rate of 1.50. Selectman Arcudi seconded the motion.

Arcudi – Aye, Hazard – Aye, Keyes – Aye

Selectman Arcudi moved the Town to not adopt the residential exemption. Selectwoman Hazard seconded the motion.

Arcudi – Aye, Hazard – Aye, Keyes – Aye

Selectwoman Hazard moved not to adopt the small commercial exemption. Selectman Arcudi seconded the motion.

Arcudi – Aye, Hazard – Aye, Keyes – Aye

Chair Keyes adjourned the 2022 Tax Classification Hearing at 7:25PM.

#### Consent Items

Approval October 25, 2021 Regular Minutes

Selectman Arcudi moved to approve the October 25, 2021 regular minutes. Selectwoman Hazard seconded the motion.

Arcudi – Aye, Hazard – Aye, Keyes – Aye

Chair Keyes moved the item to discussion.

Selectman Arcudi commented on the minutes stating that he thought there was a date of when the Board of Health will return to the Select Board regarding their decision of the ACO discussion, this date was not mentioned in the meeting minutes. Town Administrator Schindler stated that Chair Keyes stated that it was going to be revisited in December of 2021, a specific date was not specified. It was agreed between the Board of Health and the Select Board that this item would be revisited in a joint meeting during December 2021.

Approval of November 8, 2021 Regular Minutes

Selectwoman Hazard moved to approve the November 8, 2021 regular minutes. Selectman Arcudi seconded the motion.

Arcudi – Aye, Hazard – Aye, Keyes – Aye

Approve the Annual Gobble Wobble Race on November 25, 2021, starting at 8AM in front of the Fire House

Chair Keyes read the letter provided in the packet. Chair Keyes thanked the race directors for their hard work organizing this annual event. Chief Daige stated that as of Today, November 22, 2021, 180 participants have signed up.

Selectwoman Hazard moved to approve the Annual Gobble Wobble Race on November 25, 2021.

Selectman Arcudi seconded the motion.

Arcudi – Aye, Hazard – Aye, Keyes – Aye

Accept Donation of \$395 for the Tree Donated by Selectwoman Glenda A. Hazard in Honor of Her Father, Ken Hazard\*

Chair Keyes gave his sentiments and thanked all of those involved with this process. Selectman Arcudi echoed Chair Keyes statements. Selectwoman Hazard thanked all of those involved in this processed.

Selectman Arcudi moved to accept the donation of \$395 for the tree donated by Selectwoman Hazard in honor of her Father, Ken Hazard. Chair Keyes seconded the motion.

Arcudi – Aye, Keyes – Aye

Accept Donation of Value of Portable Restrooms for the Annual Gobble Wobble Race, provided by Regional Restrooms, Mitchell DeLorenzo

Chair Keyes read the letter provided by Mitchell DeLorenzo regarding the donation of portable restrooms for the annual Gobble Wobble Race. The Select Board thanked Mitchel DeLorenzo and Regional Restrooms for their generous donation to the Town.

Selectman Hazard moved to accept the donation of value of portable restrooms for the annual gobble wobble race, provided by Regional Restrooms. Selectman Arcudi seconded the motion.

Arcudi – Aye, Hazard – Aye, Keyes – Aye

Reviewed A/P Warrant 22-11 A/P for \$326,759.52

Reviewed P/R Warrant 22-11 P/R for \$938,632.14

Town Administrator stated that the Select Board voted in a previous meeting to list this warrant items as consent items.

Selectman Arcudi moved to accept the A/P Warrant 22-11 A/P for \$326,759.52. Selectwoman Hazard seconded the motion.

Arcudi – Aye, Hazard – Aye, Keyes – Aye

Selectman Arcudi moved to accept the P/R Warrant 22-11 P/R for \$938,632.14. Selectwoman Hazard seconded the motion.

Arcudi – Aye, Hazard – Aye, Keyes – Aye

### Appointments and Resignations

Resignation of Full-Time Firefighter/Paramedic Jarrod Taranto, effective November 30, 2021

Chair Keyes read the letter of resignation of full-time firefighter/paramedic, Jarrod Taranto.

Chair Keyes stated that this is another big loss to the Department. Chief Daige stated that this is the twelfth full-time member that he has hired, that has left the Town of Hopedale for a position in another Town with more staffing and better pay. This is an issue that the Town needs to address immediately, otherwise we will continue to see employees leave for these reasons. Chief Daige stated that he is grateful for Jarrod wanting to stay on as a call firefighter and assist the Hopedale community. Daige stated that Jarrod is an excellent employee and will be very missed.

Selectwoman Hazard moved to accept the resignation of full-time firefighter/paramedic Jarrod Taranto effective November 30, 2021. Selectman Arcudi seconded the motion.



Arcudi – Aye, Hazard – Aye, Keyes – Aye

Selectman Arcudi moved to appoint Jarrod Taranto as a call firefighter/paramedic effective December 1, 2021. Selectwoman Hazard seconded the motion.

Hazard – Aye, Arcudi – Aye, Keyes – Aye

Appointment of Jennifer Richard as a Provisional Full-Time Step 1 Firefighter/EMT, effective December 6, 2021

Chair Keyes read the appointment recommendation letter provided by Fire Chief Daige. Chief Daige stated that he has confirmed with the Union regarding Jennifer Richards position with the Fire Department. The Select Board thanked Jennifer for her dedication to the Town and the Hopedale Fire Department. The Board thanked Jennifer for her service.

Selectwoman Hazard moved to appoint Jennifer Richard as a Provisional Full-Time Step 1 Firefighter/EMT, effective December 6, 2021. Selectman Arcudi seconded the motion.

Arcudi – Aye, Hazard – Aye, Keyes – Aye

### New Business

Municipal Notes Sale, submitted by the Treasurer/Collector Stephanie L’Etalien (Vote)

Chair Keyes stated that the Finance Director, Stephanie L’Etalien requested that the Board sign this document in person and that it is very time sensitive. Selectman Arcudi stated that the interest rate on this Note is .45%. The Town is combining old notes with the new leaf blower and the dump truck. The total is \$996,943.

Selectman Arcudi moved to accept the detailed information on the Municipal Note Sale submitted by Stephanie L’Etalien for a total of \$996,943 at a rate of .45% effective November 10, 2021 with a first due date one year from today. Selectwoman Hazard seconded the motion.

Arcudi – Aye, Hazard – Aye, Keyes – Aye

### Old Business

Sign PFAS Legal Services Agreement from SL Environmental\*

Chair Keyes stated that they have met with SL Environmental a few times. Keyes was very impressed with their experience and expertise. Selectman Arcudi stated that there is no cost to the Town per this legal agreement, SL Environmental is doing this litigation as part of a suit. SL Environmental takes on all of the expenses regarding fighting the lawsuit, if the Town wins, SL Environment will take 32.75% of the settlement. If there is no settlement, then the Town does not owe anything. Within 30 days, the Town or SL Environmental can walk away from agreement. Ed Burt, Chair of the Water Commission stated that the Water Commission recommends to proceed with this agreement.

Selectman Arcudi make a motion for discussion to grant the Select Board Chair to sign the PFAS Legal Services Agreement with SL Environmental. Selectwoman Hazard seconded the motion.

Arcudi – Aye, Hazard – Aye, Keyes – Aye

Superior Court Decision Reilly, et als. (Ten Taxpayers) v. Town of Hopedale, et als.; Outcome of Friday (11/19) Executive Session Discussion; Attorney Peter Durning present

Chair Keyes stated that this will not be an interactive agenda item with the public. Attorney Durning will be speaking tonight regarding the Superior Court Decision. At a future meeting, the Select Board will allow questions and comments from the public. Attorney Durning stated that recently he has caucused with the Select Board and Attorney Riley in an executive session last Friday. The update that Attorney Durning can provide is that upon review of Judge Goodwin's memorandum of decision and judgement Attorney Riley with Attorney Durning's concurrence, concluded that the memorandum of decision did not contain enough specific information to give the Select Board appropriate guidance regarding the avenues that it could pursue. Attorney Durning stated that a key point of Judge Goodwin's decision was that Judge Goodwin denied the plaintiffs their request of declaratory relief under count two because Judge Goodwin determined that the party lacked standing to challenge the decision, but the Judge also granted the motions for judgement on the pleadings by the Town and the Railroad with respect to count two. In the discussion, Judge Goodwin noted that "it lies within the Boards sole discretion whether to determine to seek Town Meeting approval for the settlement agreement to renew its attempt to enforce the option or to do neither". Attorney Riley and Attorney Durning saw too many difficulties from the Town to go forward with one of the three options without further clarification from the Court. Earlier today, pursuant to the Massachusetts ruled of civil procedure, Attorney Riley served a motion upon the litigants in that superior court action is a motion for clarification of judgement. The litigants of this matter will have an opportunity to respond to the motion for clarification. This matter will come back to Judge Goodwin so she can come back to the Board with a clearer decision. Attorney Riley intends to submit an emergency motion, for the purpose to stay the running of the 60-day period that Judge Goodwin references in her decision. In Judge Goodwin's decision it states that the Town has 60 days to pick one of the three options.

Chair Keyes stated that from the executive session, it was a robust discussion. Ultimately, the Select Board came to a decision where all three members felt this was the best action. Selectwoman Hazard wanted to reassure the residents that the Select Board asking for clarification does not solidify a specific decision by the Board. The Select Board will still be discussing what is best for Hopedale.

Public and Board Member Comments (votes will not be taken)

Rob Fahey stated that the zoom option is something that he feels is a great option for the public so they can join and participate these meetings. He asked for this option to stay after COVID regulations end.

#### Future Agenda Items

Selectman Arcudi asked to have the Fire Chief on a future meeting to discuss what the Fire Department needs.

Selectwoman Hazard asked to revisit reviewing and approving the AP and Payroll warrant process.

#### Executive Session:

Chair Keyes read the executive session purpose below.

In accordance with G.L. c. 30A, §21(a)(3) (Purpose #3), to discuss strategy with respect to collective bargaining and litigation that an open meeting may have a detrimental effect on the bargaining and litigation position of the public body and the chair so declares, which he does. (CB; Call Firefighters)

Selectman Arcudi moved to enter executive session for purpose #3, to discuss strategy with respect to collective bargaining and litigation that an open meeting may have a detrimental effect on the bargaining and litigation position of the public body and the chair so declares, which he does. (CB; Call Firefighters). Selectwoman Hazard seconded the motion.

Arcudi – Aye, Hazard – Aye, Keyes – Aye

Chair Keyes dissolved the meeting at 9:13PM

*Submitted by:*

*Lindsay Mercier*  
*Lindsay Mercier, Executive Assistant*  
*Adopted:* \_\_\_\_\_

**HOPEDALE COUNCIL ON AGING  
43 HOPE STREET  
HOPEDALE, MA 01747  
(508)634-2208  
hopedalecoa@comcast.net**

DATE: November 22, 2021

TO: Hopedale Select Board

FROM: Hopedale Council on Aging



RE: Request to Accept Donations

The Council on Aging requests that the Select Board accept the following donations.

Mary and Joseph Arcudi	\$ 20.00
Elmer and Mona Gross	\$100.00
<b>Total</b>	<b>\$120.00</b>

## HOST COMMUNITY AGREEMENT

**Between**

**TOWN OF HOPEDALE, MASSACHUSETTS**

**and**

**GREEN RIVER CANNABIS COMPANY, INC.**

This Host Community Agreement ("Agreement") is entered into this \_\_\_\_ day of January 2020 by and between Green River Cannabis Company, Inc. , a Massachusetts Corporation with a principal office address of 30 Washington Street, Attleboro, Massachusetts ("Operator" or "Establishment") and the Town of Hopedale, a Massachusetts municipal corporation with a principal address of 78 Hopedale Street, Hopedale, MA01747 ("Town").

WHEREAS Operator intends to apply to the Cannabis Control Commission (the "CCC"), to operate a 1500 square foot Retail Marijuana Establishment at the property located at 5 Condon Way, Unit E Parcel ID 22-32-22 within the Town (the "Premises" or the "Facility"), pursuant to G. L. c. 94G (the "Act") and 935 CMR 500: Adult Use of Marijuana and such approvals as may be issued by the Town in accordance with its Zoning Bylaw and other applicable local regulations; and

WHEREAS Operator seeks to be licensed as a Retail Marijuana Establishment authorized to purchase and transport cannabis or marijuana product from Marijuana Establishments and to sell and educate, or otherwise transfer this product to Marijuana Establishments and to consumers; and

WHEREAS the Operator anticipates that the Town will incur additional expenses and impacts on the Town's road and other infrastructure systems, law enforcement, fire protection services, permitting and consulting services and public health, as well as unforeseen impacts, both quantifiable and unquantifiable on the Town; and

WHEREAS the Operator intends to provide certain benefits to the Town in the event that it receives the requisite License from the CCC to operate the Facility and receives all required local permits and approvals from the Town; and

WHEREAS Operator desires to provide community impact fee payments to the Town pursuant to M.G.L. c.94G, § 3(d), and any successor statutes and regulations, in order to address any costs imposed upon the Town by the Establishment's operations in the Town; and

WHEREAS the Town supports Operator's intention to operate a Retail Marijuana Establishment for sale of adult-use marijuana in the Town; and

WHEREAS the Parties intend by this Agreement to satisfy the provisions of M.G.L. c. 94G, §3(d), as established by the Act, applicable to the operation of an adult use Retail Marijuana Establishment in the Town; and

WHEREAS the Parties agree that the above Recitals are true and accurate and that they are incorporated herein and made a part hereof;

NOW THEREFORE, in consideration of the mutual promises and covenants set forth above, and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the Operator and the Town agree as follows:

**1- Community Impact Fee:** The Town anticipates that, as a result of the Operator's operation of the Retail Marijuana Establishment, the Town will incur additional expense and impacts upon its road system, law enforcement, inspectional services, permitting services, administrative services, public health services and education in addition to potential additional unforeseen impacts upon the Town. Accordingly, in order to mitigate the direct and indirect financial impact upon the Town and use of Town resources, the Operator agrees to annually pay a community impact fee to the Town, in the amounts and under the terms provided herein (The "Annual Payments",

A. **Payments:** In the event that the Operator obtains a Final License, or such other license and/or approval as may be required, for the operation of a Retail Marijuana Establishment by the CCC or such other state licensing or monitoring authority, which permits and/or licenses allow the Operator to locate, occupy and operate the Facility in the Town, then the Operator agrees to provide the following Community Impact Fee:

B. Operator shall make Annual Payments in the amount equal to three percent (3%) of the gross revenue from the Retail Marijuana Establishment's annual cannabis or marijuana product sales. The term "gross sales" shall mean the total of all sales transactions of the Facility of marijuana and marijuana infused products.

1. Annual Payments shall be quarterly each calendar year on the 1<sup>st</sup> Tuesday of January, April, July and October, beginning on the first of such dates after the establishment has received both an occupancy permit from the Building Commissioner and the issuance of a Final License and "approval to sell" at the Facility from the CCC.

2. Operator shall submit financial records to the Town within 30 days after payment of each quarterly installment of the Annual Payment with a certification of sales with respect to each such payment. Operator shall maintain its books, financial records, and other compilations of data pertaining to the requirements of this Agreement in accordance with standard accounting practices and any applicable regulations or guidelines of the CCC. All records shall be kept for a period of at least seven (7) years. Upon request by the Town, the Company shall provide the Town with the same access to its financial records (to be treated as confidential, to the extent allowed by law) as it is required by the CCC and Department of Revenue for purposes of obtaining and maintaining a license for the Facility.

3. The Annual Payments shall continue for a period of five (5) years from the date the Facility commences operations. At the conclusion of the five (5) year term, the

Parties shall negotiate the terms of a new Annual Community Impact Fee as an Amendment to this Agreement.

4. The Town may use the above referenced payments as it deems appropriate in its sole discretion but shall make a good faith effort to allocate said payments for road and other infrastructure systems, law enforcement, fire protection services, inspectional services, public health and addiction services and permitting and consulting services, as well as unforeseen impacts upon the Town.
5. Pursuant to M.G.L c. 94G, §3(d), a "community impact fee shall be reasonably related to the costs imposed upon the municipality by the operation of the marijuana establishment..." Notwithstanding the foregoing, the Parties hereby acknowledge the difficulty in computing actual Town costs and agree that impacts may result in municipal budgetary increases that cannot be separately identified or precisely quantified. Consequently, the Operator agrees that for the initial 5- year term of the Community Impact Fee, the payments due under this Agreement are reasonably related to Town costs and waives any claims to the contrary.

#### **B. Additional Costs, Payments and Reimbursements**

1. **Permit and Connection Fees:** The Operator hereby acknowledges and agrees to pay the usual and customary building permit and other permit application fees, sewer and water connection fees, and all other local charges and fees generally applicable to other commercial developments in the Town.
  2. **Facility Consulting Fees and Costs:** The Operator shall reimburse the Town for any and all reasonable and customary consulting costs and fees, including without limitation, reasonable attorneys' fees related to any land use applications concerning the Facility, negotiation of this and any other related agreements, and any review concerning the Facility, including planning, engineering, and any related reasonable disbursements at standard rates charged by the above-referenced consultants in relation to the Facility. Provided, however, that any upfront payments for such fees and costs shall be deducted from the Community Impact Fee payment.
  3. **Late Payment Penalty:** The Operator acknowledges that time is of the essence with respect to their timely payment of all funds required under this Agreement. In the event the Operator fails to make timely payment as set forth above, the Town will provide the Operator with written notice of delinquency. Any payments that are not fully made within fifteen (15) business days of the date written notice of delinquency has been received by the Operator will be subject to a late payment penalty equal to five percent (5%) of such required payments.
- 2- **Term and Termination:** Except as expressly provided herein, this Agreement shall take effect on the day above written, subject to the contingencies noted herein for the Operator's necessary state and local permits, licenses and approvals. This agreement shall continue in effect for so long as the Facility operates as a Retail Marijuana Establishment within the Town, with the exception of the Community Impact Fee, which shall be governed by the provisions of Section 1 of this Agreement, or until an amendment or new Host Community Agreement that supersedes this Agreement is executed.

In the event the Operator has not secured a Final License from the CCC and all necessary local permits from the Town and commenced operations at the Facility within one (1) year from the Effective Date of this Agreement, this Agreement shall expire and the Operator shall be required to negotiate a new Agreement in order to operate the Facility within the Town, unless the Board of Selectmen, in its discretion, agrees to an additional extension of time, for good cause, which shall not be unreasonably withheld, which shall include the time required to pursue or await the determination of an appeal of the special permit or other legal proceeding.

The Board of Selectmen voted on Monday, December 21, 2020, to allow an extension of this Agreement until December 21, 2021 for the Operator to secure a Final License from the CCC and all necessary local permits from the Town and commenced operations at the Facility.

3. **Local Taxes:** At all times during the Term of this Agreement, property, both real and personal, owned or operated by Operator shall be treated as taxable, and all applicable real estate and personal property taxes for that property shall be paid either directly by the Operator or by its landlord, and neither the Operator nor its landlord shall object or otherwise challenge the taxability of such property and shall not seek a non-profit exemption from paying such taxes.

Notwithstanding the foregoing, (i) if real or personal property owned, leased or operated by the Operator is determined to be non-taxable or partially non-taxable, or (ii) if the value of such property is abated with the effect of reducing or eliminating the tax which would otherwise be paid if assessed at fair cash value as defined in G.L. c. 59, §38, or (iii) if the Operator is determined to be entitled or subject to exemption with the effect of reducing or eliminating the tax which would otherwise be due if not so exempted, then the Operator shall pay to the Town an amount which when added to the taxes, if any, paid on such property, shall be equal to the taxes which would have been payable on such property at fair cash value and at the otherwise applicable tax rate, if there had been no abatement or exemption; this payment shall be in addition to the payment made by the Operator under Section 1 of this Agreement.

4. **Applicability of Host Agreement:** The provisions of this Host Agreement apply only to the Operator's use of the facility to operate a Retail Marijuana Establishment in accordance with 935 CMR 500.000 as licensed by the CCC.
5. **Security:** Operator shall maintain security at the Facility at least in accordance with a security plan presented to the Town and approved by the CCC. Additionally, the Operator shall at all times comply with Massachusetts law and local law regarding security of the Facility. Operator shall coordinate with the Hopedale Police Department in the development and implementation of security measures, as required pursuant to applicable regulations and otherwise, including determining the placement of exterior security cameras. Operator will maintain a cooperative relationship with the Hopedale Police Department, including but not limited to, periodic meetings to review operational concerns and communication to Hopedale Police Department of any suspicious activities on the site.

Operator shall promptly report the discovery of the following to the Hopedale Police Department immediately: diversion of marijuana, unusual discrepancies identified during inventory, theft, loss and any criminal activity; unusual discrepancy in weight or inventory during transportation; any vehicle accidents, diversions, losses, or other reportable incidents that occur during transport; any suspicious act involving the sale, cultivation, distribution, processing, or production of marijuana by any person; unauthorized destruction of marijuana; any loss or unauthorized alteration of records related to marijuana or marijuana establishment agents; an alarm activation or other event that requires response by public safety personnel; failure of any security alarm system due to loss of electrical power or mechanical malfunction that is expected to last longer than eight



hours; and any other breach of security.

The Operator shall implement a comprehensive diversion prevention plan to prevent diversion of marijuana and marijuana products into the illicit market and to minors, such plan to be in place prior to the commencement of operations at the Facility. The Operator shall present the diversion plan to the Police Department for its review and feedback and, to the extent required by the Police Department, work collaboratively to implement any suggested changes, amendments or modifications to address local concerns.

The Operator agrees and acknowledges that annual inspections of the Facility by the Town's Police Department, Town's Fire Department, Building Department and Board of Health shall be a condition of continued operation in Town and agrees to cooperate with the Town's Police Department, Town's Fire Department and Board of Health in providing access for scheduled and unscheduled inspections of the Facility.

6. **Local Hiring:** To the extent permissible by law, Operator commits to hiring local, qualified employees. In addition to the direct hiring, Operator will work in a good faith, legal, and non-discriminatory manner to hire local vendors, suppliers, contractors and builders from the Town area whenever otherwise comparable local vendors are available.
7. **Improvements to Property:** Operator shall make capital improvements to the property such that the property will match the look and feel of the Town and be of construction standards at least at the quality of other nearby businesses and construction standards per state and local Building Code requirements.
8. **Registration and Approvals Required:** The obligations of Operator and the Town recited herein are specifically contingent upon the obtaining a final license for the operation of a Retail Marijuana Establishment from the CCC to operate in Town, and all necessary local permits and approvals.
9. **Cooperation:** The Town agrees to submit to the CCC the required certifications required to support a License Application but makes no representation or promise that it will act on any other license or permit request, including, but not limited to any zoning application submitted for the Facility, in any particular way other than by the Town's normal and regular course of conduct and in accordance with its rules and regulations and any statutory guidelines governing them.

This Agreement does not affect, limit, or control the authority of Town boards, commissions, and departments to carry out their respective powers and duties to decide upon and to issue, or deny applicable permits and other approvals under the statutes and regulations of the Commonwealth, the General and Zoning Bylaws of the Town, or applicable regulations of those boards, commissions, and departments or to enforce said statutes, Bylaws, and regulations. The Town, by entering into this Agreement, is not thereby required or obligated to issue such permits and approvals as may be necessary for the Facility to operate in the Town, or to refrain from enforcement action against the Operator and/or its Facility for violation of the terms of said permits and approvals or said statutes, Bylaws, and regulations.

10. **Compliance and Indemnification:** The Operator shall comply with all laws, regulations and orders applicable to the operation of a Retail Marijuana Establishment, such provisions being incorporated herein by reference, and shall be responsible for obtaining all necessary licenses, permits, and approval required for the operation of a Retail Marijuana Establishment.

The Operator shall indemnify, defend, and hold the Town harmless from and against any and all claims, demands, liabilities, actions, causes of actions, defenses, proceedings and/or costs and expenses including attorney's fees, brought against the Town, their agents, departments, officials, employees, insurers and/or successors, by any third party arising from or relating to the development of the Facility to the extent caused by or contributed to by the Operator, but specifically excluding such matters caused by the negligence of the Town, its agents, departments, officials, employees, insurers and/or successors. Such Indemnification shall include, but shall not be limited to, all reasonable fees and reasonable costs of attorneys and other reasonable consultant fees and all fees and costs (including but not limited to attorneys and consultant fees and costs) shall be at charged at regular and customary municipal rates, of the Town's choosing incurred in defending such claims, actions, proceedings or demands. The Operator agrees, within thirty (30) days of written notice by the Town, to reimburse the Town for any and all costs and fees incurred in defending itself with respect to any such claim, action, proceeding or demand. As a condition of indemnification pursuant to this Section, the Town shall: (a) notify the Operator within a reasonable period of time of any matter concerning which the Town may seek indemnification hereunder; (b) at the request of the Operator give the Operator control over the investigation, defense and/or settlement of such matter; and (c) cooperate to the greatest possible extent in such investigation, defense and/or settlement.

11. **Retention of Regulatory Authority:** By entering into this Agreement, Town does not waive any enforcement rights or regulatory authority it currently holds over any business in Town.

12. **Notices:** Any and all notices, or other communications required or permitted under this Agreement, shall be in writing and also by email. Any and all written notices, consents, demands, requests, approvals or other communications required or permitted under this Agreement, shall delivered by hand or mailed postage prepaid, return receipt requested, by registered or certified mail or by other reputable delivery service, and shall be deemed given when so delivered by hand, if so mailed, when deposited with the U.S. Postal Service, or, if sent by private overnight or other delivery service, when deposited with such delivery service.

**To Town:**

Diana Schindler  
Town  
Administrator  
78 Hopedale  
Street  
Hopedale, MA  
01747

**Copy To:**

Town Counsel  
Brian W. Riiey,  
KP-Law, PC  
101 Arch  
Street, 12<sup>th</sup>  
Floor Boston,  
MA02110

**To Operator:**

Constant  
Poholek, Jr.  
Green River Cannabis Company, Inc  
30 Washington Street,  
Attleboro, MA 02703

13. **Severability:** If any term or condition of this Agreement or any application thereof shall to any extent be held invalid, illegal, or unenforceable by the court of competent jurisdiction, the validity, legality, and enforceability of the remaining terms and conditions of this Agreement shall not be deemed affected thereby unless the Town would be substantially or materially prejudiced. Further, the Operator agrees that it will not challenge, in any jurisdiction, the enforceability of any provision included in this Agreement; and to the extent the validity of this Agreement is challenged by the Operator in a court of competent jurisdiction, the Operator shall pay for all reasonable fees and costs incurred by the Town in enforcing this Agreement.

14. **Successors/Assigns:** This Agreement is binding upon the parties hereto, their successors, assigns and legal representatives. The Operator shall not assign, sublet, or otherwise transfer its rights nor delegate its obligations under this Agreement, in whole or in part, without the prior written consent from the Town and shall not assign any of the monies payable under this Agreement, except by and with the written consent of the Town and shall not assign or obligate any of the monies payable under this Agreement, except by and with the written consent of the Town.

Events deemed an assignment include, without limitation: (i) Company's final and adjudicated bankruptcy whether voluntary or involuntary; (ii) the Company's takeover or merger by or with any other entity; (iii) the Company's outright sale of assets and equity, majority stock sale to another organization or entity for which the Company does not maintain a controlling equity interest; (iv) or any other change in ownership or status of the Company; (v) any assignment for the benefit of creditors; and/or (vi) any other assignment not approved in advance in writing by the Town. Prior to any sale or transfer of a controlling interest in the Company, the Company shall obtain the consent of the Town, which shall not be unreasonably withheld or delayed'

15. **Governing Law:** This Agreement shall be governed by, construed and enforced in accordance with the laws of the Commonwealth of Massachusetts.

16. **Entire Agreement:** This Agreement, including all documents incorporated herein by reference, constitutes the entire integrated agreement between the parties with respect to the matters described. This Agreement supersedes all prior agreements, negotiations and representations, either written or oral, and it shall not be modified or amended except by a written document executed by the parties hereto.

17. **Confidentiality:** Operator may provide to the Town, certain financial information, investment materials, products, plan, documents, details or company history, know-how, trade secrets, and other nonpublic information related to Operator, its affiliates and operations (collectively, the "Confidential Information"). Town (inclusive of its employees, agents, representatives or any other of its affiliated persons) shall not, at any time during the term of this Agreement or at any time, thereafter, disclose to any person or entity, any Confidential Information, except as may be required by court order or law. Operator shall mark each plan, page, or transmission with the word "Confidential".

18. **Modifications:** Modifications to this Agreement may only be effective if made in writing and signed by both parties.

19. **Headings:** The article, section, and paragraph headings in this Agreement are for convenience only and are not part of the Agreement and shall not affect the interpretation of this Agreement.

**20 Countermarks:** This Agreement may be signed in any number of counterparts all of which taken together, shall constitute one and the same instrument, and any party hereto may execute this Agreement by signing one or more counterparts.

**21 No Joint Venture**

The Parties hereto agree that nothing contained in this Agreement or any other documents executed in connection herewith is intended or shall be construed to establish the Town and the Operator and any other successor, affiliate or corporate entity as joint ventures or partners.

**22 Nullity**

This Agreement shall be null and void in the event that the Operator does not locate a Retail Marijuana Establishment in the Town or relocate s the Facility out of the Town . Further , in the case of any relocation out of the Town , the Company agrees that an adjustment of Annual Community Impact Fee due to the Town hereunder shall be calculated based upon the period of occupation of th e Facility within the Town, but in no event shall the Town be responsible for the return of any funds provided to it by the Company.

**23. Third Parties**

Nothing contained in this Agreement shall create a contractual relationship with or a cause of action in favor of a third party against either the Town or the Company.

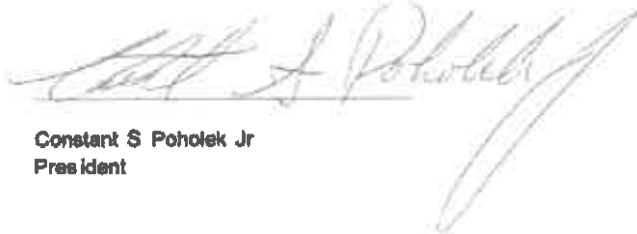
IN WITNESS

WHEREOF, the parties hereto have executed this Agreement on the day and year first written above

For the TOWN OF HOPEDALE BOARD OF SELECTMAN

*Brian H. Keyes*  
  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

For The:  
Green River Cannabis Company, Inc.

  
\_\_\_\_\_  
Constant S Poholek Jr  
President

License Type(s)	LIC BUSINESS NAME	LIC PHYSICAL ADD #1	BUS TOWN	BUS STATE	BUS ZIP	LIC BUSINESS DBA	TAX STATUS	PACKET STATUS
Class I	D.C. Bates Equipment Co. Inc.	10 Airport Road	Hopedale	MA	01747	D.C. Bates Equipment	current	PACKET COMPLETE
Class II	Milford Auto Sales, Inc.	17 Airport Road	Hopedale	MA	01747	Milford Auto Sales	current	PACKET COMPLETE
Class II	Arthur Pigeon dba A&S Detailing & Auto Sales	244 S. Main Street	Hopedale	MA	01747	A&S Detailing & Auto Sales	current	PACKET COMPLETE
Class II	Costa Auto Group, Inc.	11 Airport Road	Hopedale	MA	01747	Costa Auto Group, Inc.	current	PACKET COMPLETE
Class II	Duest Motors	5 Charlesview Road	Hopedale	MA	01747	Duest Motors	current	PACKET COMPLETE
Class II	Lord & Son Auto Body & Paint	13 Elmwood Avenue	Hopedale	MA	01747	Lord & Son Auto Body & Paint	current	PACKET COMPLETE
Class II	Off Lease Auto	236 S. Main Street	Hopedale	MA	01747	Off Lease Auto	current	PACKET COMPLETE
Class II	Patriots Custom Auto, Inc.	18 Airport Drive	Hopedale	MA	01747	Patriots Custom Auto, Inc.	current	PACKET COMPLETE
Common Victualler	Christiano Pizza, Inc.	60 Hopedale Street	Hopedale	MA	01747	Christiano Pizza	current	PACKET COMPLETE
Common Victualler	Cumberland Farms, Inc	115 Mendon Street	Hopedale	MA	01747	Cumberland Farms #0197	current	PACKET COMPLETE
Common Victualler	Michael Keromos, Inc. dba Maria's Pizza	156 Hartford Avenue	Hopedale	MA	01747	Maria's Pizza	current	PACKET COMPLETE
Common Victualler	Zong Ju Zou dba Hong Kong House	150 Hartford Avenue	Hopedale	MA	01747	Hong Kong House	current	PACKET COMPLETE
Common Victualler	Hopedale Donuts, Inc.	144 Hartford Avenue	Hopedale	MA	01747	Dunkin Donuts	current	PACKET COMPLETE
Common Victualler	Richard Yancey dba Beyond Full	76 Hopedale Street	Hopedale	MA	01747	Beyond Full	current	PACKET COMPLETE
Common Victualler	Hopedale Country Club, Inc	90 Mill St	Hopedale	MA	01747	Hopedale Country Club	current	PACKET COMPLETE
All Alcohol (Restaurant)	Hopedale Country Club, Inc	90 Mill St	Hopedale	MA	01747	Hopedale Country Club	current	PACKET COMPLETE
All Alcohol (Package Store)	404 Main St Hopedale LLC	404 S Main St	Hopedale	MA	01747	Brother's Liquor	current	PACKET COMPLETE
All Alcohol (Package Store)	J&M and Sons, Inc	130 Mendon St	Hopedale	MA	01747	Hopedale Package Store	current	PACKET COMPLETE
Non Sunday Entertainment	Hopedale Country Club, Inc	90 Mill St	Hopedale	MA	01747	Hopedale Country Club	current	PACKET COMPLETE

Renewal Totals:

Liquor License Renewals: 3 (On-Premise AB: 1, Off-Premise AB: 1, Off-Premise WM: 1)

Class I: 1

Class II: 7

Class III: 0

Common Victualler: 8

Non-Sunday Entertainment: 1



Jean M. Lorizio, Esq.  
Commission Chairman

**Commonwealth Of Massachusetts  
Alcoholic Beverages Control Commission  
95 Fourth Street, Suite 3  
Chelsea, MA 02150-2358**

**2022  
Retail License Renewal**

License Number: 00004-PK-0542                      Municipality: HOPEDALE  
License Name : 404 Main Street Hopedale LLC                      License Class: Annual  
DBA : Mutual Mart                      License Type: Package Store  
Premise Address: 404 South Main Street Hopedale, MA 01747                      License Category: Wines and Malt  
Manager: Kinjal Patel

I hereby certify and swear under penalties of perjury that:

1. I am authorized to sign this renewal pursuant to M.G.L. Chapter 138;
2. The renewed license is of the same class, type, category as listed above;
3. The licensee has complied with all laws of the Commonwealth relating to taxes; and
4. The premises are now open for business (if not, explain below).

KSP  
Signature

11-30-21  
Date

Kinjal Patel  
Printed Name

Owner  
Title

Please complete and return this form to the Local Licensing Authority.

Additional Information:









# HOPEDALE PACKAGE STORE LIQUOR LICENSE RENEWAL PACKET

## TOWN OF HOPEDALE ALCOHOL LICENSE CHECKLIST

**Please Note:** Per Licensing Authority, applications that are late or incomplete by not including the requested documentation will be subject to an additional processing fee of \$100

- Renewal Application deadline is Friday, November 5, 2021 at 4 PM**
- Alcohol License Renewal Fee \$1,100.00 (Must be included with application)

### **COMPLETED AND SIGN THE LICENSE RENEWAL FORMS** (must be completed by current manager of license)

- ABCC LICENSE RENEWAL APPLICATION (must be signed and completed by **Current** Manager)
- IF ANY INFORMATION HAS CHANGED SINCE LAST RENEWAL, PLEASE COMPLETE THE BLANK ABCC FORM. The **Current** Manager must sign the form. If the manager has changed since the last renewal, you notify the Board of Selectmen office 508-634-2203 X210
- MASS DOR (REAP FORM) Per M.G.L. Chapter 62, §49A
- COMPLETE 24- HOUR EMERGENCY CONTACT FORM
- WORKER'S COMPENSATION INSURANCE AFFIDAVIT

### **OBTAIN AND SUBMIT** the following list of items

- WORKER'S COMPENSATION CERTIFICATE-** (must obtain and provide current certificate Insurance carrier can email current certificate to Lindsay Mercier at [Lmercier@hopedale-ma.gov](mailto:Lmercier@hopedale-ma.gov))

### **Please check the box below for the business type for the license renewal**

- Corporation
- Partnership
- Sole Proprietor
- Individual
- Other
- BUSINESS CERTIFICATE** obtain current business certificate or submit a copy of current certificate  
Please contact the Town Clerk's office at (508)634-2203 X 215 to obtain  
**Please Note: Business Name listed on Business Certificate must match license application. All corporate officers must be listed and appear before Town Clerk and sign application. If Business names do not match - New or Renewal License Applications will not be granted.**

Date business certificate expires: 11/9/2022

### **ON PREMISES §12 LICENCE HOLDERS ONLY-** Must provide the following additional information/forms:

- Effective August 26, 2010, no license under M.G.L. c. 138, §12 shall be issued or renewed until the applicant or licensee provides proof of mandatory Insurance coverage by filing a certificate of Insurance in a form acceptable to the local licensing authority ("LLA"). As a result, applicants for §12 licenses must provide proof of insurance coverage under a liquor legal liability insurance policy for bodily injury or death for a minimum amount of \$500,000 as a condition to receive a license.

## HOPEDALE PACKAGE STORE LIQUOR LICENSE RENEWAL PACKET

- Copies of current Crowd Manager Certifications for each trained Crowd Manager per M.G.L. Chapter 304 of the Acts of 2004. For updates and current information on the crowd manager law please refer to the following website; <http://www.mass.gov/eopss/agencies/dfs/crowd-manager-regulations-and-training-prog-.html>
- All on-premise licenses must have a current Fire/Safety Certificate per M.G.L. Chapter 304 of the Acts of 2004. The certificate dated by no later than November 30 each year
- If your business serves food, you must include a current Board of Health food permit. Please contact the Board of Health office at (508)-634-2203 X 222 if you need a copy

### **ALL LICENSE RENEWAL APPLICANTS PLEASE READ, SIGN AND DATE**

- Applications received after posted date and time will be subject to a \$100 fee
- Incomplete applications will be subject to a \$100 fee
- Missing documentation will be subject to a \$100 fee

### **ALL LICENSE RENEWAL LICENSE HOLDERS: PLEASE READ, SIGN AND DATE STATEMENT OF PREMISE**

- If you are ***not*** making changes to your current ABCC License(s) including the following; Business Name, Manager, Days/Hours of Operation, Types of Alcohol, Storage areas or premises changes, please check the box and sign and date below (this must be signed by a current manager listed on license)

*I am requesting to renew my Liquor License(s) set to expire this calendar year on December 31. I have not made any of the above changes and promise to report any changes immediately to the Licensing Board.*

*Gary Neves*

Print Name of License Holder

*Harold Jones 11/15/21*

Signature and Date of License Holder

### **IF YOU MADE CHANGES TO THE TERMS OF YOUR EXISTING ABCC LICENSE, PLEASE CONTACT:**

Lindsay Mercier, Board of Selectmen's Office  
(508) 634 -2203 X 210  
[lmMercier@hopedale-ma.gov](mailto:lmMercier@hopedale-ma.gov)

**ANY CHANGE MADE TO YOUR EXISTING ABCC LICENSE REQUIRES PRIOR APPROVAL BY BOTH THE BOARD OF SELECTMEN AND ABCC**

**LICENSES WILL NOT BE ISSUED IF YOU OWE ANY MONEY TO THE TOWN OF HOPEDALE OR THE COMMONWEALTH OF MASSACHUSETTS**

***BE SURE TO INCLUDE THIS CHECKLIST WITH YOUR APPLICATION AND FORMS***




**HOPEDALE PACKAGE STORE LIQUOR LICENSE RENEWAL PACKET**

**MASSACHUSETTS DEPARTMENT OF REVENUE**

**REVENUE ENFORCEMENT AND PROTECTION ATTESTATION**  
**(REAP)**

I certify under penalties of perjury that I, to the best of my knowledge and belief, have filed all state tax returns and paid all state taxes required by law.

J&M And Sons, Inc. (d/b/a, Hopedale Package Store)  
\*Signature of Individual or Corporate Name (Mandatory)  
Gary Neves Treasurer  
 (icable)  
ntification Number

\*Licenses or permits will not be issued unless this certification clause is signed by the applicant.

\*\* Will be furnished to the MA Department of Revenue to determine whether you have met tax filing or tax payment obligations. Licensees who fail to correct their non-filing or delinquency will be subject to license suspension or revocation. This request is made under the authority of M.G.L. Chapter 62C, § 49A.





## **Information and Instructions**

Massachusetts General Laws chapter 152 requires all employers to provide workers' compensation for their employees. Pursuant to this statute, an *employee* is defined as "...every person in the service of another under any contract of hire, express or implied, oral or written."

An *employer* is defined as "an individual, partnership, association, corporation or other legal entity, or any two or more of the foregoing engaged in a joint enterprise, and including the legal representatives of a deceased employer, or the receiver or trustee of an individual, partnership, association or other legal entity, employing employees. However, the owner of a dwelling house having not more than three apartments and who resides therein, or the occupant of the dwelling house of another who employs persons to do maintenance, construction or repair work on such dwelling house or on the grounds or building appurtenant thereto shall not because of such employment be deemed to be an employer."

MGL chapter 152, §25C(6) also states that "every state or local licensing agency shall withhold the issuance or renewal of a license or permit to operate a business or to construct buildings in the commonwealth for any applicant who has not produced acceptable evidence of compliance with the insurance coverage required." Additionally, MGL chapter 152, §25C(7) states "Neither the commonwealth nor any of its political subdivisions shall enter into any contract for the performance of public work until acceptable evidence of compliance with the insurance requirements of this chapter have been presented to the contracting authority."

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### **Applicants**

Please fill out the workers' compensation affidavit completely, by checking the boxes that apply to your situation and, if necessary, supply your insurance company's name, address and phone number along with a certificate of insurance. Limited Liability Companies (LLC) or Limited Liability Partnerships (LLP) with no employees other than the members or partners, are not required to carry workers' compensation insurance. If an LLC or LLP does have employees, a policy is required. Be advised that this affidavit may be submitted to the Department of Industrial Accidents for confirmation of insurance coverage. Also be sure to sign and date the affidavit. The affidavit should be returned to the city or town that the application for the permit or license is being requested, not the Department of Industrial Accidents. Should you have any questions regarding the law or if you are required to obtain a workers' compensation policy, please call the Department at the number listed below. Self-insured companies should enter their self-insurance license number on the appropriate line.

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### **City or Town Officials**

Please be sure that the affidavit is complete and printed legibly. The Department has provided a space at the bottom of the affidavit for you to fill out in the event the Office of Investigations has to contact you regarding the applicant. Please be sure to fill in the permit/license number which will be used as a reference number. In addition, an applicant that must submit multiple permit/license applications in any given year, need only submit one affidavit indicating current policy information (if necessary). A copy of the affidavit that has been officially stamped or marked by the city or town may be provided to the applicant as proof that a valid affidavit is on file for future permits or licenses. A new affidavit must be filled out each year. Where a home owner or citizen is obtaining a license or permit not related to any business or commercial venture (i.e. a dog license or permit to burn leaves etc.) said person is NOT required to complete this affidavit.

The Office of Investigations would like to thank you in advance for your cooperation and should you have any questions, please do not hesitate to give us a call.

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The Department's address, telephone and fax number:

The Commonwealth of Massachusetts  
Department of Industrial Accidents  
Office of Investigations  
Lafayette City Center  
2 Avenue de Lafayette,  
Boston, MA 02111-1750

Tel. (857) 321-7406 or 1-877-MASSAFE

Fax (617) 727-7749

[www.mass.gov/dia](http://www.mass.gov/dia)





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/08/2021

**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).**

<b>PRODUCER</b> HUB NE Association Programs  300 Ballardvale Street Wilmington, MA 01887	CONTACT NAME: PHONE (A/C, H/O, Ext): E-MAIL ADDRESS:	FAX (A/C, H/O):													
	<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A: MA Retail Merchants WC Group Inc.</td> <td></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: MA Retail Merchants WC Group Inc.		INSURER B:		INSURER C:		INSURER D:		INSURER E:		INSURER F:
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<b>INSURED</b> J & M and Sons, Inc. d/b/a Hopedale Package Store 130 Mendon Street Hopedale, MA 01747															

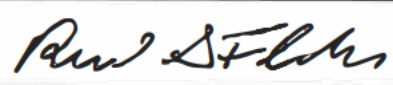
**COVERAGES**      **CERTIFICATE NUMBER:** 00004      **REVISION NUMBER:** 00001

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	ADD. INSR	SUBR. WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	<b>GENERAL LIABILITY</b> <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GENL. AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Per occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMPROP AGG \$ \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO ALLOWED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Per accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
<b>A</b>	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/ELECTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A		1/01/2022	1/01/2023	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE - EA EMPLOYEE \$ 100,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)**

Fax 508-634-2200

<b>CERTIFICATE HOLDER</b> Hopedale Board of Health ATTN: Susan Brouwer PO Box 7 78 Hopedale Street Hopedale, MA 01747	<b>CANCELLATION</b> 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 
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**HOPEDALE PACKAGE STORE LIQUOR LICENSE RENEWAL PACKET**



**THE COMMONWEALTH OF MASSACHUSETTS  
TOWN OF HOPEDALE  
EMERGENCY CONTACT FORM**

Date: 11/15/21

J&M And Sons, Inc. (dba) Hopedale Package Store  
Name of Licensed Business

130 Mendon Street  
Address of Business

**EMERGENCY CONTACT INFORMATION**

Maria Neves  
Name of Emergency Contact

[Redacted contact information]

Licenses applying for or held in the Town of Hopedale:

All Alcohol Retail

**Business Hours**

Weekday Business Hours of Operation Mon-Fri: 10am-9pm

Weekend Business Hours of Operation Sat. & Sun: SA 10AM-9PM; SU 10AM-6PM

**IF YOU ARE APPLYING FOR AN ENTERTAINMENT LICENSE YOU MUST COMPLETE**

Weekday Entertainment Hours Mon-Fri: \_\_\_\_\_

Weekend Entertainment Hours Sat. & Sun: \_\_\_\_\_

Types of Entertainment: \_\_\_\_\_

The premises is  **ALARMED**  **NOT ALARMED**

The premises has  **SPRINKLER SYSTEM @ boiler**  **DOES NOT HAVE SPRINKLER SYSTEM**

**THIS FORM MUST BE COMPLETED BEFORE A LICENSE IS ISSUED**

HOPEDALE PACKAGE STORE / QUORUM / LICENSE RENEWAL PACKET



Lisa M. Pedroll  
Town Clerk

TOWN OF HOPEDALE

78 Hopedale Street - P.O. Box 7  
Hopedale, Massachusetts 01747

Tel: 508-634-2203 X215 Fax: 508-634-2200  
E-mail: lpdroll@hopedale-ma.gov

File #: 2018-98  
Exp. Date: 11-9-2022  
 New Filing  
 Renewal-Prev. # 201404  
\$40.00 Date Paid  
*(Office use only)*

BUSINESS CERTIFICATE

(CK# 12849)

In conformity with the provisions of chapter one hundred ten, section five of the General Laws, as amended, the undersigned hereby declare(s) that a business is conducted under the title of:

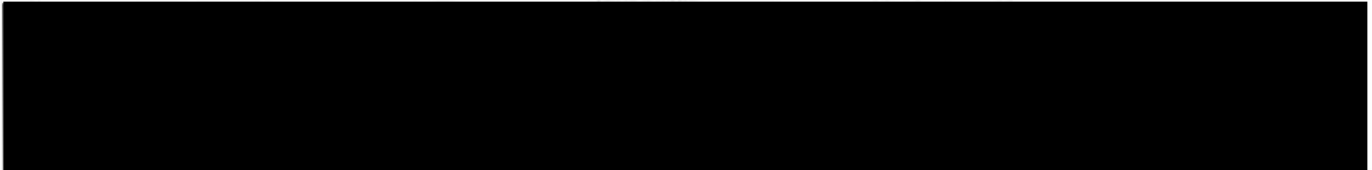
J. Bell and Sons, Inc. (d/b/a, Hopedale Package Store)  
Name of Business (above line)

130 Mendon Street  
Address of Business (above line)

hopedalepackage@gmail.com  
Email Address (above line)

Retail Alcohol  
Type of Business (above line)

by the following named person(s): (Include title, if corporate officer.)

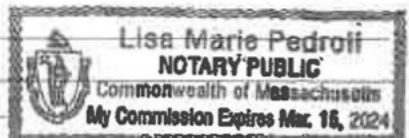


1. [Signature] 2. [Signature]  
\* This license will not be issued unless this certification clause is signed by the applicant.

State of Massachusetts County of Worcester ss.  
On 11/9/18 the above named person(s) personally appeared before me and made oath that the foregoing statement is true.

Signatures: [Signature] (SEAL)  
Received by Town Clerk's Office: \_\_\_\_\_

Notary Public  
Com. Exp. Date:  
[Signature]



\*NOTE: Signature affixed is for business certificate purposes only and does not infer compliance with the Hopedale Zoning By-Laws.

In accordance with the provisions of Chapter 337 of the Acts of 1985 and Chapter 110, Section 5 of Massachusetts General Laws, **BUSINESS CERTIFICATES SHALL BE IN EFFECT FOR FOUR YEARS FROM THE DATE OF ISSUE AND SHALL BE RENEWED EACH FOUR YEARS THEREAFTER.** A statement under oath must be filed with the City/Town Clerk upon discontinuing, retiring or withdrawing from such business or partnership.

Copies of such certificates shall be available at the address at which such business is conducted and shall be furnished on request during regular business hours to any person who has purchased goods or services from such business.

Violations are subject to a fine of not more than three hundred dollars (\$300) for each month during which such violation continues.

Copies to: Assessor Building Inspector Health Agent Admin





Commonwealth of Massachusetts  
Department of Revenue  
Geoffrey E. Snyder, Commissioner

mass.gov/dor

Letter ID: L0151559360  
Notice Date: November 8, 2021  
Case ID: 0-001-316-607



## CERTIFICATE OF GOOD STANDING AND/OR TAX COMPLIANCE



J & M AND SONS INC  
130 MENDON ST  
HOPEDALE MA 01747-1943

### *Why did I receive this notice?*

The Commissioner of Revenue certifies that, as of the date of this certificate, J & M AND SONS INC is in compliance with its tax obligations under Chapter 62C of the Massachusetts General Laws.

This certificate doesn't certify that the taxpayer is compliant in taxes such as unemployment insurance administered by agencies other than the Department of Revenue, or taxes under any other provisions of law.

This is not a waiver of lien issued under Chapter 62C, section 52 of the Massachusetts General Laws.

### *What if I have questions?*

If you have questions, call us at (617) 887-6400 or toll-free in Massachusetts at (800) 392-6089, Monday through Friday, 9:00 a.m. to 4:00 p.m..

### *Visit us online!*

Visit [mass.gov/dor](http://mass.gov/dor) to learn more about Massachusetts tax laws and DOR policies and procedures, including your Taxpayer Bill of Rights, and MassTaxConnect for easy access to your account:

- Review or update your account
- Contact us using e-message
- Sign up for e-billing to save paper
- Make payments or set up autopay

Edward W. Coyle, Jr., Chief  
Collections Bureau

**HOPEDALE PACKAGE STORE LIQUOR LICENSE RENEWAL PACKET**

# Mutual Mart dba Brother's Liquors renewal packet

## TOWN OF HOPEDALE ALCOHOL LICENSE CHECKLIST

**Please Note:** Per Licensing Authority, applications that are late or incomplete by not including the requested documentation will be subject to an additional processing fee of \$100

- Renewal Application deadline is Friday, November 5, 2021 at 4 PM**
- Alcohol License Renewal Fee \$1,100.00 (Must be included with application)

### **COMPLETED AND SIGN THE LICENSE RENEWAL FORMS** (must be completed by current manager of license)

- ABCC LICENSE RENEWAL APPLICATION (must be signed and completed by **Current** Manager)
- IF ANY INFORMATION HAS CHANGED SINCE LAST RENEWAL, PLEASE COMPLETE THE BLANK ABCC FORM. The **Current** Manager must sign the form. If the manager has changed since the last renewal, you notify the Board of Selectmen office 508-634-2203 X210
- MASS DOR (REAP FORM) Per M.G.L. Chapter 62, §49A
- COMPLETE 24- HOUR EMERGENCY CONTACT FORM
- WORKER'S COMPENSATION INSURANCE AFFIDAVIT

### **OBTAIN AND SUBMIT** the following list of items

- WORKER'S COMPENSATION CERTIFICATE-** (must obtain and provide current certificate Insurance carrier can **email** current certificate to Lindsay Mercier at [Lmercier@hopedale-ma.gov](mailto:Lmercier@hopedale-ma.gov))

Please ~~check~~ the box below for the business type for the license renewal.

- Corporation
- Partnership
- Sole Proprietor
- Individual
- Other
- BUSINESS CERTIFICATE** obtain current business certificate or submit a copy of current certificate  
Please contact the Town Clerk's office at (508)634-2203 X 215 to obtain  
**Please Note: Business Name listed on Business Certificate must match license application. All corporate officers must be listed and appear before Town Clerk and sign application. If Business names do not match - New or Renewal License Applications will not be granted.**

Date business certificate expires: 6-6-2022

### **ON PREMISES §12 LICENCE HOLDERS ONLY-** Must provide the following additional information/forms:

- Effective August 26, 2010, no license under M.G.L. c. 138, §12 shall be issued or renewed until the applicant or licensee provides proof of **mandatory insurance coverage by filing a certificate of insurance in a form acceptable to the local licensing authority ("LLA")**. As a result, applicants for §12 licenses must provide proof of insurance coverage under a liquor legal liability insurance policy for bodily injury or death for a minimum amount of \$500,000 as a condition to receive a license.

## Mutual Mart dba Brother's Liquors renewal packet

- Copies of current Crowd Manager Certifications for each trained Crowd Manager per M.G.L. Chapter 304 of the Acts of 2004. For updates and current information on the crowd manager law please refer to the following website; <http://www.mass.gov/eopss/agencies/dfs/crowd-manager-regulations-and-training-prog-.html>
- All on-premise licenses must have a current Fire/Safety Certificate per M.G.L. Chapter 304 of the Acts of 2004. The certificate dated by no later than November 30 each year
- If your business serves food, you must include a current Board of Health food permit. Please contact the Board of Health office at (508)-634-2203 X 222 if you need a copy

### **ALL LICENSE RENEWAL APPLICANTS PLEASE READ, SIGN AND DATE**

- Applications received after posted date and time will be subject to a \$100 fee
- Incomplete applications will be subject to a \$100 fee
- Missing documentation will be subject to a \$100 fee

### **ALL LICENSE RENEWAL LICENSE HOLDERS: PLEASE READ, SIGN AND DATE STATEMENT OF PREMISE**

- If you are not making changes to your current ABCC License(s) including the following; Business Name, Manager, Days/Hours of Operation, Types of Alcohol, Storage areas or premises changes, please check the box and sign and date below (this must be signed by a current manager listed on license)

*I am requesting to renew my Liquor License(s) set to expire this calendar year on December 31. I have not made any of the above changes and promise to report any changes immediately to the Licensing Board.*

Kingal Patel  
Print Name of License Holder

KSP  
Signature and Date of License Holder

### **IF YOU MADE CHANGES TO THE TERMS OF YOUR EXISTING ABCC LICENSE, PLEASE CONTACT:**

Lindsay Mercier, Board of Selectmen's Office  
(508) 634 -2203 X 210  
[lmecier@hopedale-ma.gov](mailto:lmecier@hopedale-ma.gov)

**ANY CHANGE MADE TO YOUR EXISTING ABCC LICENSE REQUIRES PRIOR APPROVAL BY BOTH THE BOARD OF SELECTMEN AND ABCC**

**LICENSES WILL NOT BE ISSUED IF YOU OWE ANY MONEY TO THE TOWN OF HOPEDALE OR THE COMMONWEALTH OF MASSACHUSETTS**

***BE SURE TO INCLUDE THIS CHECKLIST WITH YOUR APPLICATION AND FORMS***



**Mutual Mart dba Brother's Liquors renewal packet**

**MASSACHUSETTS DEPARTMENT OF REVENUE**

**REVENUE ENFORCEMENT AND PROTECTION ATTESTATION**  
**(REAP)**

I certify under penalties of perjury that I, to the best of my knowledge and belief, have filed all state tax returns and paid all state taxes required by law.

*KS Pa*

\*Signature of Individual or Corporate Name (Mandatory)

[Redacted]

[Redacted]

\*\* [Redacted]

\*Licenses or permits will not be issued unless this certification clause is signed by the applicant.

\*\* Will be furnished to the MA Department of Revenue to determine whether you have met tax filing or tax payment obligations. Licensees who fail to correct their non-filing or delinquency will be subject to license suspension or revocation. This request is made under the authority of M.G.L. Chapter 62C, § 49A.



# Mutual Mart dtsa Brother's Liquors renewal packet



The Commonwealth of Massachusetts  
Department of Industrial Accidents  
Office of Investigations  
Lafayette City Center  
2 Avenue de Lafayette, Boston, MA 02111-1750  
www.mass.gov/dia

## Workers' Compensation Insurance Affidavit: General Businesses

### Applicant Information

Please Print Legibly

Business/Organization Name: 404 main Street Hopedale, LLC / Brother's Liquor

Address: 404 South Main St. #

City/State/Zip: Hopedale, MA 01787

#### Are you an employer? Check the appropriate box:

- I am an employer with 3 PT employees (full and/or part-time).\*
- I am a sole proprietor or partnership and have no employees working for me in any capacity. [No workers' comp. insurance required]
- We are a corporation and its officers have exercised their right of exemption per c. 152, §1(4), and we have no employees. [No workers' comp. insurance required]\*\*
- We are a non-profit organization, staffed by volunteers, with no employees. [No workers' comp. insurance req.]

#### Business Type (required):

- Retail
- Restaurant/Bar/Eating Establishment
- Office and/or Sales (incl. real estate, auto, etc.)
- Non-profit
- Entertainment
- Manufacturing
- Health Care
- Other

\*Any applicant that checks box #1 must also fill out the section below showing their workers' compensation policy information.

\*\*If the corporate officers have exempted themselves, but the corporation has other employees, a workers' compensation policy is required and such an organization should check box #1.

I am an employer that is providing workers' compensation insurance for my employees. Below is

Insurer's Address:

City/State/Zip:

Policy # or Self-ins. Lic. #

Expiration Date: 6-1-22

Attach a copy of the workers' compensation poli tion page (showing the policy number and expiration date).

Failure to secure coverage as required under § 25A of MGL c. 152 can lead to the imposition of criminal penalties of a fine up to \$1,500.00 and/or one-year imprisonment, as well as civil penalties in the form of a STOP WORK ORDER and a fine of up to \$250.00 a day against the violator. Be advised that a copy of this statement may be forwarded to the Office of Investigations of the DIA for insurance coverage verification.

I do hereby certify, under the pains and penalties of perjury that the information provided above is true and correct.

Signature: KS Pan

Date: 11-30-21

Phone #: 508-244-4884

Official use only. Do not write in this area, to be completed by city or town official.

City or Town: \_\_\_\_\_ Permit/License # \_\_\_\_\_

Issuing Authority (check one):

- Board of Health
- Building Department
- City/Town Clerk
- Licensing Board
- Selectmen's Office
- Other

Contact Person: \_\_\_\_\_

Phone #: \_\_\_\_\_



**Mutual Mart dba Brother's Liquors renewal packet**



**THE COMMONWEALTH OF MASSACHUSETTS  
TOWN OF HOPEDALE  
EMERGENCY CONTACT FORM**

Date: 11-30-21

Brother's Liquor  
Name of Licensed Business

404 South Main St., Hopedale, MA 01747  
Address of Business

**EMERGENCY CONTACT INFORMATION**

Rushi Patel  
Name of Emergency Contact

[Redacted]  
Home Address of Emergency Contact

[Redacted]  
Number

**Licenses applying for or held in the Town of Hopedale:**

Retail Package Store

**Business Hours**

Weekday Business Hours of Operation Mon-Fri: 5am - 11pm

Weekend Business Hours of Operation Sat. & Sun: Sat 6am - 11pm Sun 7am - 10pm

**IF YOU ARE APPLYING FOR AN ENTERTAINMENT LICENSE YOU MUST COMPLETE**

Weekday Entertainment Hours Mon-Fri: \_\_\_\_\_

Weekend Entertainment Hours Sat. & Sun: \_\_\_\_\_

Types of Entertainment: \_\_\_\_\_

The premises is  ALARMED  NOT ALARMED

The premises has  SPRINKLER SYSTEM  DOES NOT HAVE SPRINKLER SYSTEM



Mutual Mart dba Brother's Liquors renewal packet



TOWN OF HOPEDALE

78 Hopedale Street - P.O. Box 7
Hopedale, Massachusetts 01747

Tel: 508-634-2203 X215 Fax: 508-634-2200
E-mail: lpdrolis@hopedale-ma.gov

File #: 2018-25
Exp. Date: 6-6-2022
New Filing
Renewal-Prv. #
\$40.00 DatPaid
(Office use only)

Lisa M. Petroll
Town Clerk

BUSINESS CERTIFICATE

In conformity with the provisions of chapter one hundred ten, section five of the General Laws, as amended, the undersigned hereby declare(s) that a business is conducted under the title of:

404 Main Street Hopedale LLC DBA Brother's Liquor
Name of Business (above line)

404 South Main Street, Hopedale, MA 01747 hopedalemart@gmail.com
Address of Business (above line) Email Address (above line)

ation
Te

rson(s): (Include title, if corporate officer.)

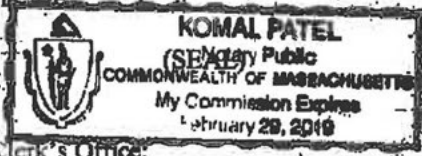
Under the penalties of perjury, I certify, that to my best knowledge and belief, I have filed all state tax returns and paid all state taxes as required under law. (M.G.L. Chapter 62C, 49A)

\*Signatures: 1. K. S. Patel 2. Elita Patel

\* This license will not be issued unless this certification clause is signed by the applicant.

State of Massachusetts County of Middlesex ss.

On June 6, 2018, the above named person(s) personally appeared before me and made oath that the foregoing statement is true



Notary Public Komal Patel
Com. Exp. Date: Feb 29, 2019

Signatures:
Received by Town Clerk's Office:

Lisa M. Petroll

\*NOTE: Signature affixed is for business certificate purposes only and does not infer compliance with the Hopedale Zoning By-Laws.

In accordance with the provisions of Chapter 337 of the Acts of 1985 and Chapter 110, Section 5 of Massachusetts General Laws, BUSINESS CERTIFICATES SHALL BE IN EFFECT FOR FOUR YEARS FROM THE DATE OF ISSUE AND SHALL BE RENEWED EACH FOUR YEARS THEREAFTER. A statement under oath must be filed with the City/Town Clerk upon discontinuing, retiring or withdrawing from such business or partnership.

Copies of such certificates shall be available at the address at which such business is conducted and shall be furnished on request during regular business hours to any person who has purchased goods or services from such business.

Violations are subject to a fine of not more than three hundred dollars (\$300) for each month during which such violation continues.

Copies to: Assessor Building Inspector Health Agent Admin

# Comm. VIC RENEWAL



## TOWN OF HOPEDALE

78 Hopedale Street - P.O. Box 7  
Hopedale, Massachusetts 01747

Tel: 508-634-2203 Fax: 508-634-2200

## BOARD OF SELECTMEN

## LOCAL LICENSING AUTHORITY

### **HOPEDALE COUNTRY CLUB COMM VIC RENEWAL**

#### **COMMON VICTUALLER LICENSE(S)**

##### *Common Victualler License, M.G.L. c. 140, § 2*

*Licensing authorities may grant licenses to persons to be inn holders or common victuallers. Such license shall not be issued or be valid until it has been signed by a majority of the aldermen in cities where the license is to be granted by the aldermen, by a majority of the licensing board in other cities or by the selectmen in towns. An alderman, any member of the licensing board or a selectman may refuse to sign a license for a person who, in his opinion, has not complied with this chapter. This section shall not require the licensing authorities to grant either of said licenses if, in their opinion, the public good does not require it. Unless otherwise established in a town by town meeting action and in a city by city council action, and in a town with no town meeting by town council action, by adoption of appropriate by-laws and ordinances to set such fees, a fee of not more than twenty-five dollars may be charged for either of said licenses, but in no event shall any such fee be greater than \$100. The licenses shall be recorded in the office of the licensing authorities. An alderman, member of a licensing board or selectman who signs a license granted contrary to this chapter shall be punished by a fine of not more than fifty dollars.*

#### **NEW LICENSE - REQUIRED DOCUMENTATION:**

1. Application Form
2. Check made payable to the Town of Hopedale - \$75.00
3. Articles of Organization as filed with Massachusetts Secretary of State's office
4. REAP Form (Revenue Enforcement Protection Attestation Form)
5. Copy of Certificate of Good Standing from the Commonwealth of MA –Department of Revenue website: <https://wfb.dor.state.ma.us/webfile/certificate/public/webforms/welcome.aspx>
6. Worker's Compensation Insurance Affidavit
7. Worker's Compensation Policy Declaration Page
8. Emergency Contact Form
9. Business Certificate obtained from Town Clerk's Office (508 634-2203 X215)
10. Floor plan indicating the proposed location of the devices, the location of exists and all permanent furnishings and any obstructions
11. Public Hearing
12. Approval from Town Departments, Board and Committees
13. Must provide a copy of the Fire/Safety Inspection of the licensed premises
14. Contact the Board of Health office (508 634-2203 X222) to obtain a copy of the food permit
15. Incomplete applications will not be accepted by the Selectmen's Office

# **HOPEDALE COUNTRY CLUB COMM VIC RENEWAL**

## **RENEWAL LICENSE - REQUIRED DOCUMENTATION:**

1. Application Form
2. Check made payable to the Town of Hopedale - \$75.00
3. REAP Form (Revenue Enforcement Protection Attestation Form)
4. Copy of Certificate of Good Standing from the Commonwealth of MA –Department of Revenue website: <https://wfb.dor.state.ma.us/webfile/certificate/public/webforms/welcome.aspx>
5. Worker's Compensation Insurance Affidavit
6. Worker's Compensation Policy Declaration Page
7. Emergency Contact Form
8. DUA Certificate (2022 renewals instructions are attached)
9. Business Certificate obtained from Town Clerk's Office (508 634-2203 X215)
10. Contact the Board of Health office (508 634-2203 X222) to obtain a copy of the current food permit
11. Incomplete applications will not be accepted by the Selectmen's Office

# HOPEDALE COUNTRY CLUB COMM. VIC RENEWAL



RECEIVED BY BOARD OF  
SELECTMEN'S OFFICE

## TOWN OF HOPEDALE

DATE:

TIME

### COMMON VICTUALLER APPLICATION/RENEWAL (M.G.L. Ch 140 §§ 1-9, M.G.L. 62C § 49A, M.G.L. Ch 152 § 25C (6) & Town Regulation)

**\*\*\*\*\*ONLY COMPLETED APPLICATIONS WILL BE ACCEPTED\*\*\*\*\***

NEW

RENEWAL

**IF YOU ALSO PLAN TO HAVE ENTERTAINMENT ON YOUR PREMISES, STATE AND LOCAL STATUTES REQUIRE THAT YOU OBTAIN AN ENTERTAINMENT LICENSE.**

**PLEASE PRINT:**

Date of Application: 11/5/2021

DBA Name: Hopedale Country Club

Business Address: 90 Mill St Hopedale MA 01747  
Street Number Street Name City/Town State Zip

Corporation Name: Hopedale Country Club, Inc. Telephone: (508) 473-1443

Corporation Address: 90 Mill St. Hopedale MA 01747  
Street Number Street Name City/Town State Zip

Bus. Owner Name: 11/3 Bus. Telephone: \_\_\_\_\_

Business Owner Address: \_\_\_\_\_  
Street Number Street Name City/Town State Zip

Property Owner Name: Town of Hopedale Telephone: (508) 634-2203

Property Owner Home Address: Hopedale St Hopedale MA 01747  
Street Number Street Name City/Town State Zip



# HOPEDALE COUNTRY CLUB COMM VIC RENEWAL

## RENEWAL APPLICATIONS

### All Renewal License Holders: Please read, sign and date statement of Premise

- If you are NOT making changes to your current license including the following: Business Name, Manager, Days/Hours of Operation, or premises changes, please check the box and sign and date below (this must be signed by a current business owner.)

*I am requesting to renew my Common Victuallers License(s) set to expire this calendar year on December 31, I have not made any of the above changes and promise to report any changes immediately to the Licensing Board.*

Donald M. Stewardson Jr.  
Print Name of License Holder

Donald M. Stewardson Jr.  
Signature and Date of License Holder  
Donald M. Stewardson Jr.  
President

**ANY CHANGES MADE TO YOUR EXISTING LICENSE REQUIRES PRIOR APPROVAL BY THE LOCAL LICENSING AUTHORITY.**

## NEW APPLICATIONS ONLY

### Premise Information

- Former Activity at Premises: \_\_\_\_\_
- Are Premises Completed?  Yes  No  
If no, have you obtained site plan approval from the Planning Board?  Yes  No  
Date: \_\_\_\_\_
- Have you obtained a Building Permit?  Yes  No Date: \_\_\_\_\_  
Have you obtained an Occupancy Permit?  Yes  No Date: \_\_\_\_\_
- Are the premises equipped with fixtures or supplied with the necessary implements and facilities to conduct the business?  Yes  No
- Have you obtained a Food Service Permit from the Health Agent?  
 Yes  No Date: \_\_\_\_\_
- Have you attached a plan of the premises describing the location of all exits, restrooms, facilities and permanent fixtures?  Yes  No Date: \_\_\_\_\_



# HOPEDALE COUNTRY CLUB COMM VIC RENEWAL

PLEASE OBTAIN RECOMMENDATIONS FROM INSPECTORS PRIOR TO SUBMITTING APPLICATION TO THE BOARD OF SELECTMEN'S OFFICE

Building Inspector: \_\_\_\_\_ Date: \_\_\_\_\_  Recommend  Do Not Recommend

Fire Chief: \_\_\_\_\_ Date: \_\_\_\_\_  Recommend  Do Not Recommend

Board of Health: \_\_\_\_\_ Date: \_\_\_\_\_  Recommend  Do Not Recommend

If you are not recommending, please list reason:

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ALL APPLICANTS MUST COMPLETE AND SIGN THE FOLLOWING STATEMENT:

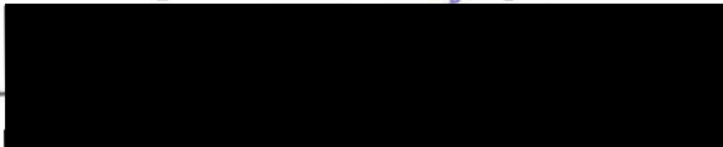
*I certify under the penalties of perjury that I, to my best knowledge and belief, have filed all state tax returns and paid all state taxes required under law. I also certify that I do not owe the Town of Hopedale any outstanding local taxes, fees, assessments, betterments or any municipal charges.*

*Donald M. Stewardson Jr.*

Printed name of person responsible for License

*Donald M. Stewardson Jr.*

\*Signature of Person who is Responsible for License



# HOPEDALE COUNTRY CLUB COMM VIC RENEWAL



## UI Online – Certificate of Compliance

From the Employer Home Page screen, click on the **Payment Information** link.

The screenshot shows the 'Employer Home' page with a navigation menu at the top. The main content area includes a 'Payment Information' link highlighted in blue. Below this, there are several informational links: 'FAQ', 'Description of Unemployment Insurance', 'Employer's Guide to UI', 'Employment and Wage Detail Reporting', 'How to Register', 'Employer Jobs', 'Employer Information', 'Correspondence', and 'Account Information'. The 'Payment Information' link is the primary focus of the instruction.

**Payment Information**

**FAQ**  
Review frequently asked questions (FAQs) for the UI program or UI system.

**Description of Unemployment Insurance**  
View detailed information associated with your account.

**Employer's Guide to UI**  
View detailed information by calendar year and quarterly statement; divisional detail statement; and individual claimant transaction details. Additional information includes how your account works with the rate system under a wage-related date added to benefit charges.

**Employment and Wage Detail Reporting**  
Submit Employment and Wage Detail Reports for this Agency and the Department of Revenue. View Historical Employment and Wage Reporting Information.

**How to Register**

**Employer Jobs**  
View and maintain your jobs.

**Employer Information**  
Update account information including changing legal name, mailing address, contact details, reporting units, or operating status. View the most recent Tax Rate Notice, notices TPA or pay information regarding the purchase or sale of a business.

**Correspondence**  
Search for Correspondence

**Account Information**  
View payments, view account summary, pending payments, processed or cancelled payments, benefit charges, and FUTA credit information.

**HOPEDALE COUNTRY CLUB COMM VIC RENEWAL**

**MASSACHUSETTS DEPARTMENT OF REVENUE**

**REVENUE ENFORCEMENT AND PROTECTION ATTESTATION**  
**(REAP)**

I certify under penalties of perjury that I, to the best of my knowledge and belief, have filed all state tax returns and paid all state taxes required by law.

*Donald M. Stewardson Jr.*

\*Signature of Individual or Corporate Name (Mandatory)

*Donald M. Stewardson Jr. President Hopedale Country Club Inc.*

By: Corporate Officer (Mandatory,  Applicable)

[Redacted Signature]

\*Licenses or permits will not be issued unless this certification clause is signed by the applicant.

\*\* Will be furnished to the MA Department of Revenue to determine whether you have met tax filing or tax payment obligations. Licensees who fail to correct their non-filing or delinquency will be subject to license suspension or revocation. This request is made under the authority of M.G.L. Chapter 62C, § 49A.



Commonwealth of Massachusetts  
Department of Revenue  
Geoffrey E. Snyder, Commissioner

mass.gov/dor

Letter ID: L0871898304  
Notice Date: November 3, 2021  
Case ID: 0-001-302-097



## CERTIFICATE OF GOOD STANDING AND/OR TAX COMPLIANCE



HOPEDALE COUNTRY CLUB INC  
PO BOX 126  
HOPEDALE MA 01747-0126

### *Why did I receive this notice?*

The Commissioner of Revenue certifies that, as of the date of this certificate, HOPEDALE COUNTRY CLUB INC is in compliance with its tax obligations under Chapter 62C of the Massachusetts General Laws.

This certificate doesn't certify that the taxpayer is compliant in taxes such as unemployment insurance administered by agencies other than the Department of Revenue, or taxes under any other provisions of law.

**This is not a waiver of lien issued under Chapter 62C, section 52 of the Massachusetts General Laws.**

### *What if I have questions?*

If you have questions, call us at (617) 887-6400 or toll-free in Massachusetts at (800) 392-6089, Monday through Friday, 9:00 a.m. to 4:00 p.m..

### *Visit us online!*

Visit [mass.gov/dor](http://mass.gov/dor) to learn more about Massachusetts tax laws and DOR policies and procedures, including your Taxpayer Bill of Rights, and MassTaxConnect for easy access to your account:

- Review or update your account
- Contact us using e-message
- Sign up for e-billing to save paper
- Make payments or set up autopay

Edward W. Coyle, Jr., Chief  
Collections Bureau

**HOPEDALE COUNTRY CLUB COMM VIC RENEWAL**



# HOPEDALE COUNTRY CLUB COMM. VIC RENEWAL



The Commonwealth of Massachusetts  
Department of Industrial Accidents  
Office of Investigations  
Lafayette City Center  
2 Avenue de Lafayette, Boston, MA 02111-1750  
www.mass.gov/dia

## Workers' Compensation Insurance Affidavit: General Businesses

### Applicant Information

Please Print Legibly

Business/Organization Name: Hope Dale Country Club Inc.  
Address: 90 Mill St  
City/State/Zip: Hopdale MA 01747 Phone #: (508) 473-1443

#### Are you an employer? Check the appropriate box:

- 1.  I am an employer with \_\_\_\_\_ employees (full and/or part-time).\*
- 2.  I am a sole proprietor or partnership and have no employees working for me in any capacity. [No workers' comp. insurance required]
- 3.  We are a corporation and its officers have exercised their right of exemption per c. 152, §1(4), and we have no employees. [No workers' comp. insurance required]\*\*
- 4.  We are a non-profit organization, staffed by volunteers, with no employees. [No workers' comp. insurance req.]

#### Business Type (required):

- 5.  Retail
- 6.  Restaurant/Bar/Eating Establishment
- 7.  Office and/or Sales (incl. real estate, auto, etc.)
- 8.  Non-profit
- 9.  Entertainment
- 10.  Manufacturing
- 11.  Health Care
- 12.  Other Golf Club

\*Any applicant that checks box #1 must also fill out the section below showing their workers' compensation policy information.

\*\*If the corporate officers have exempted themselves, but the corporation has other employees, a workers' compensation policy is required and such an organization should check box #1.

I am an employer that is providing workers' compensation insurance for my employees. Below is the policy information.

Insurance Company Name: Bright Insurance Agency, Inc.  
Insurer's Address: 4 Congress St  
City/State/Zip: Milford MA 01757

Policy # or Self-ins. Lic. # See Attached Expiration Date: \_\_\_\_\_

Attach a copy of the workers' compensation policy declaration page (showing the policy number and expiration date).

Failure to secure coverage as required under § 25A of MGL c. 152 can lead to the imposition of criminal penalties of a fine up to \$1,500.00 and/or one-year imprisonment, as well as civil penalties in the form of a STOP WORK ORDER and a fine of up to \$250.00 a day against the violator. Be advised that a copy of this statement may be forwarded to the Office of Investigations of the DIA for insurance coverage verification.

I do hereby certify, under the pains and penalties of perjury that the information provided above is true and correct.

Signature: David M. Stewardson

\_\_\_\_\_  
by city or town official.

City or Town: \_\_\_\_\_ Permit/License # \_\_\_\_\_

#### Issuing Authority (check one):

- 1.  Board of Health
- 2.  Building Department
- 3.  City/Town Clerk
- 4.  Licensing Board
- 5.  Selectmen's Office
- 6.  Other \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone #: \_\_\_\_\_

# HOPEDALE COUNTRY CLUB COMM VIC RENEWAL

## Information and Instructions

Massachusetts General Laws chapter 152 requires all employers to provide workers' compensation for their employees. Pursuant to this statute, an *employee* is defined as "...every person in the service of another under any contract of hire, express or implied, oral or written."

An *employer* is defined as "an individual, partnership, association, corporation or other legal entity, or any two or more of the foregoing engaged in a joint enterprise, and including the legal representatives of a deceased employer, or the receiver or trustee of an individual, partnership, association or other legal entity, employing employees. However, the owner of a dwelling house having not more than three apartments and who resides therein, or the occupant of the dwelling house of another who employs persons to do maintenance, construction or repair work on such dwelling house or on the grounds or building appurtenant thereto shall not because of such employment be deemed to be an employer."

MGL chapter 152, §25C(6) also states that "every state or local licensing agency shall withhold the issuance or renewal of a license or permit to operate a business or to construct buildings in the commonwealth for any applicant who has not produced acceptable evidence of compliance with the insurance coverage required." Additionally, MGL chapter 152, §25C(7) states "Neither the commonwealth nor any of its political subdivisions shall enter into any contract for the performance of public work until acceptable evidence of compliance with the insurance requirements of this chapter have been presented to the contracting authority."

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### Applicants

Please fill out the workers' compensation affidavit completely, by checking the boxes that apply to your situation and, if necessary, supply your insurance company's name, address and phone number along with a certificate of insurance. Limited Liability Companies (LLC) or Limited Liability Partnerships (LLP) with no employees other than the members or partners, are not required to carry workers' compensation insurance. If an LLC or LLP does have employees, a policy is required. Be advised that this affidavit may be submitted to the Department of Industrial Accidents for confirmation of insurance coverage. **Also be sure to sign and date the affidavit.** The affidavit should be returned to the city or town that the application for the permit or license is being requested, not the Department of Industrial Accidents. Should you have any questions regarding the law or if you are required to obtain a workers' compensation policy, please call the Department at the number listed below. Self-insured companies should enter their self-insurance license number on the appropriate line.

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### City or Town Officials

Please be sure that the affidavit is complete and printed legibly. The Department has provided a space at the bottom of the affidavit for you to fill out in the event the Office of Investigations has to contact you regarding the applicant. Please be sure to fill in the permit/license number which will be used as a reference number. In addition, an applicant that must submit multiple permit/license applications in any given year, need only submit one affidavit indicating current policy information (if necessary). A copy of the affidavit that has been officially stamped or marked by the city or town may be provided to the applicant as proof that a valid affidavit is on file for future permits or licenses. A new affidavit must be filled out each year. Where a home owner or citizen is obtaining a license or permit not related to any business or commercial venture (i.e. a dog license or permit to burn leaves etc.) said person is NOT required to complete this affidavit.

The Office of Investigations would like to thank you in advance for your cooperation and should you have any questions, please do not hesitate to give us a call.

---

The Department's address, telephone and fax number:

The Commonwealth of Massachusetts  
Department of Industrial Accidents  
**Office of Investigations**  
Lafayette City Center  
2 Avenue de Lafayette,  
Boston, MA 02111-1750

Tel. (857) 321-7406 or 1-877-MASSAFE

Fax (617) 727-7749

[www.mass.gov/dia](http://www.mass.gov/dia)





# CERTIFICATE OF LIABILITY INSURANCE

DATE (mm/dd/yyyy)  
11/04/2021

**THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT REPRESENTATIVE OR NEGATIVELY AFFECT, EITHER BEFORE OR AFTER 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 UNBURED 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).

<b>PRODUCER</b> Bright Agency, Inc 6 Congress St. P.O. Box 424 Millis MA 01767	<b>CONTACT NAME:</b> Kim Sylvestre <b>PHONE (incl. area code):</b> (508) 473-0856 <b>FAX (incl. area code):</b> (508) 473-8709 <b>E-MAIL ADDRESS:</b>
	<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> Acadia Insurance Company <b>INSURER B:</b> Technology Insurance Company <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>
<b>INSURED</b> Hopdale Country Club Inc PO Box 128 Hopdale MA 01747	


**COVERAGES**      **CERTIFICATE NUMBER:** CL2172719984      **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.

FORM LTR	TYPE OF INSURANCE	APPLICABLE LIMITS	POLICY NUMBER	POLICY EFF. (MM/DD/YYYY)	POLICY EXP. (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>CONVENTIONAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGREEMENTS LIMIT APPLIED PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		[REDACTED]	07/20/2021	07/20/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO REPTED PREMISES (See endorsements) \$ 500,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Hired Auto \$ 1,000,000
A	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY		[REDACTED]	07/20/2021	07/20/2022	COMBINED SINGLE LIMIT (See endorsement) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> <b>UMBRELLA LMS</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LMS <input type="checkbox"/> CLAIMS-MADE DED:      RETENTION \$		[REDACTED]	07/20/2021	07/20/2022	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000 \$ PER STATUTE      OFF-SP
B	<b>WORKERS COMPENSATION AND EMPLOYERS LIABILITY</b> <b>ANY PRODUCTS/OPERATIONS EXCLUDED?</b> (Mandatory in MA) If yes, describe under DESCRIPTION OF OPERATIONS below	<input type="checkbox"/> Y/N N/A	[REDACTED]	01/01/2021	01/01/2022	EL EACH ACCIDENT \$ 500,000 EL DISEASE - SA EMPLOYEE \$ 500,000 EL DISEASE - POLICY LIMIT \$ 500,000
A	<b>Liquor Liability</b>		[REDACTED]	07/20/2021	07/20/2022	\$1,000,000 \$2,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / SERVICES (ACCORD 101, Schedule, may be attached if more space is required)

**HOPDALE COUNTRY CLUB CO AB ALL VIC REVERSAL**

<b>CERTIFICATE HOLDER</b> Town of Hopdale 64 Hopdale Street Hopdale MA 01747	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE, THE POLICY CONTRACT WILL BE TERMINATED ACCORDING TO THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
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**HOPEDALE COUNTRY CLUB COMM VIC RENEWAL**



**THE COMMONWEALTH OF MASSACHUSETTS  
TOWN OF HOPEDALE  
EMERGENCY CONTACT FORM**

Date: Nov 1, 2021

Hopedale Country Club, Inc.

Name of Licensed Business

90 Mill St. Hopedale, MA 01747

Address of Business

**EMERGENCY CONTACT INFORMATION**

Donald M. Stewardson Jr.

Name of Emergency Contact



24 Hour Emergency Contact Telephone Number

Licenses applying for or held in the Town of Hopedale:

LIQUOR, Common Victualer  
Entertainment

**Business Hours**

Weekday Business Hours of Operation Mon-Fri: 9:00 AM - 12:00 AM

Weekend Business Hours of Operation Sat. & Sun: 9:00 AM - 12:00 AM

**IF YOU ARE APPLYING FOR AN ENTERTAINMENT LICENSE YOU MUST COMPLETE**

Weekday Entertainment Hours Mon-Fri: 4:00 pm - 11:00 pm

Weekend Entertainment Hours Sat. & Sun: Saturday 3:00 - 12:00 PM

Types of Entertainment: Live music, DJ, and Trivia

The premises is  ALARMED  NOT ALARMED

The premises has  SPRINKLER SYSTEM  DOES NOT HAVE SPRINKLER SYSTEM

**THIS FORM MUST BE COMPLETED BEFORE A LICENSE IS ISSUED**





THE COMMONWEALTH OF MASSACHUSETTS  
EXECUTIVE OFFICE OF LABOR AND WORKFORCE DEVELOPMENT  
DEPARTMENT OF UNEMPLOYMENT ASSISTANCE

Charles D. Baker  
GOVERNOR  
Karyn E. Polito  
LT. GOVERNOR



Rosalin Acosta  
SECRETARY  
Richard A. Jeffers  
DIRECTOR

HOPEDALE COUNTRY CLUB  
Attn: Hopedale Country Club, Inc  
P.O. BOX 128  
HOPEDALE, MA 01747



Certificate Id:52841

The Department of Unemployment Assistance certifies that as of 11/3/2021 ,HOPEDALE COUNTRY CLUB is current in all its obligations relating to contributions, payments in lieu of contributions, and the employer medical assistance contribution established in G.L.c.149,§189.

This certificate expires in 30 days from the date of issuance.

Richard A. Jeffers, Director

Department of Unemployment Assistance

**HOPEDALE COUNTRY CLUB COMM VIC RENEWAL**

**HOPEDALE COUNTRY CLUB COMM VIC REEWAL**

**Permit No.: 22-005**  
**Date Issued: July 1, 2021**  
**Fee: \$325.00**  
**Expiration Date: June 30, 2022**

**The Commonwealth of Massachusetts**  
**TOWN OF HOPEDALE**  
**Board of Health**  
78 Hopedale Street - P.O. Box 7  
Hopedale, Massachusetts 01747

**PERMIT TO OPERATE A FOOD ESTABLISHMENT**

In accordance with regulations promulgated under authority of Chapter 94, Section 305A and Chapter 111, Section 5 of the General Laws a permit is hereby granted to:

**HOPEDALE COUNTRY CLUB**

**Whose place of business is: 90 Mill Street, PO Box 126, Hopedale**  
**Type of business: FOOD SERVICE**  
**To operate a food establishment in: Town of Hopedale**

*"As a condition of this license, in the interest of public health, the licensee shall not employ or allow to work on the licensed premises any person not present in the United States in compliance with applicable law."*

  
\_\_\_\_\_  
William Fisher, Health Agent

## **HOPEDALE COUNTRY CLUB COMM VIC RENEWAL**

### **2022 Hopedale Country Club**

#### **Food Service Hours of Operation**

Opening Day through April 30 <sup>th</sup>	11:00am to 7:00pm Mon – Thurs 8:00am to 9:00pm Fri – Sun
April 30 <sup>th</sup> – November 1 <sup>st</sup>	11:00am to 7:00pm Mon – Thurs 8:00am to 9:00pm Fri - Sun
November 2 <sup>nd</sup> – Course Closing	11:00am to 6:00pm Mon – Thurs 8:00am to 9:00pm Fri - Sun

#### **Bar Service Hours of Operation**

Opening Day through April 30 <sup>th</sup>	9:00am to 8:00pm Mon – Thurs 9:00am to 10:00pm Fri – Sat 9:00am to 9:00pm Sun
April 30 <sup>th</sup> – November 1 <sup>st</sup>	9:00am to 9:00pm Mon – Thurs 9:00am to 10:00pm Fri – Sat 9:00am to 9:00pm Sun

#### **Winter Clubhouse Hours**

**Starts after Golf Course is closed for the season until opening day**

Wednesday	4:00pm to 9:00pm
Thursday	4:00pm to 9:00pm
Friday	11:00am to 10:00pm
Saturday	11:00am to 10:00pm
Sunday	8:00am to 9:00pm

**Bar Service Hours ends 1 hour food ends  
All hours subject to change by the House Committee, HCC**

NON-SUNDAY RENEWAL

**HCC NON-SUNDAY ENTERTAINMENT RENEWAL**

Phone: (508) 473-1443

**THE COMMONWEALTH OF MASSACHUSETTS  
TOWN OF HOPEDALE**

**APPLICATION FOR NON-SUNDAY ENTERTAINMENT LICENSE**

**TO THE LICENSING AUTHORITIES:**

The undersigned hereby applies for a License in accordance with the provisions of the Statutes relating thereto

(FULL NAME OF PERSON, FIRM OR CORPORATION MAKING APPLICATION):

Hopedale Country Club Inc.

STATE CLEARLY PURPOSE FOR WHICH LICENSE IS REQUESTED: **ENTERTAINMENT LICENSE\***

TO: Obtain an Entertainment License for: [\*see options at the bottom of the page]

     INDOOR         OUTDOOR      X   BOTH

GIVE LOCATION BY STREET AND NUMBER:

AT: \_\_\_\_\_

in said Town of Hopedale in accordance with the rules and regulations made under authority of said Statutes.

**Please check the days of operation and list the hours of entertainment**

- Sunday\*\*:
- Monday: 4pm to 11pm
- Tuesday: 4pm to 11pm
- Wednesday: 4pm to 11pm
- Thursday: 4pm to 11pm
- Friday: 4pm to 11pm
- Saturday: 3pm to 12 AM

Print Name: Donald M Stewardson Jr.



<b>Official Use:</b>	
Received: _____	_____
(Date)	(Time)
_____	
Date License Granted	

Donald M Stewardson Jr.  
(Signature of Applicant)

\* The application for such license shall be in writing and shall state the type of concert, dance, exhibition, cabaret or public show sought to be licensed and shall state whether such public show will include: (a) dancing by patrons, (b) dancing by entertainers or performers, (c) recorded or live music, (d) the use of an amplification system, (e) a theatrical exhibition, play, or moving picture show, (f) a floor show of any description, (g) a light show of any description, or (h) any other dynamic audio or visual show, whether live or recorded.

**\*\*Please note a separate application is needed for Entertainment on Sundays**

# HCC NON—SUNDAY ENTERTAINMENT RENEWAL

## TOWN OF HOPEDALE

### NEW APPLICATION CHECKLIST

- COMPLETED LICENSE APPLICATION**
- ARTICLES OF ORGANIZATION** (if a corporation) as filed with the Massachusetts Secretary of State (must contain the Seal of the Secretary of State).
- BUSINESS CERTIFICATE** per MGL Chapter 110, §§5 and 6; Any person conducting business in the Commonwealth under any title other than the real name of the person conducting the business, whether individually or as a partnership, or under the true corporate name. See or call the Town Clerk 508-234-2001. — **N/A CORPORATIONS DO NOT NEED B.C.**
- A **PLAN** showing the location of counters, tables, ranges, toilets and in general the proposed set-up of the premises, along with an itemized estimate of the cost of said proposed set-up and of such fixtures, and of the implements and facilities necessary for cooking, preparing and serving food per MGL Chapter 140, §6. *This is required for Liquor Licenses and Common Victualler Licenses. Class II and Class III require a rough sketch of the licensed area.* — **N/A RENEWAL**
- REVENUE ENFORCEMENT AND PROTECTION (REAP) ATTESTATION:** Per MGL Chapter 62C, §49A.
- WORKERS' COMPENSATION CERTIFICATE OF INSURANCE** – Per MGL Chapter 152, §25A showing coverage in Massachusetts. Call your insurance company and have them fax a Workers' Compensation Certificate of Insurance to 508-234-7640.
- STATE WORKERS' COMPENSATION INSURANCE AFFIDAVIT** – Even if your establishment does not require Workers' Compensation this must be filled out and signed.
- FIRE INSPECTION REPORT** – Per Fire Code Compliance Policy for Businesses and All License Holders approved by the Board of Selectmen. Call the Fire Department at 508-473-1050.
- EMERGENCY CONTACT INFORMATION** to include: Contact name, phone number, hours of operation and whether or not the premises is alarmed.
- CHECK** made payable to the Town of Hopedale in the amount of \$100
- RETURN CHECKLIST, FEE, AND ALL PAPERWORK TO THE SELECTMEN'S OFFICE IN PERSON** as a CORI check may need to be performed. *Please bring your government-issued photo identification.*

**Please Note:** All applications must be reviewed by other Boards/Committees/Departments, which takes some time. As soon as we receive approval from all other Boards involved, we will schedule you to appear before the Board of Selectmen.

**HCC NON-SUNDAY ENTERTAINMENT RENEWAL**

**MASSACHUSETTS DEPARTMENT OF REVENUE**

**REVENUE ENFORCEMENT AND PROTECTION ATTESTATION**  
**(REAP)**

I certify under penalties of perjury that I, to the best of my knowledge and belief, have filed all state tax returns and paid all state taxes required by law.

*Donald M. Stewardson Jr.*

\*Signature of Individual or Corporate Name (Mandatory)

*Donald M. Stewardson Jr. President Hopedale Country Club Inc.*

By: Corporate Officer (Mandatory, If Applicable)



\*Licenses or permits will not be issued unless this certification clause is signed by the applicant.

\*\* Will be furnished to the MA Department of Revenue to determine whether you have met tax filing or tax payment obligations. Licensees who fail to correct their non-filing or delinquency will be subject to license suspension or revocation. This request is made under the authority of M.G.L. Chapter 62C, § 49A.



**HCC NON-SUNDAY ENTERTAINMENT RENEWAL**



The Commonwealth of Massachusetts  
Department of Industrial Accidents  
Office of Investigations  
Lafayette City Center  
2 Avenue de Lafayette, Boston, MA 02111-1750  
www.mass.gov/dia

**Workers' Compensation Insurance Affidavit: General Businesses**

**Applicant Information**

Please Print Legibly

Business/Organization Name: Hopedale Country Club Inc

Address: 90 Mill St

City/State/Zip: Hopedale MA 01747 Phone #: (508) 473-1443

Are you an employer? Check the appropriate box:

- 1.  I am an employer with \_\_\_\_\_ employees (full and/ or part-time).\*
- 2.  I am a sole proprietor or partnership and have no employees working for me in any capacity. [No workers' comp. insurance required]
- 3.  We are a corporation and its officers have exercised their right of exemption per c. 152, §1(4), and we have no employees. [No workers' comp. insurance required]\*\*
- 4.  We are a non-profit organization, staffed by volunteers, with no employees. [No workers' comp. insurance req.]

Business Type (required):

- 5.  Retail
- 6.  Restaurant/Bar/Eating Establishment
- 7.  Office and/or Sales (incl. real estate, auto, etc.)
- 8.  Non-profit
- 9.  Entertainment
- 10.  Manufacturing
- 11.  Health Care
- 12.  Other Golf Club

\*Any applicant that checks box #1 must also fill out the section below showing their workers' compensation policy information.  
\*\*If the corporate officers have exempted themselves, but the corporation has other employees, a workers' compensation policy is required and such an organization should check box #1.

**I am an employer that is providing workers' compensation insurance for my employees. Below is the policy information.**

Insurance Company Name: Bright Insurance Agency, Inc

Insurer's Address: 1 Congress St

City/State/Zip: Milford MA 01757

Policy # or Self-ins. Lic. # See Attached Expiration Date: \_\_\_\_\_

Attach a copy of the workers' compensation policy declaration page (showing the policy number and expiration date).

Failure to secure coverage as required under § 25A of MGL c. 152 can lead to the imposition of criminal penalties of a fine up to \$1,500.00 and/or one-year imprisonment, as well as civil penalties in the form of a STOP WORK ORDER and a fine of up to \$250.00 a day against the violator. Be advised that a copy of this statement may be forwarded to the Office of Investigations of the DIA for insurance coverage verification.

**I do hereby certify, under the pains and penalties of perjury that the information provided above is true and correct**

Signature: Donald M Stewardson Jr Date: 11/5/2021

Phone: [Redacted]

**Official use only. Do not write in this area, to be completed by city or town official.**

City or Town: \_\_\_\_\_ Permit/License # \_\_\_\_\_

Issuing Authority (check one):

1.  Board of Health    2.  Building Department    3.  City/Town Clerk    4.  Licensing Board

5.  Selectmen's Office    6.  Other \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone #: \_\_\_\_\_



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
11/04/2021

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(S) OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL UNINSURED 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).

<b>PRODUCER</b> Bright Agency, Inc 8 Congress St PO Box 424 Weymouth MA 01757		<b>CONTACT NAME:</b> Kim Sylvestre <b>PHONE (A/C No. Ext):</b> (508) 473-0656 <b>FAX (A/C No.):</b> (508) 478-6700 <b>E-MAIL ADDRESS:</b> kaysylvestre@brightinsurance.com	
<b>INSURED</b> Hopdale Country Club Inc PO Box 128 Hopdale MA 01747		<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> Aetna Insurance Company <b>INSURER B:</b> Technology Insurance Company <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>	

COVERAGES      CERTIFICATE NUMBER: CL217714004      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.

TYPE LTR	TYPE OF INSURANCE	ADDRESS		POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
		INSR	WVD					
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLASS-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:	[REDACTED]			07/20/2021	07/20/2022	EACH OCCURRENCE	\$ 1,000,000
	DAMAGE TO RENTED PREMISES (Per occurrence)						\$ 500,000	
	MED EXP (Any one person)						\$ 15,000	
	PERSONAL & ADV INJURY						\$ 1,000,000	
A	AUTOMOBILE LIABILITY ANY AUTO <input type="checkbox"/> OWNED AUTO ONLY <input type="checkbox"/> HIRED AUTO ONLY <input type="checkbox"/> NON-OWNED AUTO ONLY				07/20/2021	07/20/2022	COMBINED SINGLE LIMIT (Per accident)	\$
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
A	<input checked="" type="checkbox"/> UMBRELLA LMB <input type="checkbox"/> EXCESS LMB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE				07/20/2021	07/20/2022	EACH OCCURRENCE	\$ 1,000,000
							AGGREGATE	\$ 1,000,000
B	EMPLOYERS' RESPONSIBILITY AND EMPLOYERS LIABILITY FULL PRODUCT LIABILITY INCLUSIVE OF OPERATORS EXCLUDED? (Subject to EP) Description of Operators below				01/01/2021	01/01/2022	PER STATUTE	\$ 500,000
							OTH-ER	\$ 500,000
							E.L. DISEASE - EA EMPLOYEE	\$ 500,000
							E.L. DISEASE - POLICY LIMIT	\$ 500,000
A	Liquor Liability				07/20/2021	07/20/2022		\$1,000,000
								\$2,000,000

DESCRIPTION OF OPERATORS / LOGS FROM / WVD TO (FORM 101, Additional Operator Schedule, may be attached if more space is required)

## HCC NON-SUNDAY

<b>CERTIFICATE HOLDER</b> <b>ENTERTAINMENT</b> Town of Hopdale 84 Main St <b>RENEWAL</b> Hopdale MA 01747	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE SOL 119 PROVISIONS. AUTHORIZED REPRESENTATIVE 
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THE COMMONWEALTH OF MASSACHUSETTS  
TOWN OF HOPEDALE  
EMERGENCY CONTACT FORM

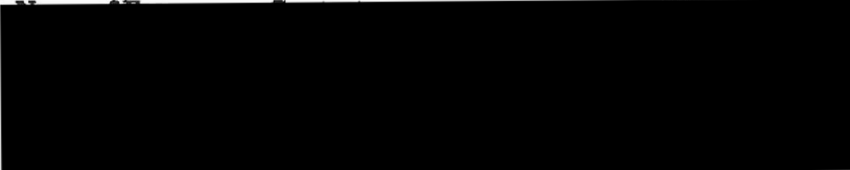
Date: Nov 1, 2021

Hopedale Country Club Inc.  
Name of Licensed Business

90 Mill St. Hopedale, MA 01747  
Address of Business

**EMERGENCY CONTACT INFORMATION**

Donald M. Stewardson Jr.



24 Hour Emergency Contact Telephone Number

Licenses applying for or held in the Town of Hopedale:

LIQUOR, Common Victualer  
Entertainment

**Business Hours**

Weekday Business Hours of Operation Mon-Fri: 9:00 AM - 12:00 AM

Weekend Business Hours of Operation Sat. & Sun: 9:00 AM - 12:00 AM

**IF YOU ARE APPLYING FOR AN ENTERTAINMENT LICENSE YOU MUST COMPLETE**

Weekday Entertainment Hours Mon-Fri: 4:00 pm - 11:00 pm

Weekend Entertainment Hours Sat. & Sun: Saturday 3:00 - 12:00 pm

Types of Entertainment: Live music, DJ, and Trivia

The premises is  ALARMED  NOT ALARMED

The premises has  SPRINKLER SYSTEM  DOES NOT HAVE SPRINKLER SYSTEM



Commonwealth of Massachusetts  
Department of Revenue  
Geoffrey E. Snyder, Commissioner

mass.gov/dor

Letter ID: L0871898304  
Notice Date: November 3, 2021  
Case ID: 0-001-302-097



## CERTIFICATE OF GOOD STANDING AND/OR TAX COMPLIANCE



HOPEDALE COUNTRY CLUB INC  
PO BOX 126  
HOPEDALE MA 01747-0126

### **HCC NON-SUNDAY ENTERTAINMENT RENEWAL**

#### *Why did I receive this notice?*

The Commissioner of Revenue certifies that, as of the date of this certificate, HOPEDALE COUNTRY CLUB INC is in compliance with its tax obligations under Chapter 62C of the Massachusetts General Laws.

This certificate doesn't certify that the taxpayer is compliant in taxes such as unemployment insurance administered by agencies other than the Department of Revenue, or taxes under any other provisions of law.

**This is not a waiver of lien issued under Chapter 62C, section 52 of the Massachusetts General Laws.**

#### *What if I have questions?*

If you have questions, call us at (617) 887-6400 or toll-free in Massachusetts at (800) 392-6089, Monday through Friday, 9:00 a.m. to 4:00 p.m..

#### *Visit us online!*

Visit [mass.gov/dor](http://mass.gov/dor) to learn more about Massachusetts tax laws and DOR policies and procedures, including your Taxpayer Bill of Rights, and MassTaxConnect for easy access to your account:

- Review or update your account
- Contact us using e-message
- Sign up for e-billing to save paper
- Make payments or set up autopay

Edward W. Coyle, Jr., Chief  
Collections Bureau



THE COMMONWEALTH OF MASSACHUSETTS  
EXECUTIVE OFFICE OF LABOR AND WORKFORCE DEVELOPMENT  
DEPARTMENT OF UNEMPLOYMENT ASSISTANCE

Charles D. Baker  
GOVERNOR

Karyn E. Polito  
LT. GOVERNOR



378522778

Rosealin Acosta  
SECRETARY

Richard A. Jeffers  
DIRECTOR

HOPEDALE COUNTRY CLUB  
Attn: Hopedale Country Club, Inc  
P.O. BOX 126  
HOPEDALE, MA 01747



Certificate Id:52841

The Department of Unemployment Assistance certifies that as of 11/3/2021 ,HOPEDALE COUNTRY CLUB is current in all its obligations relating to contributions, payments in lieu of contributions, and the employer medical assistance contribution established in G.L.c. 149, §189.

This certificate expires in 30 days from the date of issuance.

Richard A. Jeffers, Director

Department of Unemployment Assistance

**HCC NON-SUNDAY ENTERTAINMENT RENEWAL**

**HCC NON-SUNDAY ENTERTAINMENT RENEWAL**

Permit No.: 22-005  
Date Issued: July 1, 2021  
Fee: \$325.00  
Expiration Date: June 30, 2022

**The Commonwealth of Massachusetts  
TOWN OF HOPEDALE  
Board of Health**

78 Hopedale Street - P.O. Box 7  
Hopedale, Massachusetts 01747

**PERMIT TO OPERATE A FOOD ESTABLISHMENT**

In accordance with regulations promulgated under authority of Chapter 94, Section 305A and Chapter 111, Section 5 of the General Laws a permit is hereby granted to:

**HOPEDALE COUNTRY CLUB**

Whose place of business is: **90 Mill Street, PO Box 126, Hopedale**

Type of business: **FOOD SERVICE**

To operate a food establishment in: **Town of Hopedale**

*"As a condition of this license, in the interest of public health, the licensee shall not employ or allow to work on the licensed premises any person not present in the United States in compliance with applicable law."*

  
\_\_\_\_\_  
William Fisher, Health Agent



# The Commonwealth of Massachusetts

## Department of Public Safety New and Renewal Certificate of Inspection

In accordance with 780 CMR, Chapter 1 (*The Ninth Edition of the Massachusetts State Building Code*) and Chapter 304 of the Acts of 2004 (*an Act to further enhance fire and life safety*), this *Certificate of Inspection* is issued to the premise or structure or part thereof as herein identified.

Issued to	<i>Identify Name of Establishment</i>					<i>Certificate No.</i>
	THE HOPEDALE COUNTRY CLUB					2022-005
Located at	<i>Identify property address including street number, name, city or town and county</i>					<i>Certificate Expiration</i>
	90 MILL STREET HOPEDALE, MA 01747					November 10, 2022
Use Group Classification(s)	<i>Basement</i>	<i>First Floor</i>	<i>Second Floor</i>	<i>Third Floor</i>	<i>Fourth Floor</i>	<i>Other</i>
		A-2				
Allowable Occupant Load		90				

This *Certificate of Inspection* is hereby issued by the undersigned to certify that the premise, structure or portion thereof as herein specified has been inspected for general fire and life safety features. This certificate shall be framed behind clear glass and/or laminated and posted in a conspicuous place within the space as directed by the undersigned. *Failure to post or tampering with the contents of the certificate is strictly prohibited.*

Name of Municipal Fire Inspector	David J. McMorrow Deputy Fire Chief	Signature of Municipal Fire Inspector		Name of Municipal Building Commissioner	Timothy J. Aicardi	Signature of Municipal Building Commissioner		Date of Inspection	November 10, 2021
Signature of Municipal Fire Inspector		Signature of Municipal Building Commissioner		Date of Issuance	November 10, 2022				

s:\bbr\bbrs\certificate of inspection info 2011\304 certificate of inspection card.doc

**HCC NON-SUNDAY ENTERTAINMENT RENEWAL**



**HCC NON-SUNDAY ENTERTAINMENT RENEWAL**



*The Commonwealth of Massachusetts*  
*Secretary of the Commonwealth*  
*State House, Boston, Massachusetts 02133*

William Francis Galvin  
Secretary of the  
Commonwealth

Date: November 23, 2021

To Whom It May Concern :

I hereby certify that according to the records of this office,  
**HOPEDALE COUNTRY CLUB, INC.**

is a domestic corporation organized on **July 29, 1953**

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 180 section 26 A, for revocation of the charter of said corporation; that the State Secretary has not received notice of dissolution of the corporation pursuant to Massachusetts General Laws, Chapter 180, Section 11, 11A, or 11B; that said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.



In testimony of which,  
I have hereunto affixed the  
Great Seal of the Commonwealth  
on the date first above written.

*William Francis Galvin*

Secretary of the Commonwealth

Certificate Number: 21110614680

Verify this Certificate at: <http://corp.sec.state.ma.us/CorpWeb/Certificates/Verify.aspx>

Processed by: tad



# HCC NON-SUNDAY ENTERTAINMENT RENEWAL

MA SOC Filing Number: 202184882650 Date: 11/17/2021 8:01:00 PM



## The Commonwealth of Massachusetts William Francis Galvin

Minimum Fee: \$15.00

Secretary of the Commonwealth, Corporations Division  
One Ashburton Place, 17th floor  
Boston, MA 02108-1512  
Telephone: (617) 727-9640

### Annual Report

(General Laws Chapter 180)

Filing for November 1, 2021

In compliance with the requirements of Section 26A of Chapter one hundred and eighty (180) of the General Laws:

1. Exact name of the corporation: HOPEDALE COUNTRY CLUB, INC.

2. Location of its principal office:

No. and Street: 90 MILL STREET

City or Town: HOPEDALE

State: MA

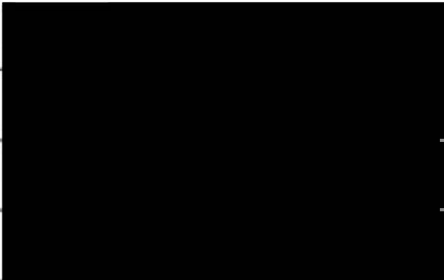
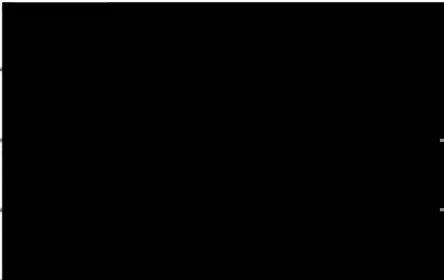
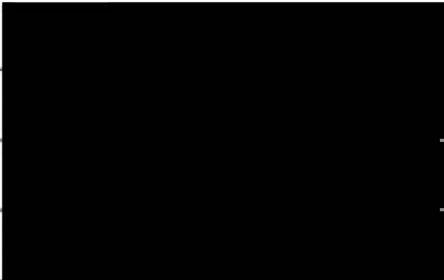
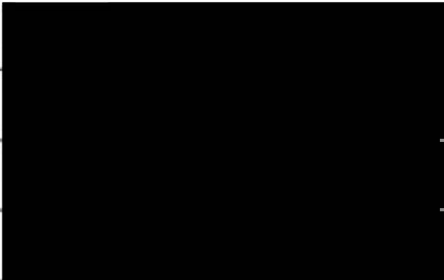
Zip: 01747

Country: USA

3. DATE OF THE LAST ANNUAL MEETING: ☉ (mm/dd/yyyy)  
(if none leave blank)

4. State the names and street addresses of all officers, including all the directors of the corporation, and the date on which the term of office of each expires:

Title	Individual Name First, Middle, Last, Suffix	Expiration of Term
PRESIDENT	DONALD STEWARDSON	11/01/22
TREASURER	STEVEN HAYNES	11/01/23
FINANCIAL SECRETARY	ANTHONY E. FARRELL	11/01/22
CLERK	EDWARD CRIVELLO	11/01/22
VICE PRESIDENT	PAUL CELLUCCI	11/01/2023
DIRECTOR	JOHN TAMMARO	11/01/23
DIRECTOR	RYAN BOLDY	11/01/23
DIRECTOR	ERIC CARLSON	11/01/22
DIRECTOR	ROBERT WRIGHT	11/01/22
DIRECTOR	JOHN MAZZARELLI	11/01/22
DIRECTOR	CHRISTOPHER ALVES	11/01/23

DIRECTOR	JAMES SMITH		11/01/23
DIRECTOR	BRIAN SULLIVAN		11/01/22
DIRECTOR	ROBERT TAMAGNI		11/01/22
DIRECTOR	ROBERT MANNING		11/01/23

5. Check if the corporation is a cemetery corporation that does NOT hold perpetual care funds in trust. If the corporation is a cemetery corporation that holds perpetual care funds in trust, a copy of the written instrument establishing the trust and any amendments thereto must be attached, and the annual report must be filed by facsimile, mail or in person.

I, the undersigned, EDWARD CRIVELLO of the above-named business entity, in compliance with the General Laws, Chapter 180, hereby certify that the above information is true and correct as of the dates shown. IN WITNESS WHEREOF AND UNDER PENALTIES OF PERJURY, I hereto sign my name on this 17 Day of November, 2021.

# HCC LIQUOR LICENSE RENEWAL

- Copies of current Crowd Manager Certifications for each trained Crowd Manager per M.G.L. Chapter 304 of the Acts of 2004. For updates and current information on the crowd manager law please refer to the following website; <http://www.mass.gov/eopss/agencies/dfs/crowd-manager-regulations-and-training-prog-.html>
- All on-premise licenses must have a current Fire/Safety Certificate per M.G.L. Chapter 304 of the Acts of 2004. The certificate dated by no later than November 30 each year
- If your business serves food, you must include a current Board of Health food permit. Please contact the Board of Health office at (508)-634-2203 X 222 if you need a copy

## ALL LICENSE RENEWAL APPLICANTS PLEASE READ, SIGN AND DATE

- Applications received after posted date and time will be subject to a \$100 fee
- Incomplete applications will be subject to a \$100 fee
- Missing documentation will be subject to a \$100 fee

## ALL LICENSE RENEWAL LICENSE HOLDERS: PLEASE READ, SIGN AND DATE STATEMENT OF PREMISE

- If you are **not** making changes to your current ABCC License(s) including the following; Business Name, Manager, Days/Hours of Operation, Types of Alcohol, Storage areas or premises changes, please check the box and sign and date below (this must be signed by a current manager listed on license)

*I am requesting to renew my Liquor License(s) set to expire this calendar year on December 31. I have not made any of the above changes and promise to report any changes immediately to the Licensing Board.*

David Sanabria  
Print Name of License Holder

David Sanabria  
Signature and Date of License Holder

## IF YOU MADE CHANGES TO THE TERMS OF YOUR EXISTING ABCC LICENSE, PLEASE CONTACT:

Lindsay Mercier, Board of Selectmen's Office  
(508) 634 -2203 X 210  
[lmMercier@hopedale-ma.gov](mailto:lmMercier@hopedale-ma.gov)

**ANY CHANGE MADE TO YOUR EXISTING ABCC LICENSE REQUIRES PRIOR APPROVAL BY BOTH THE BOARD OF SELECTMEN AND ABCC**

**LICENSES WILL NOT BE ISSUED IF YOU OWE ANY MONEY TO THE TOWN OF HOPEDALE OR THE COMMONWEALTH OF MASSACHUSETTS**

***BE SURE TO INCLUDE THIS CHECKLIST WITH YOUR APPLICATION AND FORMS***

# HCC LIQUOR LICENSE RENEWAL

## TOWN OF HOPEDALE ALCOHOL LICENSE CHECKLIST

**Please Note:** Per Licensing Authority, applications that are late or incomplete by not including the requested documentation will be subject to an additional processing fee of \$100

- Renewal Application deadline is Friday, November 5, 2021 at 4 PM**
- Alcohol License Renewal Fee \$1,100.00 (Must be included with application)

### **COMPLETED AND SIGN THE LICENSE RENEWAL FORMS (must be completed by current manager of license)**

- ABCC LICENSE RENEWAL APPLICATION (must be signed and completed by **Current** Manager)
- IF ANY INFORMATION HAS CHANGED SINCE LAST RENEWAL, PLEASE COMPLETE THE BLANK ABCC FORM. The **Current** Manager must sign the form. If the manager has changed since the last renewal, you notify the Board of Selectmen office 508-634-2203 X210
- MASS DOR (REAP FORM) Per M.G.L. Chapter 62, §49A
- COMPLETE 24- HOUR EMERGENCY CONTACT FORM
- WORKER'S COMPENSATION INSURANCE AFFIDAVIT

### **OBTAIN AND SUBMIT the following list of items**

- WORKER'S COMPENSATION CERTIFICATE-** (must obtain and provide current certificate Insurance carrier can **email** current certificate to Lindsay Mercier at Lmercier@hopedale-ma.gov

### **Please check the box below for the business type for the license renewal**

- Corporation
- Partnership
- Sole Proprietor
- Individual
- Other
- BUSINESS CERTIFICATE** obtain current business certificate or submit a copy of current certificate  
Please contact the Town Clerk's office at (508)634-2203 X 215 to obtain  
**Please Note: Business Name listed on Business Certificate must match license application. All corporate officers must be listed and appear before Town Clerk and sign application. If Business names do not match - New or Renewal License Applications will not be granted.**

Date business certificate expires: \_\_\_\_\_

### **ON PREMISES §12 LICENCE HOLDERS ONLY- Must provide the following additional information/forms:**

- Effective August 26, 2010, no license under M.G.L. c. 138, §12 shall be issued or renewed until the applicant or licensee provides proof of mandatory insurance coverage by filing a certificate of insurance in a form acceptable to the local licensing authority ("LLA"). As a result, applicants for §12 licenses must provide proof of insurance coverage under a liquor legal liability insurance policy for bodily injury or death for a minimum amount of \$500,000 as a condition to receive a license.



# HCC LIQUOR LICENSE RENEWAL

## MASSACHUSETTS DEPARTMENT OF REVENUE

### REVENUE ENFORCEMENT AND PROTECTION ATTESTATION (REAP)

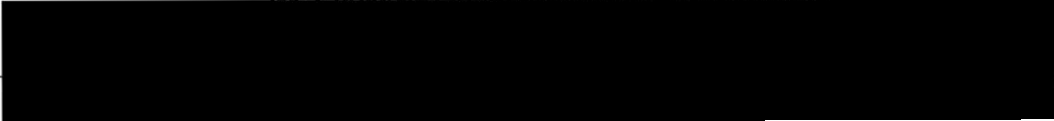
I certify under penalties of perjury that I, to the best of my knowledge and belief, have filed all state tax returns and paid all state taxes required by law.

*Donald M. Stewardson Jr.*

**\*Signature of Individual or Corporate Name (Mandatory)**

*Donald M. Stewardson Jr. President Hopedale Country Club Inc.*

**By Corporate Officer (Mandatory, If Applicable)**



\*Licenses or permits will not be issued unless this certification clause is signed by the applicant.

\*\* Will be furnished to the MA Department of Revenue to determine whether you have met tax filing or tax payment obligations. Licensees who fail to correct their non-filing or delinquency will be subject to license suspension or revocation. This request is made under the authority of M.G.L. Chapter 62C, § 49A.



# HCC LIQUOR LICENSE RENEWAL



The Commonwealth of Massachusetts  
Department of Industrial Accidents  
Office of Investigations  
Lafayette City Center  
2 Avenue de Lafayette, Boston, MA 02111-1750  
www.mass.gov/dia

## Workers' Compensation Insurance Affidavit: General Businesses

### Applicant Information

Please Print Legibly

Business/Organization Name: Hopedale Country Club Inc.

Address: 90 MILL STREET

City/State/Zip: Hopedale MA 01747 Phone#: (508) 473-1443

#### Are you an employer? Check the appropriate box:

1.  I am an employer with 9 employees (full and/or part-time).\*
2.  I am a sole proprietor or partnership and have no employees working for me in any capacity. [No workers' comp. insurance required]
3.  We are a corporation and its officers have exercised their right of exemption per c. 152, §1(4), and we have no employees. [No workers' comp. insurance required]\*
4.  We are a non-profit organization, staffed by volunteers, with no employees. [No workers' comp. insurance req.]

#### Business Type (required):

5.  Retail
6.  Restaurant/Bar/Eating Establishment
7.  Office and/or Sales (incl. real estate, auto, etc.)
8.  Non-profit
9.  Entertainment
10.  Manufacturing
11.  Health Care
12.  Other Golf Club

\*Any applicant that checks box #1 must also fill out the section below showing their workers' compensation policy information.

\*\*If the corporate officers have exempted themselves, but the corporation has other employees, a workers' compensation policy is required and such an organization should check box #1.

I am an employer that is providing workers' compensation insurance for my employees. Below is the policy information.

Insurance Company Name: Bright Insurance Agency, Inc.

Insurer's Address: 6 CONGRESS STREET

City/State/Zip: Milford MA 01757

Policy # or Self-ins. Lic. # SEE ATTACHED Expiration Date: \_\_\_\_\_

Attach a copy of the workers' compensation policy declaration page (showing the policy number and expiration date).

Failure to secure coverage as required under § 25A of MGL c. 152 can lead to the imposition of criminal penalties of a fine up to \$1,500.00 and/or one-year imprisonment, as well as civil penalties in the form of a STOP WORK ORDER and a fine of up to \$250.00 a day against the violator. Be advised that a copy of this statement may be forwarded to the Office of Investigations of the DIA for insurance coverage verification.

I do hereby certify, under the pains and penalties of perjury that the information provided above is true and correct.

Signature: Donald M. Stewardson Jr. Date: 11/5/2021

Official use only. Do not write in this area, to be completed by city or town official.

City or Town: \_\_\_\_\_ Permit/License # \_\_\_\_\_

Issuing Authority (check one):

1.  Board of Health
2.  Building Department
3.  City/Town Clerk
4.  Licensing Board
5.  Selectmen's Office
6.  Other \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone #: \_\_\_\_\_



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/04/2021

**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).**

<b>PRODUCER</b> Bright Agency, Inc 6 Congress St. P.O. Box 424 Worcester MA 01767	<b>CONTACT NAME:</b> Kim Sylvestre <b>PHONE (A/C, No, Ext):</b> (508) 473-0665 <b>E-MAIL ADDRESS:</b> kysylvestre@brightagency.com <b>FAX (A/C, No):</b> (508) 473-6709
<b>INSURED</b> Hopkdale Country Club Inc PO Box 128 Hopkdale MA 01747	<b>INSURER(S) AFFORDED COVERAGE</b> INSURER A: Acadia Insurance Company INSURER B: Technology Insurance Company INSURER C: INSURER D: INSURER E: INSURER F:

**COVERAGES**      **CERTIFICATE NUMBER:** GL2172718084      **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.**

TYPE OF INSURANCE	AGGREGATE LIMIT APPLIES PER:	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXPI (MM/DD/YYYY)	LIMITS
<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"/> PROJECT <input type="checkbox"/> LOC OTHER: <input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/> AUTOS ONLY		[REDACTED]	07/20/2021	07/20/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Per occurrence) \$ 500,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Hired Auto \$ 1,000,000 COMBINED SINGLE LIMIT (Per accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> SUCCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE		[REDACTED]	07/20/2021	07/20/2022	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
<input type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER INCLUDED? (Mandatory in MA) <input type="checkbox"/> Y/N DESCRIPTION OF OPERATIONS below		[REDACTED]	01/01/2021	01/01/2022	PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> EL EACH ACCIDENT \$ 600,000 EL DISEASE - MA EMPLOYEE \$ 500,000 EL DISEASE - POLICY LIMIT \$ 500,000
Liquor Liability		[REDACTED]	07/20/2021	07/20/2022	\$1,000,000 \$2,000,000

**DISCOVER:** LIST OF ADDRESSES / LOCATIONS / VEHICLES (ACORD 404. Additional Remarks, Endorsements may be attached if space allows is required)

## HCC LIQUOR LICENSE RENEWAL

<b>CERTIFICATE HOLDER</b> Town of Hopkdale 54 Main Street Hopkdale MA 01747	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THE NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
--	---

# HCC LIQUOR LICENSE RENEWAL



## THE COMMONWEALTH OF MASSACHUSETTS TOWN OF HOPEDALE EMERGENCY CONTACT FORM

Date: Nov 1, 2021

Hopedale Country Club Inc.  
Name of Licensed Business

90 Mill St. Hopedale, MA 01747  
Address of Business

### EMERGENCY CONTACT INFORMATION

Donald M. Stawickson Jr



24 Hour Emergency Contact Telephone Number

Licenses applying for or held in the Town of Hopedale:

LIQUOR COMMON VICTUALER  
ENTERTAINMENT

### Business Hours

Weekday Business Hours of Operation Mon-Fri: 9:00 AM - 12:00 AM

Weekend Business Hours of Operation Sat. & Sun: 9:00 AM - 12:00 AM

### IF YOU ARE APPLYING FOR AN ENTERTAINMENT LICENSE YOU MUST COMPLETE

Weekday Entertainment Hours Mon-Fri: 9:00 PM - 11:00 PM

Weekend Entertainment Hours Sat. & Sun: Saturday 3:00 - 12:00 PM

Types of Entertainment: LIVE MUSIC, DJ and Trivia

The premises is  ALARMED  NOT ALARMED

The premises has  SPRINKLER SYSTEM  DOES NOT HAVE SPRINKLER SYSTEM

**THIS FORM MUST BE COMPLETED BEFORE A LICENSE IS ISSUED**

**HCC LIQUOR LICENSE RENEWAL**

**Permit No.: 22-005**  
**Date Issued: July 1, 2021**  
**Fee: \$325.00**  
**Expiration Date: June 30, 2022**

**The Commonwealth of Massachusetts**  
**TOWN OF HOPEDALE**  
**Board of Health**  
78 Hopedale Street - P.O. Box 7  
Hopedale, Massachusetts 01747

**PERMIT TO OPERATE A FOOD ESTABLISHMENT**

In accordance with regulations promulgated under authority of Chapter 94, Section 305A and Chapter 111, Section 5 of the General Laws a permit is hereby granted to:

**HOPEDALE COUNTRY CLUB**

**Whose place of business is: 90 Mill Street, PO Box 126, Hopedale**  
**Type of business: FOOD SERVICE**  
**To operate a food establishment in: Town of Hopedale**

*“As a condition of this license, in the interest of public health, the licensee shall not employ or allow to work on the licensed premises any person not present in the United States in compliance with applicable law.”*

  
\_\_\_\_\_  
William Fisher, Health Agent



# HCC LIQUOR LICENSE RENEWAL



*The Commonwealth of Massachusetts*  
*Secretary of the Commonwealth*  
*State House, Boston, Massachusetts 02133*

William Francis Galvin  
Secretary of the  
Commonwealth

Date: November 23, 2021

To Whom It May Concern :

I hereby certify that according to the records of this office,  
**HOPEDALE COUNTRY CLUB, INC.**

is a domestic corporation organized on **July 29, 1953**

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 180 section 26 A, for revocation of the charter of said corporation; that the State Secretary has not received notice of dissolution of the corporation pursuant to Massachusetts General Laws, Chapter 180, Section 11, 11A, or 11B; that said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.



In testimony of which,  
I have hereunto affixed the  
Great Seal of the Commonwealth  
on the date first above written.

*William Francis Galvin*

Secretary of the Commonwealth

Certificate Number: 21110614680

Verify this Certificate at: <http://corp.sec.state.ma.us/CorpWeb/Certificates/Verify.aspx>

Processed by: tad

**HCC LIQUOR LICENSE RENEWAL**



**The Commonwealth of Massachusetts  
William Francis Galvin**

Minimum Fee: \$15.00

Secretary of the Commonwealth, Corporations Division  
One Ashburton Place, 17th floor  
Boston, MA 02108-1512  
Telephone: (617) 727-9640

Annual Report  
(General Laws, Chapter 180)

Filing for November 1, 2021

In compliance with the requirements of Section 26A of Chapter one hundred and eighty (180) of the General Laws:

1. Exact name of the corporation: HOPEDALE COUNTRY CLUB, INC.

2. Location of its principal office:

No. and Street: 90 MILL STREET  
City or Town: HOPEDALE State: MA Zip: 01747 Country: USA

3. DATE OF THE LAST ANNUAL MEETING: ☞ (mm/dd/yyyy)  
(if none leave blank)

4. State the names and street addresses of all officers, including all the directors of the corporation, and the date on which the term of office of each expires:

Title	Individual Name First, Middle, Last, Suffix	Address (no PO Box) Address, City or Town, State, Zip Code	Expiration of Term
PRESIDENT	DONALD STEWARSON		11/01/22
TREASURER	STEVEN HAYNES		11/01/23
FINANCIAL SECRETARY	ANTHONY E. FARRELL		11/01/22
CLERK	EDWARD CRIVELLO		11/01/22
VICE PRESIDENT	PAUL CELLUCCI		11/01/2023
DIRECTOR	JOHN TAMMARO		11/01/23
DIRECTOR	RYAN BOLDY		11/01/23
DIRECTOR	ERIC CARLSON		11/01/22
DIRECTOR	ROBERT WRIGHT		11/01/22
DIRECTOR	JOHN MAZZARELLI		11/01/22
DIRECTOR	CHRISTOPHER ALVES		11/01/23



# HCC LIQUOR LICENSE RENEWAL

DIRECTOR	JAMES SMITH	[REDACTED]	11/01/23
DIRECTOR	BRIAN SULLIVAN	[REDACTED]	11/01/22
DIRECTOR	ROBERT TAMAGNI	[REDACTED]	11/01/22
DIRECTOR	ROBERT MANNING	[REDACTED]	11/01/23

5. Check if the corporation is a cemetery corporation that does NOT hold perpetual care funds in trust. If the corporation is a cemetery corporation that holds perpetual care funds in trust, a copy of the written instrument establishing the trust and any amendments thereto must be attached, and the annual report must be filed by facsimile, mail or in person.

I, the undersigned, EDWARD CRIVELLO of the above-named business entity, in compliance with the General Laws, Chapter 180, hereby certify that the above information is true and correct as of the dates shown. IN WITNESS WHEREOF AND UNDER PENALTIES OF PERJURY, I hereto sign my name on this 17 Day of November, 2021.

# Corporations Division

## Business Entity Summary

# HCC LIQUOR LICENSE RENEWAL

ID Number: 042172615

[Request certificate](#)

[New search](#)

Summary for: HOPEDALE COUNTRY CLUB, INC.

<b>The exact name of the Nonprofit Corporation:</b> HOPEDALE COUNTRY CLUB, INC.		
<b>Entity type:</b> Nonprofit Corporation		
[REDACTED]		
<b>Date of Organization in Massachusetts:</b> 07-29-1953		
		<b>Last date certain:</b>
<b>Current Fiscal Month/Day: /</b>		<b>Previous Fiscal Month/Day:</b> 00/00
<b>The location of the Principal Office in Massachusetts:</b>		
Address: 90 MILL STREET		
City or town, State, Zip code, Country: HOPEDALE, MA 01747 USA		
<b>The name and address of the Resident Agent:</b>		
Name:		
Address:		
City or town, State, Zip code, Country:		
<b>The Officers and Directors of the Corporation:</b>		
<b>Title</b>	<b>Individual Name</b>	<b>Term Expires</b>
PRESIDENT	DONALD STEWARDSON	11-01-2022
TREASURER	STEVEN HAYNES	11-01-2021
VICE PRESIDENT	PAUL CELLUCCI	11-01-2021
FINANCIAL SECRETARY	ANTHONY E. FARRELL	11-01-2022
CLERK	EDWARD CRIVELLO	11-01-2022
DIRECTOR	JOHN TAMMARO	11-01-2021
DIRECTOR	KEN MOORADIAN	11-01-2021
DIRECTOR	FRANCIS COFFEY	11-01-2021
DIRECTOR	TIMOTHY MOORADIAN	11-01-2021
DIRECTOR	ERIC CARLSON	11-01-2021
DIRECTOR	BRIAN SULLIVAN	11-01-2021
DIRECTOR	ROBERT TAMAGNI	11-01-2021
DIRECTOR	ROBERT WRIGHT	11-01-2022
DIRECTOR	ROBERT MANNING	11-01-2021
DIRECTOR	JOHN MAZZARELLI	11-01-2022

Consent

Confidential Data

Merger Allowed

Manufacturing

Note: Additional information that is not available on this system is located in the Card File.

View filings for this business entity:

# HCC LIQUOR LICENSE RENEWAL

Hopedale  
City or Town

November 1, 2021  
Date


Commonwealth of Massachusetts  
Alcoholic Beverages Control Commission  
239 Causeway Street  
Boston, MA 02114

In accordance with Chapter 138, Section 1 of the General Laws of Massachusetts, we hereby submit the following list containing the names and residences of our officers, together with the amount of salary or compensation received by each employee engaged in the handling and selling of alcoholic beverages.

## OFFICERS

<u>NAME</u>	<u>ADDRESS</u>
Pres <u>Donald Stewardson</u>	
V Pres <u>Paul Cellucci</u>	
Secr <u>Edward Crivello</u>	
Treas <u>Steven Haynes</u>	

## EMPLOYEES

<u>NAME</u>	<u>ADDRESS</u>	<u>SALARY</u>
<u>David Sanchioni</u>		
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Hopedale Country Club, Inc.  
Club Name

**HCC LIQUOR LICENSE RENEWAL**

# Certificate of Completion

This Certificate of Completion of  
**eTIPS On Premise 3.0**  
For coursework completed on September 8, 2020  
provided by Health Communications, Inc.  
is hereby granted to:

**David Sanchioni**

Certification to be sent to:

31 Essex St  
Bellingham MA, 02019-2304 USA



HEALTH COMMUNICATIONS, INC.

This document is not valid if THIS certification is modified or that



# HCC LIQUOR LICENSE RENEWAL

**This is your official TIPS certification card. Carry it with you as proof of your TIPS certification**

**Congratulations!**

This card certifies that you have successfully completed the TIPS (Training for Intervention ProcedureS) program. We value your participation and dedication to the responsible sale, service, and consumption of alcohol.

By using the techniques you have learned, you will help to provide a safer environment for your patrons, peers, and colleagues and reduce the tragedies resulting from intoxication, underage drinking, and drunk driving.

If you have any information you think would enhance the TIPS program, or if we can assist you in any way, please contact us at 800-438-8477.



Sincerely,

A handwritten signature in black ink, appearing to read "Adam F. Chafetz".

**Adam F. Chafetz**  
HCl President

ID#: 5528350 Name: Madison Bryn Corbett  
Exam Date: 8/9/2021 Expiration Date: 8/9/2024



eTIPS On Premise 3.1

**CERTIFIED**

Issued: 8/9/2021

Expires: 8/9/2024

ID#: 5528350

**Madison Bryn Corbett**  
Hopdale Country Club  
90 Main St  
Hopdale, MA 01747-2102

For service visit us online at [www.gettips.com](http://www.gettips.com)



# Certificate of Completion

This Certificate of Completion of  
**eTIPS On Premise 3.1**  
For coursework completed on October 10, 2021  
provided by Health Communications, Inc.  
is hereby granted to:

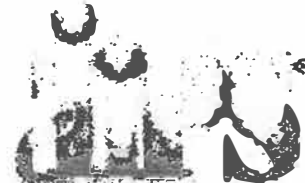
**Sean Duong**

Certification to be sent to:

**45 Mossman Rd  
Sudbury MA, 01776-1309 USA**

HEALTH

INC.



**HCC LIQUOR LICENSE RENEWAL**



# HCC LIQUOR LICENSE RENEWAL

## 2022 Hopedale Country Club

### Food Service Hours of Operation

Opening Day through April 30 <sup>th</sup>	11:00am to 7:00pm Mon – Thurs 8:00am to 9:00pm Fri – Sun
April 30 <sup>th</sup> – November 1 <sup>st</sup>	11:00am to 7:00pm Mon – Thurs 8:00am to 9:00pm Fri - Sun
November 2 <sup>nd</sup> – Course Closing	11:00am to 6:00pm Mon – Thurs 8:00am to 9:00pm Fri - Sun

### Bar Service Hours of Operation

Opening Day through April 30 <sup>th</sup>	9:00am to 8:00pm Mon – Thurs 9:00am to 10:00pm Fri – Sat 9:00am to 9:00pm Sun
April 30 <sup>th</sup> – November 1 <sup>st</sup>	9:00am to 9:00pm Mon – Thurs 9:00am to 10:00pm Fri – Sat 9:00am to 9:00pm Sun

### Winter Clubhouse Hours

Starts after Golf Course is closed for the season until opening day

Wednesday	4:00pm to 9:00pm
Thursday	4:00pm to 9:00pm
Friday	11:00am to 10:00pm
Saturday	11:00am to 10:00pm
Sunday	8:00am to 9:00pm

Bar Service Hours ends 1 hour food ends  
All hours subject to change by the House Committee, HCC

**2020**

**Hopedale Country Club**

**Food Service Hours of Operation**

Opening Day through April 30th	11:00 AM to 7:00 PM Mon – Thurs 8:00 AM to 9:00 PM Fri – Sun
April 30 <sup>th</sup> – November 1 <sup>st</sup>	11:00 AM to 9:00 PM Mon – Thurs 8:00 AM to 9:00 PM Fri – Sun
November 2 <sup>nd</sup> – Course Closing	11:00 AM to 6:00 PM Mon – Thurs 8:00 AM to 9:00 PM Fri – Sun

**Bar Service Hours of Operation**

Opening Day through April 30th	9:00 AM to 8:00 PM Mon – Thurs 9:00 AM to 10:00 PM Fri – Sat 9:00 AM to 9:00 PM Sun
April 30 <sup>th</sup> – November 1 <sup>st</sup>	9:00 AM to 9:00 PM Mon – Thurs 9:00 AM to 10:00 PM Fri – Sat 9:00 AM to 9:00 PM Sun

**Winter Clubhouse Hours**

**Starts after Golf Course is closed for season until opening day**

Wednesday	4:00PM to 10:00PM
Thursday	4:00 AM to 9:00 PM
Friday & Saturday	11:00 AM to 9:00 PM
Sunday	8:00 AM to 9:00 PM

**Bar Service Hours ends 1:00 hour after food ends**

**All hours subject to change by the House Committee**



# The Commonwealth of Massachusetts

## Department of Public Safety

### New and Renewal Certificate of Inspection

In accordance with 780 CMR, Chapter 1 (The Ninth Edition of the Massachusetts State Building Code) and Chapter 304 of the Acts of 2004 (an Act to further enhance fire and life safety), this Certificate of Inspection is issued to the premise or structure or part thereof as herein identified.

Issued to	Identify Name of Establishment					Certificate No.
	THE HOPEDALE COUNTRY CLUB					2022-005
Located at	Identify property address including street number, name, city or town and county					Certificate Expiration
	90 MILL STREET HOPE DALE, MA. 01747					November 10, 2022
Use Group Classification(s)	Basement	First Floor	Second Floor	Third Floor	Fourth Floor	Other
		A-2				
Allowable Occupant Load		90				

This Certificate of Inspection is hereby issued by the undersigned to certify that the premise, structure or portion thereof as herein specified has been inspected for general fire and life safety features. This certificate shall be framed behind clear glass and/or laminated and posted in a conspicuous place within the space as directed by the undersigned. Failure to post or tampering with the contents of the certificate is strictly prohibited.

Name of Municipal Fire Inspector	David J. McMorrow Deputy Fire Chief	Name of Municipal Building Commissioner	Timothy J. Aicardi	Date of Inspection	November 10, 2021
Signature of Municipal Fire Inspector		Signature of Municipal Building Commissioner		Date of Issuance	November 10, 2022

s:\bbr\bbrs\certificate of inspection info 2011\304 certificate of inspection card.doc

**HCC LIQUOR LICENSE RENEWAL**

# 2022 Hopedale Country Club

## Food Service Hours of Operation

Opening Day through April 30 <sup>th</sup>	11:00am to 7:00pm Mon – Thurs 8:00am to 9:00pm Fri – Sun
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Bar Service Hours ends 1 hour food ends

All hours subject to change by the House Committee, HCC

### Can a retailer sell alcoholic beverages by auction?

A [§ 15](https://malegislature.gov/Laws/GeneralLaws/PartI/TitleXX/Chapter138/Section15) package store may sell wine, malt beverages, and distilled spirits by auction only if the package store applies for and receives the proper license from the LLA with the prior approval of the ABCC.

To obtain such an auction license under [§ 14A](https://malegislature.gov/Laws/GeneralLaws/PartI/TitleXX/Chapter138/Section14A)

(<https://malegislature.gov/Laws/GeneralLaws/PartI/TitleXX/Chapter138/Section14A>), the package store be issued a license under [§ 15](https://malegislature.gov/Laws/GeneralLaws/PartI/TitleXX/Chapter138/Section15). These auctions must be held only at the location described on the auction license but may be licensed to be held at “premises which are either the principal place of business or headquarters of the applicant and which are legally zoned to allow such sales, or which are the premises of a licensee under [Section 12](https://malegislature.gov/Laws/GeneralLaws/PartI/TitleXX/Chapter138/Section12) (<https://malegislature.gov/Laws/GeneralLaws/PartI/TitleXX/Chapter138/Section12>) or [Section 15](https://malegislature.gov/Laws/GeneralLaws/PartI/TitleXX/Chapter138/Section15) (<https://malegislature.gov/Laws/GeneralLaws/PartI/TitleXX/Chapter138/Section15>) of [M.G.L. Chapter 138](https://malegislature.gov/Laws/GeneralLaws/PartI/TitleXX/Chapter138/) (<https://malegislature.gov/Laws/GeneralLaws/PartI/TitleXX/Chapter138/>).”

The law imposes a number of restrictions and controls on the auction license, one of which restricts the duration and number of auction licenses that may be issued to any package store. No auction license “shall be for a duration of more than ten consecutive calendar days and no holder of any such temporary license shall be granted more than two such temporary licenses in a calendar year.”

### Can a retailer use his/her license to secure a loan?

Yes, but only under certain conditions. [Section 23](https://malegislature.gov/Laws/GeneralLaws/PartI/TitleXX/Chapter138/Section23)

(<https://malegislature.gov/Laws/GeneralLaws/PartI/TitleXX/Chapter138/Section23>) states that “any license granted under the provision of this chapter may be pledged for a loan provided approval of such a loan and pledge is given by the local licensing authority and the Commission [ABCC].”

### What are the different kinds of liquor assets/property that can be pledged?

The law permits three kinds of liquor assets/property to be pledged. These are:

1. Licenses that authorize the sale of alcoholic beverages;
2. Corporate Stock in a corporation that holds a license to sell alcoholic beverages; and
3. Alcoholic beverages themselves which a licensee is authorized to sell.

### What is the deadline to submit my renewal?

Under [§ 16A](https://malegislature.gov/Laws/GeneralLaws/PartI/TitleXX/Chapter138/Section16A), the deadline to submit renewals for [§ 12](https://malegislature.gov/Laws/GeneralLaws/PartI/TitleXX/Chapter138/Section12) on-premises and [§ 15](https://malegislature.gov/Laws/GeneralLaws/PartI/TitleXX/Chapter138/Section15) off-premises licenses is November 30th.

## Operating the Business

### Do LLAs set the hours during which restaurants can serve alcoholic beverages on weekdays?



To a limit. Massachusetts State Law says that [§ 12](#)

(<https://malegislature.gov/Laws/GeneralLaws/PartI/TitleXX/Chapter138/Section12>) licensees cannot be barred from serving alcohol between 11:00 a.m.-11:00 p.m. LLAs may grant extended opening hours between 8:00 a.m. and 11:00 a.m. and extended closing hours between 11:00 p.m. and 2:00 a.m. In no event can sales be made between 2:00 a.m. and 8:00 a.m.

**What are the Sunday hours that a [§ 15](#) (<https://malegislature.gov/Laws/GeneralLaws/PartI/TitleXX/Chapter138/Section15>) package store can be open?**

**A [§ 15](#) (<https://malegislature.gov/Laws/GeneralLaws/PartI/TitleXX/Chapter138/Section15>) Package**

Store/Supermarket/Convenience Store licensee chooses the hours of sale on a Sunday, so as long as the sales do not commence before 10:00 a.m. and conclude no later than 11 p.m., or 11:30 p.m. on a day before a legal holiday.

**What are the Sunday hours that a pouring license can be open?**

**A [§ 12](#) (<https://malegislature.gov/Laws/GeneralLaws/PartI/TitleXX/Chapter138/Section12>)** pouring license can open on a Sunday at 12:00 noon. The exception to this is if the local licensing authority accepts a certain state law, they may authorize a restaurant, hotel, club, or veterans club to open as early as 10:00 a.m.

**If a restaurant occasionally runs out of a popular item on a busy night, can the manager go to a package store and buy a few bottles to temporarily meet his/her customer's demands?**

No. All licensed retail establishments, including holders of [Special Licenses \(/special-licenses-and-permits-abcc\)](#) (so-called "One Day" Licenses), must purchase their alcoholic beverages from a licensed Massachusetts wholesaler, manufacturer issued by the ABCC.

**Can a retailer get a transportation permit to transfer product from one package store to another?**

No. Alcohol ordered by a package store must stay on its licensed premises.

**Can everyone bring their own beer, wine, or other alcoholic beverages into an establishment (so-called "BYOB")?**

Not if the establishment has a liquor license. If the establishment has a liquor license, then no one can carry onto the premises their own beer, wine or other alcoholic beverages for their own private consumption (so-called "BYOB" or "brown-bagging"). If the establishment does not have a liquor license, then one must check with the city/town in which the establishment is located to learn if there is any local law dealing with bringing one's own beer onto an establishment for personal consumption.

**Can "non-alcoholic beer" be served or sold to persons under twenty-one?**

Maybe. [The State Liquor Control Act, M.G.L. Chapter 138](#)

(<https://malegislature.gov/Laws/GeneralLaws/PartI/TitleXX/Chapter138/>), regulates "alcoholic beverages" as that term is defined by law. The law defines "alcoholic beverages" to be "any liquid intended for human consumption as a beverage and containing one half of one percent or more of alcohol by volume at sixty degrees Fahrenheit." Thus, if a product is composed or manufactured so that it contains 1/2% or more of alcohol by volume at sixty degrees Fahrenheit, it is an "alcoholic beverage" and subject to the Liquor Control Act. If a product is

## **RETAIL LIQUOR LICENSE RENEWAL APPLICATION GUIDELINES**

Without exception, all annual alcoholic beverages licensees are required to renew their alcoholic beverages license by **November 30<sup>th</sup>** of each year.

All retail license renewal applications must be signed by an authorized corporate officer, individual or partner and filed with the Local Licensing Authority between November 1st and November 30th. Licensees who are in the process of transferring their licenses are required to file the renewal application until the transfer has occurred and they are no longer the licensee of record.

Licensees are responsible for correcting any differences between their files and the ABCC license file on the renewal application in red ink. An LLA Certification Form / Form 43 verifying these changes have been ABCC approved must be attached to the license renewal application in order to change the official ABCC license file. Please mail those corrections along with the renewal packet to the ABCC.

All on-premises M.G.L. c. 138, §12 licensees must provide proof of the required liquor liability insurance and a copy of the required Fire Safety Inspection Certificate to the Local Licensing Authorities. **Please do not forward** the Fire Safety Certificates, Insurance Certificates, or License Certificates to the ABCC. You should keep these forms for your records.

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Please mail the completed below form, all completed renewal certificate forms, and any corrective forms to the ABCC no later than January 17th, 2022 with no staples included.

ABCC  
c/o Licensing Department  
95 Fourth Street, Suite 3  
Chelsea, MA 02150

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**Any renewal application not signed and filed by November 30<sup>th</sup> will be treated as a New License.**

If renewal application becomes a new license for failure to meet the November 30<sup>th</sup> signing deadline, it will be subject to all the procedures set forth under Chapter 138, §15A.

**ANY QUESTIONS REGARDING THE ABOVE GUIDELINES SHOULD BE DIRECTED TO HURSHEL LANGHAM AT EXT. 719 or SABRINA LUC AT EXT. 721**

*Ralph Sacramone, Executive Director*

**RENEWAL CERTIFICATION 2022**

CITY/TOWN:

**A. LICENSEES WHO FAILED TO RENEW FOR 2022:**

LICENSE #:	LICENSEE CORPORATE NAME AND ADDRESS:
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

**B. LICENSEES DISAPPROVED BY THE CITY/TOWN FOR 2022:**

LICENSE #:	LICENSEE CORPORATE NAME AND ADDRESS:
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

We hereby certify that the premises described in the 2022 renewal applications for the above mentioned municipality are now occupied, used or controlled by the licensee and will be on January 1, 2022. The 2021 Renewal Applications have been approved by the Local Licensing Authorities and forwarded to the ABCC.

**The Local Licensing Authorities**

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

COMMONWEALTH OF MASSACHUSETTS  
ALCOHOLIC BEVERAGES CONTROL  
COMMISSION

95 Fourth Street, Suite 3, Chelsea, MA 02150

**2022 Seasonal Population Increase Estimation Form**

City / Town:

HOPEDALE

Date:

DECEMBER 13, 2021

Alcoholic Beverages Control Commission  
c/o Licensing Department  
95 Fourth Street, Suite 3  
Chelsea, MA 02150

To Whom It May Concern:

Acting under authority contained in M.G.L. Ch. 138, s17, as amended, our Board at a meeting held on

DECEMBER 13, 2021

Date of Meeting

, estimated that the temporary increased resident population

of

HOPEDALE

City / Town Name

, as of July 10, 2022 will be

4747

Estimated Population

This estimate was made and voted upon by us at a meeting called for the purpose, after due notice to each of the members of the time, place and purpose of said meeting, and after investigation and ascertainment by us of all the facts and after cooperative discussion and deliberation. The estimate is true to the best of our knowledge and belief.

The above statements are made under the pains and penalties of perjury.

Very truly yours,  
Local Licensing Authorities
