

HEARINGS, MEETINGS, LICENSES
3-14-11

March 10, 2011

Board of Selectmen:

There is nothing in the CORI background records to cause concern in appointing the proposed manager Wayne E. Packard.

Jackie Shanley, Secretary



JOHN F. GLASS JR. VFW POST 2188

30 STATION ST,
MIDDLEBOROUGH MA, 02346

12/22/2010

To whom it may concern:

We the elected officers & directors have unanimously elected Wayne E. Packard as bar manager for the John F. Glass Jr. VFW Post 2188.

Respectfully Clerk Eric Goodnow

A handwritten signature in cursive script, appearing to read "Eric Goodnow".

The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street
Boston, MA 02114
www.mass.gov/abcc

Manager Application

All proposed managers are required to complete a Personal Information Form, and attach a copy of the corporate vote authorizing this action and appointing a manager.

1. Licensee Information:

Legal Name of Licensee: Business Name (d/b/a)

Address:

City/Town State Zip Code

ABCC License Number: (If existing licensee) Phone Number of Premise

2. Manager Information:

Name: Cell Phone Number:

Are you a U.S. Citizen: Yes No Court and Date of Naturalization:

(Submit proof of citizenship and/or naturalization such as Voter's Certificate, Birth Certificate or Naturalization Papers)

List the number of hours per week you will spend on the licensed premises:

Have you ever been charged or convicted of a state, federal or military crime? Yes No

If yes, attach an affidavit as to all charges and disposition.

Do you now, or have you ever, held any direct or indirect, beneficial or financial interest in a license to sell alcoholic beverages? Yes No

If yes, please describe:

Have you ever been the Manager of Record of a license to sell alcoholic beverages that has been suspended, revoked or cancelled? Yes No

If yes, please describe:

If additional space is needed, please use the last page

Please list your employment for the past ten years (Dates, Position, Employer, Address and Telephone):

If additional space is needed, please use the last page

I hereby swear under the pains and penalties of perjury that the information I have provided in this application is true and accurate:

Signature

Date



Town of Middleborough
Massachusetts

BOARD OF SELECTMEN

APPLICATION FOR LICENSE
(PLEASE TYPE OR PRINT CLEARLY)

DATE 12/9/2010
NAME OF APPLICANT Wayne E Packard
ADDRESS OF APPLICANT 301 Crystal Way
ASSESSORS MAP & LOT CRystal Way
DAYTIME TELEPHONE 508 947 0373

NAME OF BUSINESS John F Glass JR Post # 2188 UFW
OWNER OF PROPERTY TO BE LICENSED John F Glass JR Post # 2188 UFW
ADDRESS OF PROPERTY TO BE LICENSED Po Box 289 / 30 Station St Middleboro
ASSESSORS MAP & LOT 50N 5974 MA 012346

TYPE OF LICENSE REQUESTED (Check One)

- 2nd Hand Furniture _____
- Class I License _____
- Class III License _____
- Common Victualer _____
- Entertainment _____
- 2nd Hand Clothing _____
- Class II License _____
- Liquor License
- Automatic Amusement _____
- Other _____

Anticipated Start Date for Business _____
Hours requested: _____

Has the Applicant previously held a similar license in the Town of Middleborough or elsewhere?
If yes, explain:

Signature Wayne E Packard

DATE OF HEARING 1.31.11

APPROVED/DENIED

Do not write below line: To be Completed by Treasurer/Collector:

Please inform this department, as well as the Board of Selectmen, as to whether or not the above listed property owner/applicant/petitioner owes the Town of Middleborough any outstanding taxes and/or municipal charges that remain unpaid for more than one year.

Does Property Owner/Applicant/Petitioner owe Taxes/Municipal Charges? NO

John D. Smith, Jr.