



# MEETING NOTICE POSTING & AGENDA

TOWN CLERK'S STAMP

## TOWN OF HULL

Pursuant to MGL Chapter 30A, § 18-25 all Meeting Notices must be filed and time stamped in the Town Clerk's Office and posted at least **48 hours prior to the meeting** (excluding Saturdays, Sundays and Holidays). Please be mindful of the Town Clerk's business hours of operation and make the necessary arrangements to ensure this Notice is received and stamped in by the Town Clerk's Office and posted by at least **30 minutes** prior to the close of business on the day of filing.

<b>Board or Committee</b>	<b>Select Board</b>
<b>Date &amp; Time of Meeting</b>	<b>Wednesday, December 13<sup>th</sup>, 2023 at 7:00 pm</b>
<b>Meeting Location</b>	<b>Hull Town Hall, 253 Atlantic Ave</b>
<b>Requested By:</b>	<b>Jennifer Constable, Town Manager</b>

## AGENDA

## APPROVALS

- Housing Feasibility Study Working Group Representative –Appointment of Select Board Representative**
- Annual Town Meeting 2024 Warrant Opening and Closing**
- Vote to Close the Tax Rate Classification Hearing for FY24**
- Lori West, Select Board Office Manager Re: The following alcohol establishments have requested a New Year's extension until 2:00 a.m.:**
  - **The Parrot**
  - **Nantasket Beach Saltwater Club**
  - **Daddy's Dry Rock**
  - **Sandbar**
  - **Schooners**
  - **Jo's Nautical**
  - **California Underground**
  - **C Note**

## ANNUAL ALCOHOL

- Arc Lux, Inc. dba Mambos, 269 Nantasket Ave, Anthony Ghosn, Mgr. Re: (A) All Alcohol; (B) Common Victualer (C) Entertainment (RENEWAL).**

The listings of items are those reasonably anticipated by the Chair which may be discussed. Not all items listed may in fact be discussed and other items not listed may also be discussed to the extent permitted by law

## **APPROVALS (Cont'd)**

2. **Beachfood Inc., dba Mezzo Mare, 245 Nantasket Ave, Joseph Agostino, Owner Re: (A) All Alcohol; (B) Common Victualer; (RENEWAL).**
3. **Nantasket NHG LLC dba Nantasket Beach Resort, 45 Hull Shore Drive Zeandre Hines, Mgr. Re: (A) All Alcohol as an Innholder; (B) Common Victualer; (C) Entertainment (RENEWAL).**
4. **Shoreline Hospitality LLC, dba Shoreline Kitchen And Bar, 43 Hull Shore Drive, Janet Campbell, Mgr. Re: (A) All Alcohol; (B) Common Victualer; (C) Entertainment (RENEWAL).**
5. **Jessekat LLC dba Toast, 121 Nantasket Avenue, Jessica Travis. Mgr. Re: (A) Wine and Malt as Restaurant; (B) Common Victualer (RENEWAL).**
6. **Houlihan's Seaside dba The Parrot, John Brian Houlihan, Mgr., 1 Hull Shore Drive Re:(A) All Alcohol; (B) Common Victualer; (C) Entertainment (RENEWAL).**
7. **145NA, Inc. dba Nantasket Flatts, 145 Nantasket Ave, Richard Vaughan, Mgr. Re: (A) All Alcohol; (B) Common Victualer; (C) Entertainment; (D) Automatic Amusement (pool table) (RENEWAL).**

## **PACKAGE STORE**

1. **Lighthouse Enterprises, Inc. dba A Street Liquors, 670 Nantasket Ave., Taylor Tibbetts, Mgr. Re: All Alcohol as a Package Store (RENEWAL).**

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## **COMMON VICTUALER**

1. **Gateway, LLC dba Dunkin', 1 B Bay St. , Ricardo Abrantes, Mgr. Re: Common Victualer License (RENEWAL).**
2. **Dylan's Pizza, inc. dba Dylan's Pizza, 14 Nantasket Ave, Raul Yubi, Mgr. Re: Common Victualer License (RENEWAL).**
3. **Mai and Mai, Inc. dba Hull Jade Restaurant, 516 Nantasket Ave, Mo Kang Mai, Mgr. Re: Common Victualer License (RENEWAL).**
4. **L St Pizza Company, Inc. dba L St Pizza, 754 Nantasket Ave, Maroun Habchy, Mgr. Re: Common Victualer License (RENEWAL).**
5. **Nantasket Beach Café dba Saltwater Diner, 512 Nantasket Ave., Richard Bornstein, Mgr. Re: Common Victualer (RENEWAL).**
6. **Paula Coffman and Rafca Cardoos dba To Dine For, 518 Nantasket Ave, Paula Coffman, Mgr. Re: Common Victualer License (RENEWAL).**

## **LIVERY SERVICE/BADGES**

1. **Bayside Coach, 71 Kenberma St, Deborah Rock and Carmen Arroyo, Owners Re: Livery Service (RENEWAL).**

## **APPROVALS (Cont'd)**

2. **Deborah Rock, 71 Kenberma St Re: Livery Badge for Bayside Coach (RENEWAL).**
3. **Carmen Arroyo, 71 Kenberma St Re: Livery Badge for Bayside Coach (RENEWAL).**
4. **Seaport Livery Service, 58 Lynn Ave, Richard E. Laws, Owner Re: Livery License for 3 Vehicles (2015 Chevrolet Suburban, 2022 Kia Carnival, and 2023 Kia Sportage) and Livery Badge (RENEWAL).**

## **LODGING HOUSE**

1. **Impenetrable Hull LLC, dba The Nantascot Lodging House, 475 Nantasket Ave, Dan Botwinik, Mgr. Re: (A) Lodging House License (RENEWAL).**

## **DISCUSSION**

1. **Town Bench Donation Policy**
2. **Town Buildings Use Policy: Community Meeting Space**
3. **Review Roles & Responsibilities/Select Board Policies**

## **TOWN MANAGER UPDATES**

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Approval # 2

## **FY25 TOWN MEETING & ELECTION SCHEDULE**

<b>DATE</b>	<b>DAY</b>	<b>TASK</b>
<b>1/5/24</b>	<b>Friday</b>	<b>Advertise Warrant closing</b>
<b>2/8/24</b>	<b>Thursday</b>	<b>Warrant closes 3:00 p.m.</b>
<b>3/27/24</b>	<b>Wednesday</b>	<b>Select Board sign Town Meeting Warrant</b>
<b>04/05/24</b>	<b>Friday</b>	<b>Deadline for posting Town Meeting Warrant</b>
<b>5/6/24</b>	<b>Monday</b>	<b>Town Meeting</b>
<b>5/20/24</b>	<b>Monday</b>	<b>Town Election</b>

**TOWN OF HULL MEMORANDUM**

**DATE:** December 13, 2023  
**TO:** Select Board  
**FROM:** Lori West, Office Manager  
**SUBJECT:** New Years Eve Closing

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The following liquor establishments have requested to remain open until 2:00 a.m. on January 1, 2024.

* California Underground	257 Nantasket Avenue
* The CNote	159 Nantasket Avenue
* Daddy's Dry Dock	280 Nantasket Avenue
* Jo's Nautical	125 Main Street
* Nantasket Beach Salt Water Club	3 Fitzpatrick Way
* The Parrot	1 Hull Shore Drive
* Sandbar	297 Nantasket Avenue
* Schooners	157 Nantasket Avenue



**TOWN OF HULL**  
**ALCOHOL LICENSE INFORMATION FORM**



NEW ☐ RENEWAL ☒ TRANSFER ☐  
AMENDMENT ☐ ☐ CHANGE OF MANAGER (COM)  
☐ CHANGE OF HOURS (COH)  
☐ OTHER \_\_\_\_\_  
ONE DAY ☐ Date: \_\_\_\_\_

Full Legal Name of Business: Acc lux inc.  
Business Name (dba) if different: Mambos Kitchen and Bar  
FID of Licensee: \_\_\_\_\_ Address of Premises: 269 Nantasket ave.  
Phone Number of Premises: 781 474 0000 Business Email: Mamboshull@gmail.com  
Business Mailing Address: ☒ Same as above \_\_\_\_\_  
Owner of Business: Anthony Ghosn  
Manager of Record: Anthony Ghosn  
Residential Address : \_\_\_\_\_

\*Proposed Manager (must file COM with ABCC): \_\_\_\_\_  
Phone: \_\_\_\_\_ Residential Address : \_\_\_\_\_

Applicant's (authorized) Signature [Signature] Date: 11/01/23  
By signing above you are verifying the accuracy of all information

License Class: ☒ Annual ☐ Seasonal ☐ One Day (1 + 1 Day[s]) Nature of Event: \_\_\_\_\_  
\*\*\* PROVIDE HRS BELOW \*\*\*  
TYPE OF LICENSE: (CHECK ONLY ONE) Location of Event: \_\_\_\_\_  
☐ Club ☐ Package Store ☐ Veteran's Club ☐ General On Premise ☒ Restaurant  
☐ Innholder ☐ Tavern ☐ Other (Specify) \_\_\_\_\_  
LICENSE CATEGORY:  
☒ All Alcohol ☐ Wine & Malt ☐ Malt Only ☐ Wine Only ☐ Wine & Malt with Cordials  
☐ Other (please specify) \_\_\_\_\_

**HOURS OF OPERATION - PLEASE READ CAREFULLY**

☒ NO CHANGES TO HOURS OF OPERATION FROM LAST YEAR: See Attached  
☐ REQUESTING CHANGE OF HOURS (complete ONLY if amending hours of operation from previous license period)  
☐ SEE ATTACHED HOURS (CHANGE OF HOURS)  
REQUESTING TO OPEN:

Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

REQUESTING TO CLOSE:

Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

Seating Capacity: (if applicable) 49 Indoor 50 Outdoor 99 Total  
Occupancy Number: 99  
Entertainment License: ☒ Yes ☐ No

Request for New Year's Eve  
Extension?

☐ YES ☒ NO

Hull Lic. No: A2023-20

# LICENSE

ABCC-03970-RS-0554

## ALCOHOLIC BEVERAGES

### THE LICENSING BOARD OF

The TOWN of HULL, MASSACHUSETTS

HEREBY GRANTS A

## COMMON VICTUALER

License to Expose, Keep for Sale, and to Sell

## ALL KINDS OF ALCOHOLIC BEVERAGES

## TO BE DRUNK ON PREMISES

To: Arc Lux, Inc, dba Mambos, Anthony Ghosn, Manager  
269 Nantasket Ave Hull

On the following described premises: One Building containing 2495 sq. ft., 1<sup>st</sup> flr  
consisting of a (approx. 655 sq.ft.) dining area with tables and (approx. 640 sq. ft.) kitchen.  
3 entrances, 3 exits.

This license is granted and accepted upon the express condition that the licensee  
shall, in all respects, conform to all the provisions of the Liquor Control Act, Chapter 138  
of the General Laws, as amended, and any rules or regulations made thereunder by the  
licensing authorities. The license expires December 31, 2023 unless earlier suspended,  
cancelled or revoked.

IN TESTIMONY WHEREOF, the undersigned have hereunto affixed their  
official signatures this First day of January, 2023.

The Hours during which  
Alcoholic Beverages may be sold are:  
See attached for 1<sup>st</sup> and 2<sup>nd</sup> flr Hours  
*Unless otherwise advised by Licensing Authority*

Jennifer Constable

Donna Pursel

Irwin Nesoff

Domenico Sestito

Greg Grey

Licensing  
Authorities



**ARC LUX, DBA MAMBO'S**

	ALCOHOL LICENSE - DOWNSTAIRS						
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Open	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am
Close	11:00pm	11:00pm	11:00pm	11:00pm	12:00am	1:00am	1:00am

	COMMON VICTULER- DOWNSTAIRS						
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Open	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am
Close	11:00pm	11:00pm	11:00pm	11:00pm	12:00am	1:00am	1:00am

	ENTERTAINMENT LICENSE- DOWNSTAIRS						
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Open	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am
Close	11:00pm	11:00pm	11:00pm	11:00pm	12:00am	1:00am	1:00am

ALCOHOL LICENSE - SECOND FLOOR DECK							
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Open	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am
Close	11:00pm	11:00pm	11:00pm	11:00pm	11:00pm	12:00am	12:00am

COMMON VICTULER- SECOND FLOOR DECK							
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Open	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am
Close	11:00pm	11:00pm	11:00pm	11:00pm	11:00pm	12:00am	12:00am

ENTERTAINMENT- SECOND FLOOR DECK							
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Open	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am
Close	10:00am	10:00am	10:00am	10:00am	10:00am	11:00pm	11:00pm





**TOWN OF HULL  
SELECT BOARD**  
253 Atlantic Avenue  
Tel: 781-925-2000

SELECTMEN'S OFFICE FEE:

\$50.00

**RECEIVED**

NOV - 1 2023

(Date Received)

**APPLICATION FOR COMMON VICTUALER**

NEW ☐ RENEWAL ☒ TRANSFER ☐ AMENDMENT ☐

☐ CHANGE OF MANAGER  
☐ CHANGE OF HOURS  
☐ ONE DAY  
☐ OTHER

**SECTION 1 – APPLICANTS & BUSINESS INFORMATION**

*I, the undersigned, duly authorized by the concern herein mentioned, hereby apply for a Common Victualer's License, in accordance with the provisions of Chapter 140 of the General Laws.*

Applicant's Full Legal Name: Anthony Ghosn

Applicant's Legal Home Address: \_\_\_\_\_

Applicant's Mailing Address (if different): \_\_\_\_\_

Applicant's Home Telephone Number: \_\_\_\_\_

Cell Phone: 508

Applicant's E-Mail Addresses: Primary \_\_\_\_\_

Applicant's (authorized) Signature Anthony Ghosn

Date: 11/01/23

*By signing above you are verify the accuracy of all information*

Full Legal Name of the Business: Arc lux inc. DBA Mambos

Full Street Address of the Business: \_\_\_\_\_

Mailing Address of the Business (if different): \_\_\_\_\_

Telephone Number of the Business (if different): \_\_\_\_\_

Current Owner/Manager of Record: Anthony Ghosn

E-Mail Addresses of the Business (if different): \_\_\_\_\_

FID of the License: \_\_\_\_\_

Do you own ☐ or lease ☒ the premises?

If leasing, please provide the name and address of the lessor: Dean Dorian

**SECTION 2 – LICENSE CLASS**

(Check One)

☒ Year Round Operation: (January 01-December 31) ☐ Seasonal Operation: (April 01 –November 30)

Expected date to open: \_\_\_\_\_ Expected date to close: \_\_\_\_\_

\*If you plan to open your business later than the beginning license date or plan to close earlier than the license end date please explain why: \_\_\_\_\_

**SECTION 3 - HOURS OF OPERATION**

☐ NO CHANGES

☒ SEE ATTACHED

OPEN: Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

CLOSE: Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

**\*SEE OTHER SIDE\***

**NEW APPLICANTS AND/OR AMENDMENTS TO EXISTING LICENSE (ONLY)**

## SECTION 4 – TO BE COMPLETED BY NEW APPLICANTS OR AMENDMENTS ONLY

**\*Note\*:** A PUBLIC HEARING MAY BE REQUIRED. PLEASE INDICATE WHAT CHANGES MADE BELOW:

Is your kitchen fully equipped to conduct a business \_\_\_\_\_ Size of Kitchen \_\_\_\_\_

Sink \_\_\_\_\_ Hot and Cold Water \_\_\_\_\_ Is there a Stove ☐

Gas Burners \_\_\_\_\_ Electric Burners \_\_\_\_\_ Refrigerators \_\_\_\_\_

Bar \_\_\_\_\_ Lunch Counter \_\_\_\_\_ Tables # \_\_\_\_\_ / \_\_\_\_\_ Booths # \_\_\_\_\_ / \_\_\_\_\_  
(no. of seats) (no. of seats) (no. of seats) (no. of seats)

Seating Capacity? Indoor \_\_\_\_\_ Outdoor \_\_\_\_\_ TOTAL Seating Capacity \_\_\_\_\_

Are there Restrooms for - Men ☐ Women ☐ Unisex ☐

### AMENDMENTS

☐ REQUESTING CHANGE OF HOURS

☒ <sup>UA</sup> ~~SEE ATTACHED~~

New Proposed Hours of Operation:

**OPEN:** Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

**CLOSE:** Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

Applicant's (authorized) Signature \_\_\_\_\_

*By signing above you are verify the accuracy of all information*

☐ REQUESTING CHANGE OF MANAGER

Proposed Manager \_\_\_\_\_

Home Address \_\_\_\_\_

Email Address \_\_\_\_\_ Cell Phone \_\_\_\_\_

Owner/Manager's Signature \_\_\_\_\_ Date \_\_\_\_\_

*By signing above you are verify the accuracy of all information*

MGL 140 § 4 "...licenses shall expire on December thirty-first of each year; but they may be granted during December, to take effect on January first following."

**LICENSE NUMBER**2023-30**FEE**\$50.00**THE COMMONWEALTH OF MASSACHUSETTS  
TOWN OF HULL**This is to Certify that Are Lux, Inc dba Mambos, Anthony Ghosn, Manager269 Nantasket Ave Hull

IS HEREBY GRANTED A

**COMMON VICTUALLER'S LICENSE**

In said Hull and at that place only and expires December thirty-first 20 23 unless sooner suspended or revoked for violation of the laws of the Commonwealth respecting the licensing of common victuallers. This license is issued in conformity with the authority granted to the licensing authorities by General Laws, Chapter 140, and amendments thereto.

In Testimony Whereof, the undersigned have hereunto affixed their official signatures.

Hours of Operation:  
See attached for 1<sup>st</sup> and 2<sup>nd</sup> flr

/s/ Jennifer Constable/s/ Donna Pursel/s/ Irwin Nesoff/s/ Domenico Sestito/s/ Greg Gre} Licensing  
AuthoritiesISSUED: January 01, 2023

(OVER)

**ARC LUX, DBA MAMBO'S**

	ALCOHOL LICENSE - DOWNSTAIRS						
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Open	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am
Close	11:00pm	11:00pm	11:00pm	11:00pm	12:00am	1:00am	1:00am

	COMMON VICTULER- DOWNSTAIRS						
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Open	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am
Close	11:00pm	11:00pm	11:00pm	11:00pm	12:00am	1:00am	1:00am

ENTERTAINMENT LICENSE- DOWNSTAIRS							
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Open	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am
Close	11:00pm	11:00pm	11:00pm	11:00pm	12:00am	1:00am	1:00am

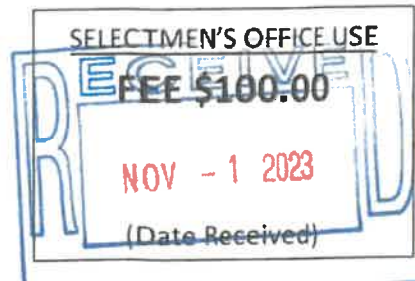
ALCOHOL LICENSE - SECOND FLOOR DECK							
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Open	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am
Close	11:00pm	11:00pm	11:00pm	11:00pm	11:00pm	12:00am	12:00am

COMMON VICTULER- SECOND FLOOR DECK							
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ENTERTAINMENT- SECOND FLOOR DECK							
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Open	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am
Close	10:00am	10:00am	10:00am	10:00am	10:00am	11:00pm	11:00pm



**TOWN OF HULL  
SELECT BOARD  
253 Atlantic Ave  
781-925-2000**



**APPLICATION FOR ENTERTAINMENT LICENSE**

NEW ☐ RENEWAL ☒ TRANSFER ☐ AMENDMENT ☐

CHANGE OF MANAGER (COM)\*  
CHANGE OF HOURS  
ONE DAY  
OTHER

**SECTION 1 – APPLICANTS & BUSINESS INFORMATION**

Applicant's Full Legal Name Anthony Ghosn  
Business's Full Legal Name Are lux inc DBA Mambo's  
Business Address 269 Nantasket ave.  
Mailing Address ☒ Same as above  
Business Telephone Number 781 474 0000 FID# \_\_\_\_\_  
Business Email Address Mamboskull@gmail.com  
Description of Premises Restaurant & Bar

Manager of Record /\*Proposed Manager\* Anthony Ghosn  
Home Address \_\_\_\_\_  
Home Telephone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Email Address \_\_\_\_\_  
Owner/Manager's Signature [Signature]  
\*If Amending Manager of Record\* By signing above you are verifying the accuracy of all information

**SECTION 2 – TYPE OF ENTERTAINMENT**

☒ No Changes to Type of Entertainment from Last Year  
Jukebox ☐ DJ ☐ Karaoke ☐ Piped in Music ☐ Amplification System ☐  
Recorded Music ☐ Live Music ☐ Vocal Music ☐ No. of Persons \_\_\_\_\_  
Instrumental Music ☐ No. of Instruments \_\_\_\_\_ Description/Type Instruments (i.e. guitar, drums,  
keyboard, etc.) \_\_\_\_\_  
Dancing by Patrons ☐ Location(s) \_\_\_\_\_ Size of dance floor(s) \_\_\_\_\_  
Floor Show ☐ Description \_\_\_\_\_ Other: \_\_\_\_\_  
Entertainment Location: Indoors ☒ Outdoors ☐ Description (provide floor plan if necessary) \_\_\_\_\_

**SECTION 3 – HOURS OF OPERATION**

☒ No Changes to Hours of Operation from Last Year  
Start Time: Mon \_\_\_\_\_ Tues \_\_\_\_\_ Wed \_\_\_\_\_ Thurs \_\_\_\_\_ Fri \_\_\_\_\_ Sat \_\_\_\_\_ Sun \_\_\_\_\_  
End Time: Mon \_\_\_\_\_ Tues \_\_\_\_\_ Wed \_\_\_\_\_ Thurs \_\_\_\_\_ Fri \_\_\_\_\_ Sat \_\_\_\_\_ Sun \_\_\_\_\_

**NOTE: SUNDAY ENTERTAINMENT HOURS, UNLESS OTHERWISE SPECIFIED BY LICENSING AUTHORITY, TO BE BEGIN  
NO EARLIER THAN 2:00 P.M.**

LICENSE NUMBER: 2023-17

FEE: \$100.00

**THE COMMONWEALTH OF MASSACHUSETTS  
TOWN OF HULL**

This is to Certify that

**Arc lux, Inc dba Mambos,  
Anthony Ghosn, Manager, 269 Nantasket Ave  
IS HEREBY GRANTED A LICENSE**

**For Entertainment as a Victualer at: 269 Nantasket Ave  
Type of Entertainment: DJ, Karoke, 3 Vocal Persons**

**This license is granted in conformity with the Statutes and ordinances relating thereto, and  
expires December 31, 2023 unless sooner suspended or revoked.**

**Hours of Operation:  
See Attached description of First and Second Floor**

/s/ Jennifer Constable

/s/ Donna Pursel

/s/ Irwin Nesoff

/s/ Domenico Sestito

/s/ Greg Gre

Licensing  
Authorities

ISSUED: January 01, 2023



**ARC LUX, DBA MAMBO'S**

	ALCOHOL LICENSE - DOWNSTAIRS						
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Open	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am
Close	11:00pm	11:00pm	11:00pm	11:00pm	12:00am	1:00am	1:00am

	COMMON VICTULER- DOWNSTAIRS						
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Open	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am
Close	11:00pm	11:00pm	11:00pm	11:00pm	12:00am	1:00am	1:00am

	ENTERTAINMENT LICENSE- DOWNSTAIRS						
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Open	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am
Close	11:00pm	11:00pm	11:00pm	11:00pm	12:00am	1:00am	1:00am

ALCOHOL LICENSE - SECOND FLOOR DECK							
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Open	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am
Close	11:00pm	11:00pm	11:00pm	11:00pm	11:00pm	12:00am	12:00am

COMMON VICTULER- SECOND FLOOR DECK							
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Open	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am
Close	11:00pm	11:00pm	11:00pm	11:00pm	11:00pm	12:00am	12:00am

ENTERTAINMENT- SECOND FLOOR DECK							
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Open	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am
Close	10:00am	10:00am	10:00am	10:00am	10:00am	11:00pm	11:00pm

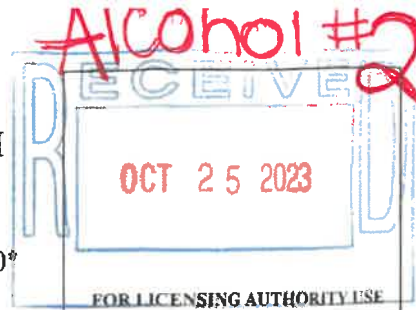




# TOWN OF HULL

## ALCOHOL LICENSE INFORMATION FORM

NEW ☐ RENEWAL ☒ TRANSFER ☐  
AMENDMENT ☐ ☐ CHANGE OF MANAGER (COM)\*  
☐ CHANGE OF HOURS (COH)  
☐ OTHER \_\_\_\_\_  
ONE DAY ☐ Date: \_\_\_\_\_



Full Legal Name of Business: BEACH FOOD DR & MEZZO MARE

Business Name (dba) if different: \_\_\_\_\_

FID of Licensee: \_\_\_\_\_ Address of Premises: 245 NANTASKET AVE

Phone Number of Premises: 781-925-4111 Business Email: \_\_\_\_\_

Business Mailing Address: ☒ Same as above \_\_\_\_\_

Owner of Business: JOSEPH AGOSTINO

Manager of Record: SAME

Phone: \_\_\_\_\_ Residential Address: \_\_\_\_\_

\*Proposed Manager (must file COM with ABCC): \_\_\_\_\_

Phone: \_\_\_\_\_ Residential Address: \_\_\_\_\_

Applicant's (authorized) Signature: [Signature] Date: 10/25/2023  
By signing above you are verifying the accuracy of all information

License Class: ☒ Annual ☐ Seasonal ☐ One Day (1 + 1 Day[s]) Nature of Event: \_\_\_\_\_  
\*\*\* PROVIDE HRS BELOW \*\*\*

TYPE OF LICENSE: (CHECK ONLY ONE) Location of Event: \_\_\_\_\_

☐ Club ☐ Package Store ☐ Veteran's Club ☐ General On Premise ☒ Restaurant  
☐ Innholder ☐ Tavern ☐ Other (Specify) \_\_\_\_\_

### LICENSE CATEGORY:

☒ All Alcohol ☐ Wine & Malt ☐ Malt Only ☐ Wine Only ☐ Wine & Malt with Cordials  
☐ Other (please specify) \_\_\_\_\_

### HOURS OF OPERATION - PLEASE READ CAREFULLY

☒ NO CHANGES TO HOURS OF OPERATION FROM LAST YEAR: See Attached  
☐ REQUESTING CHANGE OF HOURS (complete ONLY if amending hours of operation from previous license period)  
☐ SEE ATTACHED HOURS (CHANGE OF HOURS)

#### REQUESTING TO OPEN:

Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

#### REQUESTING TO CLOSE:

Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

Seating Capacity: (if applicable) \_\_\_\_\_ Indoor \_\_\_\_\_ Outdoor 90 Total

Occupancy Number: \_\_\_\_\_

Entertainment License: ☐ Yes ☐ No

Request for New Year's Eve Extension?

☐ YES ☒ NO

# LICENSE

Hull Lic. No: A2023-11

ABCC 0071-RS-0554

## ALCOHOLIC BEVERAGES

### THE LICENSING BOARD OF

The TOWN of HULL, MASSACHUSETTS  
HEREBY GRANTS A

## COMMON VICTUALLER

License to Expose, Keep for Sale, and to Sell

## ALL KINDS OF ALCOHOLIC BEVERAGES

## TO BE DRUNK ON PREMISES

To JOSEPH AGOSTINO DBA BEACH FOOD

JOESEPH AGOSTINO, MANAGER – 245 NANTASKET AVENUE

On the following described premises: Single story building containing retail space, dining room, kitchen, No cellar. Patio on side. One entrance and exit on Nantasket Ave, One rear exit on Bay St.

This license is granted and accepted upon the express condition that the licensee shall, in all respects, conform to all the provisions of the Liquor Control Act, Chapter 138 of the General Laws, as amended, and any rules or regulations made thereunder by the licensing authorities. The license expires December 31, 2023, unless earlier suspended, cancelled or revoked.

IN TESTIMONY WHEREOF, the undersigned have hereunto affixed their  
official signatures this First day of January 2023.

The Hours during which Alcoholic Beverages may be sold are:

MONDAY through SATURDAY: 8:00 AM – 1:00 AM

SUNDAYS : 10:00 AM – 1:00 AM

*Unless otherwise advised by Licensing Authority*

Jennifer Constable

Donna Pursel

Irwin Nesoff

Domenico Sestito

Greg Grey

Licensing  
Authorities



**TOWN OF HULL  
SELECT BOARD**  
253 Atlantic Avenue  
Tel: 781-925-2000



**APPLICATION FOR COMMON VICTUALER**

NEW ☐ RENEWAL ☒ TRANSFER ☐ AMENDMENT ☐

☐ CHANGE OF MANAGER  
☐ CHANGE OF HOURS  
☐ ONE DAY  
☐ OTHER \_\_\_\_\_

**SECTION 1 – APPLICANTS & BUSINESS INFORMATION**

*I, the undersigned, duly authorized by the concern herein mentioned, hereby apply for a Common Victualer's License, in accordance with the provisions of Chapter 140 of the General Laws.*

Applicant's Full Legal Name: JOSEPH AGOSTINO

Applicant's Legal Home Address: \_\_\_\_\_

Applicant's Mailing Address (if different): \_\_\_\_\_

Applicant's Home Telephone Number: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Applicant's E-Mail Addresses: Primary \_\_\_\_\_ Secondary \_\_\_\_\_

Applicant's (authorized) Signature: [Signature] Date: 10/25/2023

*By signing above you are verify the accuracy of all information*

Full Legal Name of the Business: BEACH FOOD INC DBA MEZZO MARE

Full Street Address of the Business: 245 NANTASKET AVE

Mailing Address of the Business (if different): \_\_\_\_\_

Telephone Number of the Business (if different): 781-925-4111

Current Owner/Manager of Record: \_\_\_\_\_

E-Mail Addresses of the Business (if different): \_\_\_\_\_

FID of the License: \_\_\_\_\_

Do you own ☐ or lease ☒ the premises?

If leasing, please provide the name and address of the lessor: TOWN OF HULL

**SECTION 2 – LICENSE CLASS**

(Check One)

☒ Year Round Operation: (January 01-December 31) ☐ Seasonal Operation: (April 01 –November 30)

Expected date to open: 1/1/2024 Expected date to close: 12/31/24

\*If you plan to open your business later than the beginning license date or plan to close earlier than the license end date please explain why: \_\_\_\_\_

**SECTION 3 - HOURS OF OPERATION**

☒ NO CHANGES

☐ SEE ATTACHED

OPEN: Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

CLOSE: Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

**\*SEE OTHER SIDE\***

**NEW APPLICANTS AND/OR AMENDMENTS TO EXISTING LICENSE (ONLY)**

## SECTION 4 – TO BE COMPLETED BY NEW APPLICANTS OR AMENDMENTS ONLY

**\*Note\***: A PUBLIC HEARING MAY BE REQUIRED. PLEASE INDICATE WHAT CHANGES MADE BELOW:

Is your kitchen fully equipped to conduct a business \_\_\_\_\_ Size of Kitchen \_\_\_\_\_

Sink \_\_\_\_\_ Hot and Cold Water \_\_\_\_\_ Is there a Stove ☐

Gas Burners \_\_\_\_\_ Electric Burners \_\_\_\_\_ Refrigerators \_\_\_\_\_

Bar \_\_\_\_\_ Lunch Counter \_\_\_\_\_ Tables # \_\_\_\_ / \_\_\_\_ Booths # \_\_\_\_ / \_\_\_\_  
(no. of seats) (no. of seats) (no. of seats) (no. of seats)

Seating Capacity? Indoor \_\_\_\_\_ Outdoor \_\_\_\_\_ TOTAL Seating Capacity \_\_\_\_\_

Are there Restrooms for - Men ☐ Women ☐ Unisex ☐

### AMENDMENTS

☐ REQUESTING CHANGE OF HOURS

☐ SEE ATTACHED

New Proposed Hours of Operation:

OPEN: Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

CLOSE: Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

Applicant's (authorized) Signature \_\_\_\_\_  
*By signing above you are verify the accuracy of all information*

☐ REQUESTING CHANGE OF MANAGER

Proposed Manager \_\_\_\_\_

Home Address \_\_\_\_\_

Email Address \_\_\_\_\_ Cell Phone \_\_\_\_\_

Owner/Manager's Signature \_\_\_\_\_ Date \_\_\_\_\_

*By signing above you are verify the accuracy of all information*

MGL 140 § 4 "...licenses shall expire on December thirty-first of each year; but they may be granted during December, to take effect on January first following."

**LICENSE NUMBER: 2023-11**

**FEE \$50.00**

**THE COMMONWEALTH OF MASSACHUSETTS  
TOWN OF HULL  
This is to Certify that**

**To JOSEPH AGOSTINO DBA BEACH FOOD  
JOESEPH AGOSTINO, MANAGER – 245 NANTASKET AVENUE**

**IS HEREBY GRANTED A**

**COMMON VICTUALLER'S LICENSE**

In said Hull and at that place only and expires December thirty-first 20 23 unless sooner suspended or revoked for violation of the laws of the Commonwealth respecting the licensing of common victuallers. This license is issued in conformity with the authority granted to the licensing authorities by General Laws, Chapter 140, and amendments thereto.

In Testimony Whereof, the undersigned have hereunto affixed their official signatures.

**Hours of Operation:**

**Monday through Saturday: 8:00 AM – 1: 00 AM**

**Sunday: 10:00 AM – 1: 00 AM**

/s/ Jennifer Constable

/s/ Donna Pursel

/s/ Irwin Nesoff

/s/ Domenico Sestito

/s/ Greg Grey

} Licensing  
Authorities

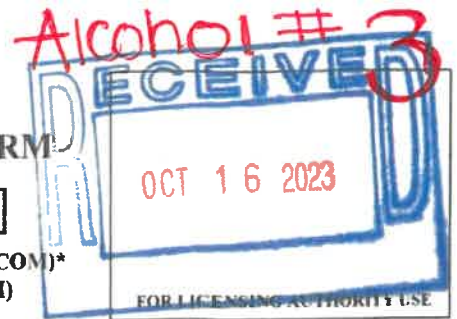
**ISSUED: January 1, 2023**

**(OVER)**





TOWN OF HULL  
ALCOHOL LICENSE INFORMATION FORM



NEW ☐ RENEWAL ☒ TRANSFER ☐  
AMENDMENT ☐ ☐ CHANGE OF MANAGER (COM)\*  
☐ CHANGE OF HOURS (COH)  
☐ OTHER  
ONE DAY ☐ Date: \_\_\_\_\_

Full Legal Name of Business: Nantasket NHG LLC  
Business Name (dba) if different: Nantasket Beach Resort  
FID of Licensee: \_\_\_\_\_ Address of Premises: 45 Hull Shore Dr Hull MA 02045  
Phone Number of Premises: 781-925-4500 Business Email: zhines@nansport-hotel-group.com  
Business Mailing Address: ☐ Same as above \_\_\_\_\_  
Owner of Business: Nantasket NHG LLC  
Manager of Record: Leandre Hines, General Manager

\*Proposed Manager (must file COM with ABCC): \_\_\_\_\_

Applicant's (authorized) Signature

[Signature] Date: 10/14/23  
By signing above you are verifying the accuracy of all information

License Class: ☒ Annual ☐ Seasonal ☐ One Day (1 + 1 Day[s]) Nature of Event: \_\_\_\_\_  
\*\*\* PROVIDE HRS BELOW

TYPE OF LICENSE: (CHECK ONLY ONE)

☐ Club ☐ Package Store ☐ Veteran's Club ☒ General On Premise ☐ Restaurant  
☐ Innholder ☐ Tavern ☐ Other (Specify) \_\_\_\_\_

LICENSE CATEGORY:

☒ All Alcohol ☐ Wine & Malt ☐ Malt Only ☐ Wine Only ☐ Wine & Malt with Cordials  
☐ Other (please specify) \_\_\_\_\_

**HOURS OF OPERATION - PLEASE READ CAREFULLY**

☒ NO CHANGES TO HOURS OF OPERATION FROM LAST YEAR: See Attached

☐ REQUESTING CHANGE OF HOURS (complete ONLY if amending hours of operation from previous license period)  
☐ SEE ATTACHED HOURS (CHANGE OF HOURS)

REQUESTING TO OPEN:

Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

REQUESTING TO CLOSE:

Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

Seating Capacity: (if applicable) \_\_\_\_\_ Indoor \_\_\_\_\_ Outdoor \_\_\_\_\_ Total

Occupancy Number: 107

Entertainment License: ☒ Yes ☐ No

Request for New Year's Eve  
Extension?

☐ YES ☒ NO

Hull Lic. No: A2023-3

ABCC 0067-HT-0554

# LICENSE

## ALCOHOLIC BEVERAGES

### THE LICENSING BOARD OF

The TOWN of HULL, MASSACHUSETTS  
HEREBY GRANTS A

## INN HOLDER

License to Expose, Keep for Sale, and to Sell

**ALL KINDS OF ALCOHOLIC BEVERAGES**

**TO BE DRUNK ON PREMISES**

To NANTASKET NHG LLC, DBA NANTASKET BEACH RESORT  
ZEANDRE HINES, MANAGER – 45 HULL SHORE DRIVE

On the following described premises: SEE ATTACHED

This license is granted and accepted upon the express condition that the licensee shall, in all respects, conform to all the provisions of the Liquor Control Act, Chapter 138 of the General Laws, as amended, and any rules or regulations made thereunder by the licensing authorities. The license expires December 31, 2023, unless earlier suspended, cancelled or revoked.

IN TESTIMONY WHEREOF, the undersigned have hereunto affixed their official signatures this 1st day of January 2023.

The Hours during which

Alcoholic Beverages may be sold are:

OPEN: 8:00 AM – 1:00 AM MON-SAT

10:00 AM – 1:00 AM SUNDAYS

*Unless otherwise advised by Licensing Authority*

Jennifer Constable

Donna Pursel

Irwin Nesoff

Domenico Sestito

Greg Grey

Licensing  
Authorities





**TOWN OF HULL  
SELECT BOARD**  
253 Atlantic Avenue  
Tel: 781-925-2000

SELECTION MEN'S OFFICE FEE:

\$50.00

**RECEIVED**

OCT 16 2023

(Date Received)

**APPLICATION FOR COMMON VICTUALER**

NEW ☐ RENEWAL ☒ TRANSFER ☐ AMENDMENT ☐

☐ CHANGE OF MANAGER  
☐ CHANGE OF HOURS  
☐ ONE DAY  
☐ OTHER \_\_\_\_\_

**SECTION 1 – APPLICANTS & BUSINESS INFORMATION**

I, the undersigned, duly authorized by the concern herein mentioned, hereby apply for a Common Victualer's License, in accordance with the provisions of Chapter 140 of the General Laws.

Applicant's Full Legal Name: Leandre Hines, General Manager

Applicant's Legal Home Address: \_\_\_\_\_

Applicant's Mailing Address (if different): \_\_\_\_\_

Applicant's Home Telephone Number: NA Cell Phone: \_\_\_\_\_

Applicant's E-Mail Addresses: Primary: \_\_\_\_\_ Secondary: \_\_\_\_\_

Applicant's (authorized) Signature: [Signature] Date: 10/14/23

By signing above you are verify the accuracy of all information

Full Legal Name of the Business: Nantasket NHG LLC

Full Street Address of the Business: 45 Hull Shore Dr Hull, MA 01945

Mailing Address of the Business (if different): \_\_\_\_\_

Telephone Number of the Business (if different): 781-925-4500

Current Owner/Manager of Record: Leandre Hines

E-Mail Addresses of the Business (if different): \_\_\_\_\_

FID of the License: \_\_\_\_\_

Do you own ☒ or lease ☐ the premises?

If leasing, please provide the name and address of the lessor: \_\_\_\_\_

**SECTION 2 – LICENSE CLASS**

(Check One)

☒ Year Round Operation: (January 01-December 31)

☐ Seasonal Operation: (April 01 –November 30)

Expected date to open: \_\_\_\_\_ Expected date to close: \_\_\_\_\_

\*If you plan to open your business later than the beginning license date or plan to close earlier than the license end date please explain why: \_\_\_\_\_

**SECTION 3 - HOURS OF OPERATION**

☒ NO CHANGES

☐ SEE ATTACHED

OPEN: Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

CLOSE: Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

**\*SEE OTHER SIDE\***

**NEW APPLICANTS AND/OR AMENDMENTS TO EXISTING LICENSE (ONLY)**

## SECTION 4 – TO BE COMPLETED BY NEW APPLICANTS OR AMENDMENTS ONLY

**\*Note\***: A PUBLIC HEARING MAY BE REQUIRED. PLEASE INDICATE WHAT CHANGES MADE BELOW:

Is your kitchen fully equipped to conduct a business \_\_\_\_\_ Size of Kitchen \_\_\_\_\_

Sink \_\_\_\_\_ Hot and Cold Water \_\_\_\_\_ Is there a Stove ☐

Gas Burners \_\_\_\_\_ Electric Burners \_\_\_\_\_ Refrigerators \_\_\_\_\_

Bar \_\_\_\_\_ Lunch Counter \_\_\_\_\_ Tables # \_\_\_\_ / \_\_\_\_ Booths # \_\_\_\_ / \_\_\_\_  
(no. of seats) (no. of seats) (no. of seats) (no. of seats)

Seating Capacity? Indoor \_\_\_\_\_ Outdoor \_\_\_\_\_ TOTAL Seating Capacity \_\_\_\_\_

Are there Restrooms for - Men ☐ Women ☐ Unisex ☐

### AMENDMENTS

☐ REQUESTING CHANGE OF HOURS

☐ SEE ATTACHED

New Proposed Hours of Operation:

OPEN: Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

CLOSE: Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

Applicant's (authorized) Signature \_\_\_\_\_  
*By signing above you are verify the accuracy of all information*

☐ REQUESTING CHANGE OF MANAGER

Proposed Manager \_\_\_\_\_

Home Address \_\_\_\_\_

Email Address \_\_\_\_\_ Cell Phone \_\_\_\_\_

Owner/Manager's Signature \_\_\_\_\_ Date \_\_\_\_\_  
*By signing above you are verify the accuracy of all information*

MGL 140 § 4 "...licenses shall expire on December thirty-first of each year; but they may be granted during December, to take effect on January first following."

LICENSE NUMBER 2023-3

FEE \$50.00

THE COMMONWEALTH OF MASSACHUSETTS  
TOWN OF HULL

This is to Certify that Nantasket NHG LLC, dba Nantasket Beach Resort, Zeandre Hines, Mgr.

45 Hull Shore Drive

IS HEREBY GRANTED A

**COMMON VICTUALLER'S LICENSE**

In said Hull that place only and expires December thirty-first 20 23 unless sooner suspended or revoked for violation of the laws of the Commonwealth respecting the licensing of common victuallers. This license is issued in conformity with the authority granted to the licensing authorities by General Laws, Chapter 140, and amendments thereto.

In Testimony Whereof, the undersigned have hereunto affixed their official signatures.

**Hours of Operation:**

**8:00 AM – 1: 00 AM MON-SAT**

**10:00 AM – 1: 00 AM SUNDAYS**

/s/ Jennifer Constable

/s/ Donna Pursel

/s/ Irwin Nesoff

/s/ Domenico Sestito

/s/ Greg Gre

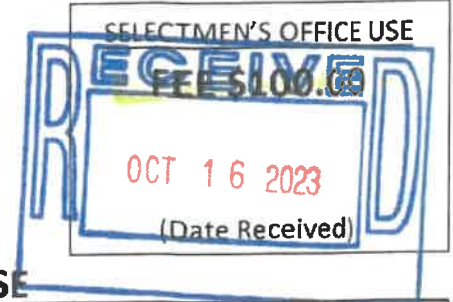
} Licensing  
Authorities

ISSUED: January 01, 2023

(OVER)



TOWN OF HULL  
SELECT BOARD  
253 Atlantic Ave  
781-925-2000



## APPLICATION FOR ENTERTAINMENT LICENSE

NEW ☐ RENEWAL ☒ TRANSFER ☐ AMENDMENT ☐

CHANGE OF MANAGER (COM)\*  
CHANGE OF HOURS  
ONE DAY  
OTHER

### SECTION 1 – APPLICANTS & BUSINESS INFORMATION

Applicant's Full Legal Name Nantasket NHG LLC  
Business's Full Legal Name NANTASKET NHG LLC  
Business Address 45 Hull Shore Dr Hull MA 02045  
Mailing Address ☐ Same as above  
Business Telephone Number 781-925-4500 FID# \_\_\_\_\_  
Business Email Address \_\_\_\_\_  
Description of Premises hospitality  
Manager of Record/\*Proposed Manager\* Leandre Hines

Owner/Manager's Signature \_\_\_\_\_

\*If Amending Manager of Record\*

*By signing above you are verifying the accuracy of all information*

### SECTION 2 – TYPE OF ENTERTAINMENT

☒ No Changes to Type of Entertainment from Last Year

Jukebox ☐ DJ ☐ Karaoke ☐ Piped in Music ☐ Amplification System ☐  
Recorded Music ☐ Live Music ☐ Vocal Music ☐ No. of Persons \_\_\_\_\_  
Instrumental Music ☐ No. of Instruments \_\_\_\_\_ Description/Type Instruments (i.e. guitar, drums,  
keyboard, etc.) \_\_\_\_\_  
Dancing by Patrons ☐ Location(s) \_\_\_\_\_ Size of dance floor(s) \_\_\_\_\_  
Floor Show ☐ Description \_\_\_\_\_ Other: \_\_\_\_\_

Entertainment Location: Indoors ☐ Outdoors ☐ Description (provide floor plan if necessary) \_\_\_\_\_

### SECTION 3 – HOURS OF OPERATION

☒ No Changes to Hours of Operation from Last Year

Start Time: Mon \_\_\_\_\_ Tues \_\_\_\_\_ Wed \_\_\_\_\_ Thurs \_\_\_\_\_ Fri \_\_\_\_\_ Sat \_\_\_\_\_ Sun \_\_\_\_\_  
End Time: Mon \_\_\_\_\_ Tues \_\_\_\_\_ Wed \_\_\_\_\_ Thurs \_\_\_\_\_ Fri \_\_\_\_\_ Sat \_\_\_\_\_ Sun \_\_\_\_\_

NOTE: SUNDAY ENTERTAINMENT HOURS, UNLESS OTHERWISE SPECIFIED BY LICENSING AUTHORITY, TO BE BEGIN  
NO EARLIER THAN 2:00 P.M.

**LICENSE NUMBER: 2023-3**

**FEE: \$100.00**

**THE COMMONWEALTH OF MASSACHUSETTS  
TOWN OF HULL**

**This is to Certify that**

**NANTASKET NHG LLC, DBA NANTASKET BEACH RESORT  
ZEANDRE HINES, MANAGER – 45 HULL SHORE DRIVE**

**IS HEREBY GRANTED A LICENSE**

**For Entertainment as a Inn Holder at: 45 Hull Shore Drive  
Type of Entertainment: DJ & Live  
Hours: Monday through Sunday 11:00 a.m. to 1:00 a.m.**

**This license is granted in conformity with the Statutes and ordinances relating thereto, and  
expires December 31, 2023 unless sooner suspended or revoked.**

**ISSUED: January 01, 2023**

/s/ Jennifer Constable

/s/ Donna Pursel

/s/ Irwin Nesoff

/s/ Domenico Sestito

/s/ Greg Grey

} **Licensing  
Authorities**

## Additional Space

Please note which question you are using this space for.

### 7. Description of Premises

The premises consists of two structures, one of which is three stories (the main building) and the other is a four story structure (secondary building). The main building is a three story structure that consists of a hotel lobby, a 6,000sf restaurant facility, a gym, a secured pool area and a gift shop. The restaurant has an exterior deck located on the easterly side of the premises, a breakfast/lunch/dinner dining area, a bar area, and a kitchen facility with a storage area. The second and third floor of this structure consists of twenty-five hotel rooms on each floor. Exits to the second and third floor of the main building are provided by an elevator to the hotel lobby and two stairways. The westerly stairway exiting to the hotel lobby and the easterly stairway exiting to the a corridor located between the hotel lobby and the restaurant premises. The primary entrance/exit is located on the northerly side of the building. There are two exits from the restaurant premises which is located on the easterly side of the building and four exits located on the southerly side of the hotel building (one of which leads to the exterior grounds and three leading from the interior of the hotel to the swimming pool area and than to the exterior of the building). A single exit is located on the westerly side of the building.

The secondary building consists of a ballroom, two offices, and a kitchen facility on the first floor level of the building. The second floor of this structure has one ballroom that has a bar area, a kitchen facility, and seven hotel rooms. The third and fourth floors of this secondary structure consists of twenty-five hotel rooms on each floor. The primary entrance/exit of the building is located on the northern side of the building. There is an elevator that provides access to every floor of the structure. There is a winding staircase that connects the second floor to the first floor and exits through the lobby. There are two staircases in the structure that provide additional means of egress. One staircase exits into the lobby and the other staircase exits to the southerly side of the structure.



Alcohol #4

TOWN OF HULL

ALCOHOL LICENSE INFORMATION FORM

NEW ☐ RENEWAL ☒ TRANSFER ☐

AMENDMENT ☐ ☐ CHANGE OF MANAGER (COM)  
☐ CHANGE OF HOURS (COH)  
☐ OTHER

ONE DAY ☐ Date: \_\_\_\_\_



Full Legal Name of Business: Shoreline Kitchen + Bar Shoreline Hospitality LLC

Business Name (dba) if different: Shoreline Kitchen + Bar

FID of Licensee: \_\_\_\_\_ Address of Premises: 43 Hull Shore Drive

Phone Number of Premises: 781 214 9470 Business Email: Campco@comcast.net

Business Mailing Address: ☒ Same as above

Owner of Business: Janet and Joe Campbell

Manager of Record: Janet Campbell

\*Proposed Manager (must file COM with ABCC): \_\_\_\_\_

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

Residential Address: \_\_\_\_\_

Applicant's (authorized) Signature: Janet Campbell Date: 11/9/2023

By signing above you are verifying the accuracy of all information

License Class: ☒ Annual ☐ Seasonal ☐ One Day (1 + 1 Day[s]) Nature of Event: \_\_\_\_\_

TYPE OF LICENSE: (CHECK ONLY ONE)

☐ Club ☐ Package Store ☐ Veteran's Club ☐ General On Premise ☒ Restaurant  
☐ Innholder ☐ Tavern ☐ Other (Specify) \_\_\_\_\_

LICENSE CATEGORY:

☒ All Alcohol ☐ Wine & Malt ☐ Malt Only ☐ Wine Only ☐ Wine & Malt with Cordials

☐ Other (please specify) \_\_\_\_\_

HOURS OF OPERATION - PLEASE READ CAREFULLY

☒ NO CHANGES TO HOURS OF OPERATION FROM LAST YEAR: See Attached

☐ REQUESTING CHANGE OF HOURS (complete ONLY if amending hours of operation from previous license period)

☐ SEE ATTACHED HOURS (CHANGE OF HOURS)

REQUESTING TO OPEN:

Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

REQUESTING TO CLOSE:

Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

Seating Capacity: (if applicable) 120 Indoor 60 Outdoor 180 Total

Occupancy Number: 190

Entertainment License: ☒ Yes ☐ No

Request for New Year's Eve Extension?

☐ YES ☒ NO



Hull Lic. No: A2023-21

**LICENSE** ABCC 02799-RS-0554

## **ALCOHOLIC BEVERAGES**

### **THE LICENSING BOARD OF**

The TOWN of HULL, MASSACHUSETTS

HEREBY GRANTS A

## **COMMON VICTUALER**

**License to Expose, Keep for Sale, and to Sell**

**ALL KINDS OF ALCOHOLIC BEVERAGES**

**To BE DRUNK ON PREMISES**

To SHORELINE HOSPITALITY LLC, DBA SHORELINE KITCHEN + BAR

JANET CAMPBELL, MANAGER- 43 HULL SHORE DRIVE

On the following described premises: 6000 sq ft restaurant with exterior deck, dining area, bar area, and kitchen facility with storage area.

This license is granted and accepted upon the express condition that the licensee shall, in all respects, conform to all the provisions of the Liquor Control Act, Chapter 138 of the General Laws, as amended, and any rules or regulations made thereunder by the licensing authorities. The license expires December 31, 2023 unless earlier suspended, cancelled or revoked.

IN TESTIMONY WHEREOF, the undersigned have hereunto affixed their official signatures this First day of January 2023.

The Hours during which

Alcoholic Beverages may be sold are:

SEE ATTACHED

Jennifer Constable

Donna Pursel

Irwin Nesoff

Domenico Sestito

Greg Grey

} Licensing  
Authorities

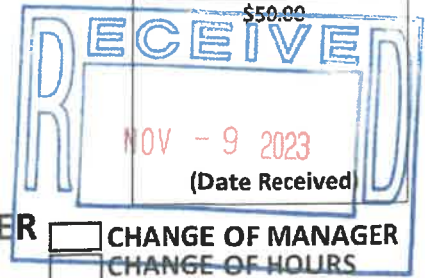
*Unless otherwise advised by Licensing Authority*



**TOWN OF HULL  
SELECT BOARD**  
253 Atlantic Avenue  
Tel: 781-925-2000

SELECTMEN'S OFFICE FEE:

\$50.00



**APPLICATION FOR COMMON VIRTUALER**

NEW ☐ RENEWAL ☒ TRANSFER ☐ AMENDMENT ☐

☐ CHANGE OF MANAGER  
☐ CHANGE OF HOURS  
☐ ONE DAY  
☐ OTHER \_\_\_\_\_

**SECTION 1 – APPLICANTS & BUSINESS INFORMATION**

I, the undersigned, duly authorized by the concern herein mentioned, hereby apply for a Common Virtualer's License, in accordance with the provisions of Chapter 140 of the General Laws.

Applicant's Full Legal Name: Joseph Campbell Shoreline Kitchen + Bar

Applicant's Legal Home Address: \_\_\_\_\_

Applicant's Mailing Address (if different): \_\_\_\_\_

Applicant's Home Telephone Number: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Applicant's E-Mail Addresses: Primary Campbell@comcast.net Secondary \_\_\_\_\_

Applicant's (authorized) Signature Joseph Campbell Date: 11/7/23

By signing above you are verify the accuracy of all information

Full Legal Name of the Business: Shoreline Hospitality Group, LLC DBA Shoreline Kitchen + Bar

Full Street Address of the Business: 43 Hull Shore Drive

Mailing Address of the Business (if different): \_\_\_\_\_

Telephone Number of the Business (if different): 781 214-9470

Current Owner/Manager of Record: Joseph and Janet Campbell

E-Mail Addresses of the Business (if different): \_\_\_\_\_

FID of the License: \_\_\_\_\_

Do you own ☒ or lease ☐ the premises?

If leasing, please provide the name and address of the lessor: \_\_\_\_\_

**SECTION 2 – LICENSE CLASS**

(Check One)

☒ Year Round Operation: (January 01-December 31) ☐ Seasonal Operation: (April 01 –November 30)

Expected date to open: \_\_\_\_\_ Expected date to close: \_\_\_\_\_

\*If you plan to open your business later than the beginning license date or plan to close earlier than the license end date please explain why: \_\_\_\_\_

**SECTION 3 - HOURS OF OPERATION**

☒ NO CHANGES

☐ SEE ATTACHED

OPEN: Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

CLOSE: Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

**\*SEE OTHER SIDE\***

**NEW APPLICANTS AND/OR AMENDMENTS TO EXISTING LICENSE (ONLY)**

## SECTION 4 – TO BE COMPLETED BY NEW APPLICANTS OR AMENDMENTS ONLY

**\*Note\*:** A PUBLIC HEARING MAY BE REQUIRED. PLEASE INDICATE WHAT CHANGES MADE BELOW:

Is your kitchen fully equipped to conduct a business \_\_\_\_\_ Size of Kitchen \_\_\_\_\_

Sink \_\_\_\_\_ Hot and Cold Water \_\_\_\_\_ Is there a Stove ☐

Gas Burners \_\_\_\_\_ Electric Burners \_\_\_\_\_ Refrigerators \_\_\_\_\_

Bar \_\_\_\_\_ Lunch Counter \_\_\_\_\_ Tables # \_\_\_\_ / \_\_\_\_ Booths # \_\_\_\_ / \_\_\_\_  
(no. of seats) (no. of seats) (no. of seats) (no. of seats)

Seating Capacity? Indoor \_\_\_\_\_ Outdoor \_\_\_\_\_ TOTAL Seating Capacity \_\_\_\_\_

Are there Restrooms for - Men ☐ Women ☐ Unisex ☐

### AMENDMENTS

☐ REQUESTING CHANGE OF HOURS

☐ SEE ATTACHED

New Proposed Hours of Operation:

**OPEN:** Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

**CLOSE:** Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

Applicant's (authorized) Signature \_\_\_\_\_

*By signing above you are verify the accuracy of all information*

☐ REQUESTING CHANGE OF MANAGER

Proposed Manager \_\_\_\_\_

Home Address \_\_\_\_\_

Email Address \_\_\_\_\_

Cell Phone \_\_\_\_\_

**Owner/Manager's Signature** \_\_\_\_\_

Date \_\_\_\_\_

*By signing above you are verify the accuracy of all information*

MGL 140 § 4 "...licenses shall expire on December thirty-first of each year; but they may be granted during December, to take effect on January first following."

LICENSE NUMBER 2023-29

FEE \$50.00

THE COMMONWEALTH OF MASSACHUSETTS  
TOWN OF HULL

This is to Certify that Shoreline Hospitality LLC, dba Shoreline Kitchen + Bar, Janet Campbell, Mgr.

43 Hull Shore Drive

IS HEREBY GRANTED A

**COMMON VICTUALLER'S LICENSE**

In said Hull that place only and expires December thirty-first 20 23 unless sooner suspended or revoked for violation of the laws of the Commonwealth respecting the licensing of common victuallers. This license is issued in conformity with the authority granted to the licensing authorities by General Laws, Chapter 140, and amendments thereto.

In Testimony Whereof, the undersigned have hereunto affixed their official signatures.

**Hours of Operation:**

**See Attached.**

/s/ Jennifer Constable

/s/ Donna Pursel

/s/ Irwin Nesoff

/s/ Domenico Sestito

/s/ Greg Grey

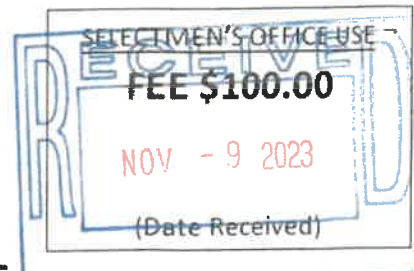
Licensing  
Authorities

ISSUED: January 1, 2023

(OVER)



**TOWN OF HULL  
SELECT BOARD  
253 Atlantic Ave  
781-925-2000**



**APPLICATION FOR ENTERTAINMENT LICENSE**

NEW ☐ RENEWAL ☒ TRANSFER ☐ AMENDMENT ☐

CHANGE OF MANAGER (COM)\*  
CHANGE OF HOURS  
ONE DAY  
OTHER

**SECTION 1 – APPLICANTS & BUSINESS INFORMATION**

Applicant's Full Legal Name Joseph Campbell Janet Campbell  
Business's Full Legal Name Shoreline Hospitality Group, Inc. Shoreline Kitchen + Bar  
Business Address 45 Hull Shore Drive  
Mailing Address ☒ Same as above  
Business Telephone Number 781-214-9470 FID# \_\_\_\_\_  
Business Email Address campcoho@comcast.net  
Description of Premises 120 Seat Restaurant with a Bar and an outdoor patio  
Manager of Record /\*Proposed Manager\* Joseph & Janet Campbell  
Home Address \_\_\_\_\_  
Home Telephone \_\_\_\_\_  
Email Address \_\_\_\_\_  
Owner/Manager's Signature Joseph Campbell  
\*If Amending Manager of Record\* By signing above you are verifying the accuracy of all information

**SECTION 2 – TYPE OF ENTERTAINMENT**

☐ No Changes to Type of Entertainment from Last Year

Jukebox ☐ DJ ☐ Karaoke ☐ Piped in Music ☒ Amplification System ☐  
Recorded Music ☐ Live Music ☒ Vocal Music ☒ No. of Persons 1-5  
Instrumental Music ☒ No. of Instruments 6 Description/Type Instruments (i.e. guitar, drums, keyboard, etc.) Guitar, Piano, Organ, Synthesizer, Drum, Brass  
Dancing by Patrons ☐ Location(s) \_\_\_\_\_ Size of dance floor(s) \_\_\_\_\_  
Floor Show ☐ Description \_\_\_\_\_ Other: \_\_\_\_\_  
Entertainment Location: Indoors ☒ Outdoors ☐ Description (provide floor plan if necessary) \_\_\_\_\_

**SECTION 3 – HOURS OF OPERATION**

☒ No Changes to Hours of Operation from Last Year

Start Time: Mon \_\_\_\_\_ Tues \_\_\_\_\_ Wed \_\_\_\_\_ Thurs \_\_\_\_\_ Fri \_\_\_\_\_ Sat \_\_\_\_\_ Sun \_\_\_\_\_  
End Time: Mon \_\_\_\_\_ Tues \_\_\_\_\_ Wed \_\_\_\_\_ Thurs \_\_\_\_\_ Fri \_\_\_\_\_ Sat \_\_\_\_\_ Sun \_\_\_\_\_

**NOTE: SUNDAY ENTERTAINMENT HOURS, UNLESS OTHERWISE SPECIFIED BY LICENSING AUTHORITY, TO BE BEGIN NO EARLIER THAN 2:00 P.M.**

LICENSE NUMBER: 2023-15

FEE: \$100.00

THE COMMONWEALTH OF MASSACHUSETTS  
TOWN OF HULL

This is to Certify that

SHORELINE HOSPITALITY LLC, DBA SHORELINE KITCHEN + BAR  
JANET CAMPBELL, MANAGER – 43 HULL SHORE DRIVE

IS HEREBY GRANTED A LICENSE

For Entertainment as a Inn Holder at: 43 Hull Shore Drive

Type of Entertainment: Piped and Live Music (1-5 Entertainers [Vocal & Amplified]; Types of musical instruments: Guitar, Keyboard, Base, Drums, Saxophone, and Brass)

Hours: Monday through Thursday 11:00 a.m. to 12:00 a.m.

Friday through Saturday 11:00 a.m. to 12:30 a.m.

Sunday 10:00 a.m. to 10:00 p.m.

This license is granted in conformity with the Statutes and ordinances relating thereto, and expires December 31, 2023 unless sooner suspended or revoked.

/s/ Jennifer Constable

/s/ Donna Pursel

/s/ Irwin Nesoff

/s/ Domenico Sestito

/s/ Greg Grev

} Licensing  
Authorities

ISSUED: January 1, 2023



**SHORELINE KITCHEN + BAR**  
**HOURS OF OPEARTION**  
**2022**

In Season	Hours of Operation
Monday - Thursday	11:30 AM – 12 AM
Friday - Saturday	11:00 AM – 12 AM
Sunday	10:00 AM – 12 AM

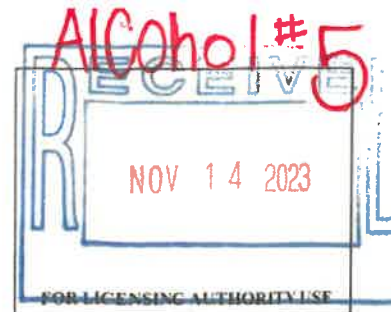
Off Season	Hours of Operation
Monday – Sunday	11:30 AM – 12 AM
Monday Holidays	CLOSED



# TOWN OF HULL

## ALCOHOL LICENSE INFORMATION FORM

NEW ☐ RENEWAL ☒ TRANSFER ☐  
AMENDMENT ☐ ☐ CHANGE OF MANAGER (COM)\*  
☐ CHANGE OF HOURS (COH)  
ONE DAY ☐ Date: ☐ OTHER \_\_\_\_\_



Full Legal Name of Business: Jesse K LLC  
Business Name (dba) if different: Toast  
FID of Licensee: \_\_\_\_\_ Address of Premises: 121 Nantasket Av #109  
Phone Number of Premises: 781-925-5221 Business Email: \_\_\_\_\_  
Business Mailing Address: ☐ Same as above \_\_\_\_\_  
Owner of Business: Jessica Travis  
Manager of Record: Jessica Travis

\*Proposed Manager (must file COM with ABCC): \_\_\_\_\_

Phone: \_\_\_\_\_ Residential Address : \_\_\_\_\_

Applicant's (authorized) Signature [Signature] Date: 11/14/23

By signing above you are verifying the accuracy of all information

License Class: ☐ Annual ☐ Seasonal ☒ One Day (1 + 1 Day[s]) Nature of Event: \_\_\_\_\_

TYPE OF LICENSE: (CHECK ONLY ONE) \*\*\* PROVIDE HRS BELOW Location of Event: \_\_\_\_\_

☐ Club ☐ Package Store ☐ Veteran's Club ☐ General On Premise ☐ Restaurant  
☐ Innholder ☐ Tavern ☐ Other (Specify) \_\_\_\_\_

### LICENSE CATEGORY:

☐ All Alcohol ☐ Wine & Malt ☐ Malt Only ☐ Wine Only ☐ Wine & Malt with Cordials  
☐ Other (please specify) \_\_\_\_\_

### HOURS OF OPERATION - PLEASE READ CAREFULLY

☒ NO CHANGES TO HOURS OF OPERATION FROM LAST YEAR: See Attached  
☐ REQUESTING CHANGE OF HOURS (complete ONLY if amending hours of operation from previous license period)  
☐ SEE ATTACHED HOURS (CHANGE OF HOURS)

#### REQUESTING TO OPEN:

Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

#### REQUESTING TO CLOSE:

Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

Seating Capacity: (if applicable) 48 Indoor 48 Outdoor 48 Total

Occupancy Number: \_\_\_\_\_

Entertainment License: ☐ Yes ☒ No

Request for New Year's Eve Extension?

☐ YES ☒ NO

Hull Lic. No: A2023-6

# LICENSE

ABCC 05313-RS-0554

## ALCOHOLIC BEVERAGES

### THE LICENSING BOARD OF

The TOWN of HULL, MASSACHUSETTS

HEREBY GRANTS A

## COMMON VICTUALER

License to Expose, Keep for Sale, and to Sell

### WINES AND MALT BEVERAGES

### TO BE DRUNK ON PREMISES

To: Jessekat LLC dba Toast, Jessica Travis, Mgr.

121 NANTASKET AVENUE

On the following described premises: 1375 sq. ft. restaurant, one front and one back entrance, side door access to retail unit next door, kitchen and dining room.

This license is granted and accepted upon the express condition that the licensee shall, in all respects, conform to all the provisions of the Liquor Control Act, Chapter 138 of the General Laws, as amended, and any rules or regulations made thereunder by the licensing authorities. The license expires December 31, 2023, unless earlier suspended, cancelled or revoked.

IN TESTIMONY WHEREOF, the undersigned have hereunto affixed their official signatures this 1st day of January 2023.

The Hours during which

Alcoholic Beverages may be sold are:

OPEN: 7:00 AM – 3 00 PM TUES—SUN

Closed Mondays

*Unless otherwise advised by Licensing Authority*

Jennifer Constable

Donna Pursel

Irwin Nesoff

Domenico Sestito

Greg Grey

Licensing  
Authorities



**TOWN OF HULL  
SELECT BOARD**  
253 Atlantic Avenue  
Tel: 781-925-2000

SELECTMEN'S OFFICE FEE:

\$50.00



**APPLICATION FOR COMMON VICTUALER**

NEW ☐ RENEWAL ☒ TRANSFER ☐ AMENDMENT ☐

☐ CHANGE OF MANAGER  
☐ CHANGE OF HOURS  
☐ ONE DAY  
☐ OTHER \_\_\_\_\_

**SECTION 1 – APPLICANTS & BUSINESS INFORMATION**

*I, the undersigned, duly authorized by the concern herein mentioned, hereby apply for a Common Victualer's License, in accordance with the provisions of Chapter 140 of the General Laws.*

Applicant's Full Legal Name: \_\_\_\_\_  
Applicant's Legal Home Address: \_\_\_\_\_  
Applicant's Mailing Address (if different): \_\_\_\_\_  
Applicant's Home Telephone Number: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Applicant's E-Mail Addresses: Primary \_\_\_\_\_ secondary \_\_\_\_\_  
Applicant's (authorized) Signature [Signature] Date: 11/14/23

*By signing above you are verify the accuracy of all information*

Full Legal Name of the Business: Jessikat LLC DBA Toast + DBA Toast  
Full Street Address of the Business: 121 Nantasket Av #109 Hull, MA 02045  
Mailing Address of the Business (if different): \_\_\_\_\_  
Telephone Number of the Business (if different): 781-925-5221  
Current Owner/Manager of Record: Jessica Travis  
E-Mail Addresses of the Business (if different): \_\_\_\_\_  
FID of the License: \_\_\_\_\_

Do you own ☐ or lease ☒ the premises?  
If leasing, please provide the name and address of the lessor: \_\_\_\_\_

**SECTION 2 – LICENSE CLASS**

(Check One)

☐ Year Round Operation: (January 01-December 31) ☐ Seasonal Operation: (April 01 –November 30)

Expected date to open: \_\_\_\_\_ Expected date to close: \_\_\_\_\_

\*If you plan to open your business later than the beginning license date or plan to close earlier than the license end date please explain why: \_\_\_\_\_

**SECTION 3 - HOURS OF OPERATION**

☒ NO CHANGES

☐ SEE ATTACHED

OPEN: Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

CLOSE: Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

**\*SEE OTHER SIDE\***

**NEW APPLICANTS AND/OR AMENDMENTS TO EXISTING LICENSE (ONLY)**

## SECTION 4 – TO BE COMPLETED BY NEW APPLICANTS OR AMENDMENTS ONLY

**\*Note\***: A PUBLIC HEARING MAY BE REQUIRED. PLEASE INDICATE WHAT CHANGES MADE BELOW:

Is your kitchen fully equipped to conduct a business \_\_\_\_\_ Size of Kitchen \_\_\_\_\_

Sink \_\_\_\_\_ Hot and Cold Water \_\_\_\_\_ Is there a Stove ☐

Gas Burners \_\_\_\_\_ Electric Burners \_\_\_\_\_ Refrigerators \_\_\_\_\_

Bar \_\_\_\_\_ Lunch Counter \_\_\_\_\_ Tables # \_\_\_\_ / \_\_\_\_ Booths # \_\_\_\_ / \_\_\_\_  
(no. of seats) (no. of seats) (no. of seats) (no. of seats)

Seating Capacity? Indoor \_\_\_\_\_ Outdoor \_\_\_\_\_ TOTAL Seating Capacity \_\_\_\_\_

Are there Restrooms for - Men ☐ Women ☐ Unisex ☐

### AMENDMENTS

☐ REQUESTING CHANGE OF HOURS

☐ SEE ATTACHED

**New Proposed Hours of Operation:**

**OPEN:** Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

**CLOSE:** Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

**Applicant's (authorized) Signature** \_\_\_\_\_

*By signing above you are verify the accuracy of all information*

☐ REQUESTING CHANGE OF MANAGER

Proposed Manager \_\_\_\_\_

Home Address \_\_\_\_\_

Email Address \_\_\_\_\_ Cell Phone \_\_\_\_\_

**Owner/Manager's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

*By signing above you are verify the accuracy of all information*

MGL 140 § 4 "...licenses shall expire on December thirty-first of each year; but they may be granted during December, to take effect on January first following."

**LICENSE NUMBER: 2023-6**

**FEE \$50.00**

**THE COMMONWEALTH OF MASSACHUSETTS**

**TOWN OF HULL**

**This is to Certify that Jessekat, LLC. dba TOAST, Jessica Travis, Mgr.  
121 NANTASKET AVENUE**

**IS HEREBY GRANTED A**

**COMMON VICTUALLER'S LICENSE**

In said Hull and at that place only and expires December thirty-first 20 23 unless sooner suspended or revoked for violation of the laws of the Commonwealth respecting the licensing of common victuallers. This license is issued in conformity with the authority granted to the licensing authorities by General Laws, Chapter 140, and amendments thereto.

In Testimony Whereof, the undersigned have hereunto affixed their official signatures.

Open: 7:00am Tuesday-Sunday  
Close: 3:00pm Tuesday-Sunday  
CLOSED MONDAYS

/s/ Jennifer Constable

/s/ Donna Pursel

/s/ Irwin Nesoff

/s/ Domenico Sestito

/s/ Greg Grev

Licensing  
Authorities

Issued: January 01, 2023

(OVER)





# TOWN OF HULL

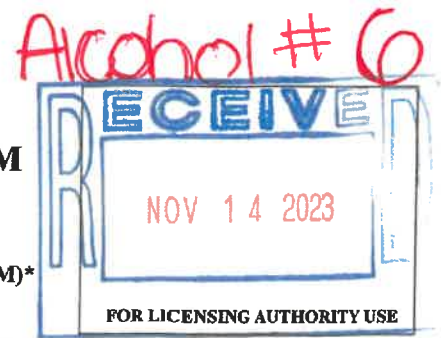
## ALCOHOL LICENSE INFORMATION FORM

NEW ☐ RENEWAL ☒ TRANSFER ☐

AMENDMENT ☐ ☐ CHANGE OF MANAGER (COM)\*

ONE DAY ☐ Date: \_\_\_\_\_

☐ CHANGE OF HOURS (COH)  
☐ OTHER



Full Legal Name of Business: HOLLIHAN'S SEASIDE

Business Name (dba) if different: THE PARROT

FID of Licensee: \_\_\_\_\_ Address of Premises: 1 HULL SHORE DR

Phone Number of Premises: 781-214-9300 Business Email: THEPARROT@GMAIL.COM

Business Mailing Address: ☒ Same as above

Owner of Business: J BRIAN HOLLIHAN

Manager of Record: J BRIAN HOLLIHAN

Residential Address : \_\_\_\_\_

\*Proposed Manager (must file COM with ABCC): \_\_\_\_\_

Phone: \_\_\_\_\_ Residential Address : \_\_\_\_\_

Applicant's (authorized) Signature: \_\_\_\_\_ Date: 11/2/2023

By signing above you are verifying the accuracy of all information

License Class: ☒ Annual ☐ Seasonal ☐ One Day (1 + 1 Day[s]) Nature of Event: \_\_\_\_\_

TYPE OF LICENSE: (CHECK ONLY ONE) \*\*\* PROVIDE HRS BELOW Location of Event: \_\_\_\_\_

☐ Club ☐ Package Store ☐ Veteran's Club ☒ General On Premise ☐ Restaurant

☐ Innholder ☐ Tavern ☐ Other (Specify) \_\_\_\_\_

### LICENSE CATEGORY:

☒ All Alcohol ☐ Wine & Malt ☐ Malt Only ☐ Wine Only ☐ Wine & Malt with Cordials

☐ Other (please specify) \_\_\_\_\_

### HOURS OF OPERATION - PLEASE READ CAREFULLY

☒ NO CHANGES TO HOURS OF OPERATION FROM LAST YEAR: See Attached

☐ REQUESTING CHANGE OF HOURS (complete ONLY if amending hours of operation from previous license period)

☐ SEE ATTACHED HOURS (CHANGE OF HOURS)

#### REQUESTING TO OPEN:

Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

#### REQUESTING TO CLOSE:

Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

Seating Capacity: (if applicable) 300 Indoor 100 Outdoor 400 Total

Occupancy Number: 400

Entertainment License: ☒ Yes ☐ No

Request for New Year's Eve Extension?

☒ YES ☐ NO

Hull A2023-12

# LICENSE

ABCC 04883-RS-0554

## ALCOHOLIC BEVERAGES

### THE LICENSING BOARD OF

The TOWN of HULL, MASSACHUSETTS

HEREBY GRANTS A

## COMMON VICTUALER

License to Expose, Keep for Sale, and to Sell

## ALL KINDS OF ALCOHOLIC BEVERAGES

## TO BE DRUNK ON PREMISES

To: Houlihans Seaside, Inc., dba The Parrot, J. Brian Houlihan, Mgr.  
1 HULL SHORE DRIVE

On the following described premises: Two Story Structure consisting of appr.8,400 sq ft. restaurant. 1<sup>st</sup> flr. bar in dining rm/lounge area. kitchen & office & storage area. 2<sup>nd</sup> flr w/two function/dining area, bar, and deck tables on deck. There are 2 entrances & 7 exits. Total seating Capacity 393

This license is granted and accepted upon the express condition that the licensee shall, in all respects, conform to all the provisions of the Liquor Control Act, Chapter 138 of the General Laws, as amended, and any rules or regulations made thereunder by the licensing authorities. The license expires December 31, 2023, unless earlier suspended, cancelled or revoked.

IN TESTIMONY WHEREOF, the undersigned have hereunto affixed their official signatures this Thirtieth day of June 2023.

The Hours during which

Alcoholic Beverages may be sold are:

OPEN: 8 AM WEEKDAYS  
10 AM SUNDAYS

CLOSE: 1 AM

*Unless otherwise advised by Licensing Authority*

Jennifer Constable

Donna Pursel

Irwin Nesoff

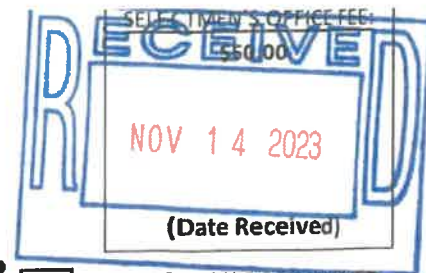
Domenico Sestito

Greg Grey

Licensing  
Authorities



**TOWN OF HULL  
SELECT BOARD**  
253 Atlantic Avenue  
Tel: 781-925-2000



**APPLICATION FOR COMMON VICTUALER**

NEW ☐ RENEWAL ☒ TRANSFER ☐ AMENDMENT ☐

☐ CHANGE OF MANAGER  
☐ CHANGE OF HOURS  
☐ ONE DAY  
☐ OTHER \_\_\_\_\_

**SECTION 1 – APPLICANTS & BUSINESS INFORMATION**

*I, the undersigned, duly authorized by the concern herein mentioned, hereby apply for a Common Victualer's License, in accordance with the provisions of Chapter 140 of the General Laws.*

Applicant's Full Legal Name: BRIAN DONOVAN

Applicant's Legal Home Address \_\_\_\_\_

Applicant's Mailing Address (if different): \_\_\_\_\_

Applicant's Home Telephone Number: \_\_\_\_\_

Applicant's E-Mail Addresses: Primary \_\_\_\_\_

Applicant's (authorized) Signature [Signature] Date: 11/2/23

*By signing above you are verify the accuracy of all information*

Full Legal Name of the Business: HOLLIS'S SEASIDE DBA THE PARROT

Full Street Address of the Business: 1 HULL SHORE DRIVE HULL MA 02045

Mailing Address of the Business (if different): \_\_\_\_\_

Telephone Number of the Business (if different): 781 214 9300

Current Owner/Manager of Record: J BROWN HOLLIS

E-Mail Addresses of the Business (if different): THEPARROT@GMAIL.COM

FID of the License: \_\_\_\_\_

Do you own ☒ or lease ☐ the premises?

If leasing, please provide the name and address of the lessor: \_\_\_\_\_

**SECTION 2 – LICENSE CLASS**

(Check One)

☒ Year Round Operation: (January 01-December 31) ☐ Seasonal Operation: (April 01 –November 30)

Expected date to open: \_\_\_\_\_ Expected date to close: \_\_\_\_\_

\*If you plan to open your business later than the beginning license date or plan to close earlier than the license end date please explain why: \_\_\_\_\_

**SECTION 3 - HOURS OF OPERATION**

☒ NO CHANGES

☐ SEE ATTACHED

OPEN: Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

CLOSE: Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

**\*SEE OTHER SIDE\***

**NEW APPLICANTS AND/OR AMENDMENTS TO EXISTING LICENSE (ONLY)**

## SECTION 4 – TO BE COMPLETED BY NEW APPLICANTS OR AMENDMENTS ONLY

**\*Note\***: A PUBLIC HEARING MAY BE REQUIRED. PLEASE INDICATE WHAT CHANGES MADE BELOW:

Is your kitchen fully equipped to conduct a business \_\_\_\_\_ Size of Kitchen \_\_\_\_\_

Sink \_\_\_\_\_ Hot and Cold Water \_\_\_\_\_ Is there a Stove ☐

Gas Burners \_\_\_\_\_ Electric Burners \_\_\_\_\_ Refrigerators \_\_\_\_\_

Bar \_\_\_\_\_ Lunch Counter \_\_\_\_\_ Tables # \_\_\_\_\_ / \_\_\_\_\_ Booths # \_\_\_\_\_ / \_\_\_\_\_  
(no. of seats) (no. of seats) (no. of seats) (no. of seats)

Seating Capacity? Indoor \_\_\_\_\_ Outdoor \_\_\_\_\_ TOTAL Seating Capacity \_\_\_\_\_

Are there Restrooms for - Men ☐ Women ☐ Unisex ☐

### AMENDMENTS

☐ REQUESTING CHANGE OF HOURS

☐ SEE ATTACHED

**New Proposed Hours of Operation:**

**OPEN:** Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

**CLOSE:** Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

**Applicant's (authorized) Signature** \_\_\_\_\_  
*By signing above you are verify the accuracy of all information*

☐ REQUESTING CHANGE OF MANAGER

Proposed Manager \_\_\_\_\_

Home Address \_\_\_\_\_

Email Address \_\_\_\_\_ Cell Phone \_\_\_\_\_

**Owner/Manager's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

*By signing above you are verify the accuracy of all information*

MGL 140 § 4 "...licenses shall expire on December thirty-first of each year; but they may be granted during December, to take effect on January first following."

**LICENSE NUMBER**

**FEE**

2023-12

\$50.00

THE COMMONWEALTH OF MASSACHUSETTS  
TOWN OF HULL

This is to Certify that: Houlihans Seaside, Inc., dba The Parrot, J. Brian Houlihan, Mgr.

1 Hull Shore Drive

IS HEREBY GRANTED

**COMMON VICTUALLER'S LICENSE**

In said Hull and at that place only and expires December thirty-first 20 23 unless sooner suspended or revoked for violation of the laws of the Commonwealth respecting the licensing of common victuallers. This license is issued in conformity with the authority granted to the licensing authorities by General Laws, Chapter 140, and amendments thereto.

In Testimony Whereof, the undersigned have hereunto affixed their official signatures.

Hours: Sunday to Saturday 8:00am-1:00am

/s/ Jennifer Constable

/s/ Donna Pursel

/s/ Irwin Nesoff

/s/ Domenico Sestito

/s/ Greg Grey

Licensing  
Authorities

ISSUED: January 01, 2023

(OVER)





**TOWN OF HULL  
SELECT BOARD  
253 Atlantic Ave  
781-925-2000**



**APPLICATION FOR ENTERTAINMENT LICENSE**

NEW ☐ RENEWAL ☒ TRANSFER ☐ AMENDMENT ☐

CHANGE OF MANAGER (COM)\*  
CHANGE OF HOURS  
ONE DAY  
OTHER

**SECTION 1 – APPLICANTS & BUSINESS INFORMATION**

Applicant's Full Legal Name HULL HANS SEASIDE DBA THE PARROT  
Business's Full Legal Name BRIAN DONOVAN  
Business Address 1 HULL SHORE DRIVE  
Mailing Address ☒ Same as above  
Business Telephone Number 781 214 9300 FID# \_\_\_\_\_  
Business Email Address THE PARROT HULL @ GMAIL.COM  
Description of Premises FULL SERVICE RESTAURANT

Manager of Record /\*Proposed Manager\* T. BRIAN HULL HAN  
Home Address \_\_\_\_\_  
Home Telephone N/A Cell Phone \_\_\_\_\_  
Email Address T.BRIAN.HULLHAN@GMAIL.COM  
Owner/Manager's Signature \_\_\_\_\_

\*If Amending Manager of Record\* *By signing above you are verifying the accuracy of all information*

**SECTION 2 – TYPE OF ENTERTAINMENT**

☒ No Changes to Type of Entertainment from Last Year  
Jukebox ☐ DJ ☐ Karaoke ☐ Piped in Music ☐ Amplification System ☐  
Recorded Music ☐ Live Music ☐ Vocal Music ☐ No. of Persons \_\_\_\_\_  
Instrumental Music ☐ No. of Instruments \_\_\_\_\_ Description/Type Instruments (i.e. guitar, drums, keyboard, etc.) \_\_\_\_\_  
Dancing by Patrons ☐ Location(s) \_\_\_\_\_ Size of dance floor(s) \_\_\_\_\_  
Floor Show ☐ Description \_\_\_\_\_ Other: \_\_\_\_\_  
Entertainment Location: Indoors ☐ Outdoors ☐ Description (provide floor plan if necessary) \_\_\_\_\_

**SECTION 3 – HOURS OF OPERATION**

☒ No Changes to Hours of Operation from Last Year  
Start Time: Mon \_\_\_\_\_ Tues \_\_\_\_\_ Wed \_\_\_\_\_ Thurs \_\_\_\_\_ Fri \_\_\_\_\_ Sat \_\_\_\_\_ Sun \_\_\_\_\_  
End Time: Mon \_\_\_\_\_ Tues \_\_\_\_\_ Wed \_\_\_\_\_ Thurs \_\_\_\_\_ Fri \_\_\_\_\_ Sat \_\_\_\_\_ Sun \_\_\_\_\_

**NOTE: SUNDAY ENTERTAINMENT HOURS, UNLESS OTHERWISE SPECIFIED BY LICENSING AUTHORITY, TO BE BEGIN NO EARLIER THAN 2:00 P.M.**



LICENSE NUMBER: 2023-8

FEE: \$100.00

THE COMMONWEALTH OF MASSACHUSETTS  
TOWN OF HULL

This is to Certify that: Houlihans Seaside, Inc. dba The Parrot, J. Brian Houlihan, Mgr.  
1Hull Shore Drive

**IS HEREBY GRANTED A LICENSE**

**For Entertainment as a Victualer at: 1 HULL SHORE DRIVE**

**Type of Entertainment: Live, Jukebox, DJ & Karaoke**

**Hours: Monday through Saturday – 10:30 a.m. to 1:00 a.m.**

**Sunday – 11:00 a.m. to 1:00 a.m.**

**Patio Hours - 10:30 a.m. to 12:00 a.m.**

**This license is granted in conformity with the Statutes and ordinances relating thereto, and expires December 31, 2023 unless sooner suspended or revoked.**

/s/ Jennifer Constable

/s/ Donna Pursel

/s/ Irwin Nesoff

/s/ Domenico Sestito

/s/ Greg Grey

} Licensing  
Authorities

**ISSUED: January 1, 2023**

# **Houlihans Seaside, dba The Parrot**

## **ATTACHMENT (A)**

### **ALCOHOL LICENSE HOURS OF OPERATION:**

**Monday through Saturday - 8:00 AM to 1:00 AM**

### **COMMON VICTUALER LICENSE HOURS OF OPERATION:**

**Sunday through Saturday - 8:00 AM to 1:00 AM**

### **ENTERTAINMENT LICENSE HOURS OF OPERATION:**

**Monday through Saturday - 10:30 AM to 1:00 AM**

**Sunday - 11:00 AM to 1:00 AM**

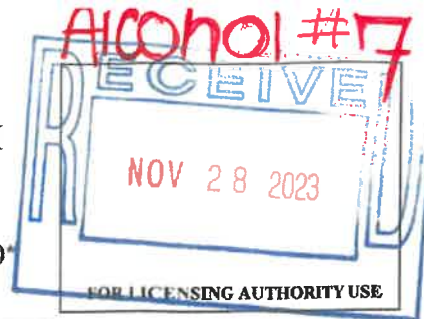
**Patio Hours - 10:30 AM to 12:00 AM**



# TOWN OF HULL

## ALCOHOL LICENSE INFORMATION FORM

NEW ☐ RENEWAL ☒ TRANSFER ☐  
AMENDMENT ☐ ☐ CHANGE OF MANAGER (COM)  
☐ CHANGE OF HOURS (COH)  
☐ OTHER  
ONE DAY ☐ Date: \_\_\_\_\_



Full Legal Name of Business: 145 NA Inc  
Business Name (dba) if different: Nantasket Flatts  
FID of Licensee: \_\_\_\_\_ Address of Premises: 145 Nantasket Ave, Hull MA 02045  
Phone Number of Premises: 617-719-0269 Business Email: richard@thevaughanco.com  
Business Mailing Address: ☐ Same as above  
Owner of Business: Richard Vaughan  
Manager of Record: Richard Vaughan

\*Proposed Manager (must file COM with ABCC): Richard Vaughan

Residential Address : \_\_\_\_\_

Applicant's (authorized) Signature \_\_\_\_\_

Date: 11/28/23

By signing above you are verifying the accuracy of all information

License Class: ☒ Annual ☐ Seasonal ☐ One Day (1 + 1 Day[s]) Nature of Event: \_\_\_\_\_

TYPE OF LICENSE: (CHECK ONLY ONE)

PROVIDE HRS BELOW

Location of Event: \_\_\_\_\_

☐ Club ☐ Package Store ☐ Veteran's Club ☐ General On Premise ☒ Restaurant  
☐ Innholder ☐ Tavern ☐ Other (Specify) \_\_\_\_\_

LICENSE CATEGORY:

☒ All Alcohol ☐ Wine & Malt ☐ Malt Only ☐ Wine Only ☐ Wine & Malt with Cordials

☐ Other (please specify) \_\_\_\_\_

### HOURS OF OPERATION - PLEASE READ CAREFULLY

☒ NO CHANGES TO HOURS OF OPERATION FROM LAST YEAR: See Attached

☐ REQUESTING CHANGE OF HOURS (complete ONLY if amending hours of operation from previous license period)

☐ SEE ATTACHED HOURS (CHANGE OF HOURS)

REQUESTING TO OPEN:

Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

REQUESTING TO CLOSE:

Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

Seating Capacity: (if applicable) 99 Indoor 05 Outdoor 104 Total

Occupancy Number: \_\_\_\_\_

Entertainment License: ☒ Yes ☐ No

Request for New Year's Eve Extension?

☐ YES ☐ NO

Hull A2023-9

# LICENSE

ABCC-04875-RS-0554

## ALCOHOLIC BEVERAGES

### THE LICENSING BOARD OF

The TOWN of HULL, MASSACHUSETTS

HEREBY GRANTS A

## COMMON VICTUALER

License to Expose, Keep for Sale, and to Sell

**ALL KINDS OF ALCOHOLIC BEVERAGES**

**TO BE DRUNK ON PREMISES**

To: 145NA, Inc. dba Nantasket Flats, Richard J. Vaughan, Manager  
145 NANTASKET AVENUE

On the following described premises: See Attached for description

This license is granted and accepted upon the express condition that the licensee shall, in all respects, conform to all the provisions of the Liquor Control Act, Chapter 138 of the General Laws, as amended, and any rules or regulations made thereunder by the licensing authorities. The license expires December 31, 2023, unless earlier suspended, cancelled or revoked.

IN TESTIMONY WHEREOF, the undersigned have hereunto affixed their official signatures this First day of January 2023.

The Hours during which  
Alcoholic Beverages may be sold are:  
\*See Attached\*

Jennifer Constable  
Donna Pursel  
Irwin Nesoff  
Domenico Sestito  
Greg Grey

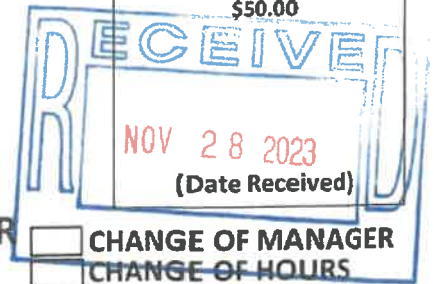
} Licensing  
Authorities

*Unless otherwise advised by Licensing Authority*



**TOWN OF HULL  
SELECT BOARD**  
253 Atlantic Avenue  
Tel: 781-925-2000

SELECTMEN'S OFFICE FEE:  
\$50.00



**APPLICATION FOR COMMON VICTUALER**

NEW ☐ RENEWAL ☒ TRANSFER ☐ AMENDMENT ☐

☐ CHANGE OF MANAGER  
☐ CHANGE OF HOURS  
☐ ONE DAY  
☐ OTHER \_\_\_\_\_

**SECTION 1 – APPLICANTS & BUSINESS INFORMATION**

*I, the undersigned, duly authorized by the concern herein mentioned, hereby apply for a Common Victualer's License, in accordance with the provisions of Chapter 140 of the General Laws.*

Applicant's Full Legal Name: Richard J. Vaughan

Applicant's Legal Home Address: \_\_\_\_\_

Applicant's Mailing Address (if different): \_\_\_\_\_

Applicant's Home Telephone Number: \_\_\_\_\_ Cell Phone \_\_\_\_\_

Applicant's E-Mail Addresses: Primary richard@thevaughan.com Secondary \_\_\_\_\_

Applicant's (authorized) Signature [Signature] Date: 11/28/23

*By signing above you are verify the accuracy of all information*

Full Legal Name of the Business: 145 NA Inc dba Nantasket Flatts

Full Street Address of the Business: 145 Nantasket Ave, Hull MA 02045

Mailing Address of the Business (if different): \_\_\_\_\_

Telephone Number of the Business (if different): \_\_\_\_\_

Current Owner/Manager of Record: Richard Vaughan

E-Mail Addresses of the Business (if different): \_\_\_\_\_

FID of the License: \_\_\_\_\_

Do you own ☒ or lease ☐ the premises?

If leasing, please provide the name and address of the lessor: \_\_\_\_\_

**SECTION 2 – LICENSE CLASS**

(Check One)

☒ Year Round Operation: (January 01-December 31) ☐ Seasonal Operation: (April 01 –November 30)

Expected date to open: 1/1/24 Expected date to close: 12/31/24

\*If you plan to open your business later than the beginning license date or plan to close earlier than the license end date please explain why: \_\_\_\_\_

**SECTION 3 - HOURS OF OPERATION**

☒ NO CHANGES

☐ SEE ATTACHED

OPEN: Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

CLOSE: Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

**\*SEE OTHER SIDE\***

**NEW APPLICANTS AND/OR AMENDMENTS TO EXISTING LICENSE (ONLY)**

## SECTION 4 – TO BE COMPLETED BY NEW APPLICANTS OR AMENDMENTS ONLY

**\*Note\*:** A PUBLIC HEARING MAY BE REQUIRED. PLEASE INDICATE WHAT CHANGES MADE BELOW:

Is your kitchen fully equipped to conduct a business \_\_\_\_\_ Size of Kitchen \_\_\_\_\_

Sink \_\_\_\_\_ Hot and Cold Water \_\_\_\_\_ Is there a Stove ☐

Gas Burners \_\_\_\_\_ Electric Burners \_\_\_\_\_ Refrigerators \_\_\_\_\_

Bar \_\_\_\_\_ Lunch Counter \_\_\_\_\_ Tables # \_\_\_\_ / \_\_\_\_ Booths # \_\_\_\_ / \_\_\_\_  
(no. of seats) (no. of seats) (no. of seats) (no. of seats)

Seating Capacity? Indoor \_\_\_\_\_ Outdoor \_\_\_\_\_ TOTAL Seating Capacity \_\_\_\_\_

Are there Restrooms for - Men ☐ Women ☐ Unisex ☐

### AMENDMENTS

☐ REQUESTING CHANGE OF HOURS

☐ SEE ATTACHED

**New Proposed Hours of Operation:**

**OPEN:** Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

**CLOSE:** Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

**Applicant's (authorized) Signature** \_\_\_\_\_

*By signing above you are verify the accuracy of all information*

☐ REQUESTING CHANGE OF MANAGER

Proposed Manager \_\_\_\_\_

Home Address \_\_\_\_\_

Email Address \_\_\_\_\_ Cell Phone \_\_\_\_\_

**Owner/Manager's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

*By signing above you are verify the accuracy of all information*

MGL 140 § 4 "...licenses shall expire on December thirty-first of each year; but they may be granted during December, to take effect on January first following."



LICENSE NUMBER 2023-9

FEE \$50.00

THE COMMONWEALTH OF MASSACHUSETTS  
TOWN OF HULL

This is to Certify that 145NA, Inc. dba Nantasket Flats, Richard J. Vaughan, Manager

145 NANTASKET AVENUE

IS HEREBY GRANTED A

COMMON VICTUALLER'S LICENSE

In said Hull and at that place only and expires December thirty-first 20 23 unless sooner suspended or revoked for violation of the laws of the Commonwealth respecting the licensing of common victuallers. This license is issued in conformity with the authority granted to the licensing authorities by General Laws, Chapter 140, and amendments thereto.

In Testimony Whereof, the undersigned have hereunto affixed their official signatures.

Hours of Operation:  
Sunday –Saturday 8:00am-1:00am

/s/ Jennifer Constable

/s/ Donna Pursel

/s/ Irwin Nesoff

/s/ Domenico Sestito

/s/ Greg Grey

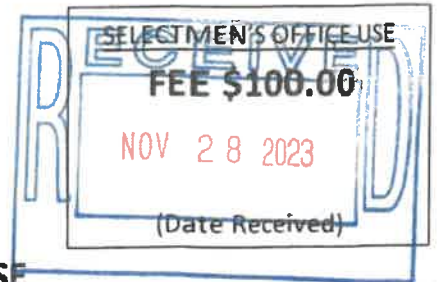
} Licensing  
Authorities

ISSUED: January 01, 2023

(OVER)



**TOWN OF HULL  
SELECT BOARD  
253 Atlantic Ave  
781-925-2000**



**APPLICATION FOR ENTERTAINMENT LICENSE**

NEW ☐ RENEWAL ☒ TRANSFER ☐ AMENDMENT ☐

☐ CHANGE OF MANAGER (COM)\*  
☐ CHANGE OF HOURS  
☐ ONE DAY  
☐ OTHER \_\_\_\_\_

**SECTION 1 – APPLICANTS & BUSINESS INFORMATION**

Applicant's Full Legal Name Richard J. Vaughan  
Business's Full Legal Name 145 NA Inc dba Nantasket Flatts  
Business Address 145 Nantasket Ave. Hull MA 02045  
Mailing Address ☐ Same as above \_\_\_\_\_  
Business Telephone Number 617-719-0269 FID# \_\_\_\_\_  
Business Email Address richard@thevaughanco.com  
Description of Premises restaurant

Manager of Record /\*Proposed Manager\* Richard Vaughan  
Home Address \_\_\_\_\_  
Home Telephone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Email Address richard@thevaughanco.com

Owner/Manager's Signature [Signature] 11/28/23

\*If Amending Manager of Record\* By signing above you are verifying the accuracy of all information

**SECTION 2 – TYPE OF ENTERTAINMENT**

☒ No Changes to Type of Entertainment from Last Year  
Jukebox ☐ DJ ☐ Karaoke ☐ Piped in Music ☐ Amplification System ☐  
Recorded Music ☐ Live Music ☐ Vocal Music ☐ No. of Persons \_\_\_\_\_  
Instrumental Music ☐ No. of Instruments \_\_\_\_\_ Description/Type Instruments (i.e. guitar, drums, keyboard, etc.) \_\_\_\_\_  
Dancing by Patrons ☐ Location(s) \_\_\_\_\_ Size of dance floor(s) \_\_\_\_\_  
Floor Show ☐ Description \_\_\_\_\_ Other: \_\_\_\_\_  
Entertainment Location: Indoors ☐ Outdoors ☐ Description (provide floor plan if necessary) \_\_\_\_\_

**SECTION 3 – HOURS OF OPERATION**

☒ No Changes to Hours of Operation from Last Year  
Start Time: Mon \_\_\_\_\_ Tues \_\_\_\_\_ Wed \_\_\_\_\_ Thurs \_\_\_\_\_ Fri \_\_\_\_\_ Sat \_\_\_\_\_ Sun \_\_\_\_\_  
End Time: Mon \_\_\_\_\_ Tues \_\_\_\_\_ Wed \_\_\_\_\_ Thurs \_\_\_\_\_ Fri \_\_\_\_\_ Sat \_\_\_\_\_ Sun \_\_\_\_\_

**NOTE: SUNDAY ENTERTAINMENT HOURS, UNLESS OTHERWISE SPECIFIED BY LICENSING AUTHORITY, TO BE BEGIN NO EARLIER THAN 2:00 P.M.**

**LICENSE NUMBER:** 2023-7

**FEE:** \$100.00

**THE COMMONWEALTH OF MASSACHUSETTS  
TOWN OF HULL**

**This is to Certify that 145NA, Inc. dba Nantasket Flatts, Richard J. Vaughan, Manager**

**IS HEREBY GRANTED A LICENSE**

**For Entertainment as a Victualer at: 145 Nantasket Avenue  
Type of Entertainment: Interior and Exterior : See Attached**

**Hours: Interior and Exterior: See Attached**

**This license is granted in conformity with the Statutes and ordinances relating thereto, and  
expires December 31, 2023 unless sooner suspended or revoked.**

/s/ Jennifer Constable

/s/ Donna Pursel

/s/ Irwin Nesoff

/s/ Domenico Sestito

/s/ Greg Grev

} Licensing  
Authorities

**ISSUED: January 01, 2023**



**TOWN OF HULL  
SELECT BOARD  
253 Atlantic Ave  
781-925-2000**



**APPLICATION FOR AUTOMATIC AMUSEMENT DEVICE**

**FEE \$20.00** Per Device

NEW ☐ RENEWAL ☒ TRANSFER ☐ AMENDMENT ☐

**SECTION 1 – APPLICANTS & BUSINESS INFORMATION**

Applicant's Full Legal Name Richard J. Vaughan  
Business's Full Legal Name USNA Inc dba Nantasket Flatts  
Business Address 145 Nantasket Ave Hull MA 02045  
Mailing Address \_\_\_\_\_  
Business Telephone Number (617)-719-0269 Business Email Address richard@thevaughanco.com FID# \_\_\_\_\_  
Description of Premises Restaurant

Have you ever been convicted of gaming? YES \_\_\_\_\_ NO ☒  
If so, WHEN? \_\_\_\_\_ WHERE? \_\_\_\_\_

**SECTION 2 – TYPE OF DEVICE**

Specify number and type of automatic device(s) desired:

TYPE pool table No. \_\_\_\_\_  
TYPE \_\_\_\_\_ No. \_\_\_\_\_  
TYPE \_\_\_\_\_ No. \_\_\_\_\_  
TYPE \_\_\_\_\_ No. \_\_\_\_\_

Have all devices been approved by the Director of Standards? ☒

Distributor's Name and Address: \_\_\_\_\_

**SECTION 4 – MANAGER INFORMATION**

**Owner/Manager's Signature** [Signature] 11/28/23

*By signing above you are verify the accuracy of all information*

Owner/Manager's Name Printed Richard Vaughan  
Home Address \_\_\_\_\_  
Home Telephone \_\_\_\_\_  
Cell Phone \_\_\_\_\_  
Email Address richard@thevaughanco.com

LICENSE NUMBER: 2023-6

FEE: \$20.00

THE COMMONWEALTH OF MASSACHUSETTS  
TOWN OF HULL

This is to Certify that: 145NA, Inc. dba Nantasket Flats, Richard J. Vaughan, Manager  
145 Nantasket Ave

IS HEREBY GRANTED AN

AUTOMATIC AMUSEMENT DEVICE LICENSE  
TYPE OF DEVICE

**POOL TABLE**

This License is granted in conformity with the Provisions of Chapter 140 of the General Laws as amended by Chapter 361, of the Acts of 1949 and expires December 31, 2023, unless sooner suspended or revoked.

/s/ Jennifer Constable

/s/ Donna Pursel

/s/ Irwin Nesoff

/s/ Domenico Sestito

/s/ Greg Grey

} Licensing  
Authorities

Issued: January 01, 2023

NOT TRANSFERABLE

## **NANTASKET FLATTS**

### **Alcohol:**

Interior: Monday – Saturday 8:00am-1:00am and Sunday 10:00am-1:00am

Patio: 11:00am to 10:00pm and Vacated by 11:00pm

### **Common Vic:**

Sunday –Saturday 8:00am-1:00am

### **Entertainment:**

Interior: Sun-Sat 10:00am to 1:00am for a DJ and 3-piece acoustic and piped music

Exterior: Friday and Saturday from 11:00am to 8:00pm for acoustic only and Sunday from 12:00pm to 6:00pm for acoustic only

Owner to provide sound mitigation on the side of Atherton Road and along the back property line;  
Planters must be maintained

Entertainment on Monday holidays permitted on the deck during the same hours as a Sunday

### **Automatic Amusement:**

1 Pool Table





**TOWN OF HULL**  
**ALCOHOL LICENSE INFORMATION FORM**



NEW ☐ RENEWAL ☒ TRANSFER ☐  
AMENDMENT ☐ ☐ CHANGE OF MANAGER (COM)\*  
☐ CHANGE OF HOURS (COH)  
ONE DAY ☐ OTHER ☐  
Date: \_\_\_\_\_

Full Legal Name of Business: Lighthouse Enterprises, Inc  
Business Name (dba) if different: A Street Liquors  
FID of Licensee: \_\_\_\_\_ Address of Premises: 675 Nantasket Avenue  
Phone Number of Premises: 781 925 9421 Business Email: astreetliquors@gmail.com  
Business Mailing Address: ☒ Same as above  
Owner of Business: Richard C. Tibbetts, Nancy L. Tibbetts, Taylor F. Tibbetts  
Manager of Record: Taylor F. Tibbetts

\*Proposed Manager (must file COM with ABCC): \_\_\_\_\_

Phone: \_\_\_\_\_ Residential Address : \_\_\_\_\_

Applicant's (authorized) Signature [Signature] Date: 11/6/23  
By signing above you are verifying the accuracy of all information

License Class: ☒ Annual ☐ Seasonal ☐ One Day (1 + 1 Day[s]) Nature of Event: \_\_\_\_\_  
\*\*\* PROVIDE HRS BELOW \*\*\*  
TYPE OF LICENSE: (CHECK ONLY ONE) Location of Event: \_\_\_\_\_  
☐ Club ☒ Package Store ☐ Veteran's Club ☐ General On Premise ☐ Restaurant  
☐ Innholder ☐ Tavern ☐ Other (Specify) \_\_\_\_\_  
LICENSE CATEGORY:  
☒ All Alcohol ☐ Wine & Malt ☐ Malt Only ☐ Wine Only ☐ Wine & Malt with Cordials  
☐ Other (please specify) \_\_\_\_\_

**HOURS OF OPERATION - PLEASE READ CAREFULLY**

☒ NO CHANGES TO HOURS OF OPERATION FROM LAST YEAR: See Attached  
☐ REQUESTING CHANGE OF HOURS (complete ONLY if amending hours of operation from previous license period)  
☐ SEE ATTACHED HOURS (CHANGE OF HOURS)

**REQUESTING TO OPEN:**

Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

**REQUESTING TO CLOSE:**

Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

Seating Capacity: (if applicable) \_\_\_\_\_ Indoor \_\_\_\_\_ Outdoor \_\_\_\_\_ Total \_\_\_\_\_

Occupancy Number: \_\_\_\_\_

Entertainment License: ☐ Yes ☐ No

Request for New Year's Eve  
Extension?

☐ YES ☐ NO

# LICENSE

## ALCOHOLIC BEVERAGES

### THE LICENSING BOARD OF

The TOWN of HULL, MASSACHUSETTS  
HEREBY GRANTS A

## RETAIL PACKAGE GOODS STORE

License to Expose, Keep for Sale, and to Sell

All Kinds of Alcoholic Beverages

Not To Be Drunk on Premises

To: Lighthouse Enterprises, Inc. dba A Street Liquors, Taylor Tibbetts, Mgr.  
675 Nantasket Ave

On the following described premises: One story cement block building comprising of one front room for sales, rear for stock. Sales and storage in market proper. Two front entrances and two rear entrances.

This license is granted and accepted upon the express condition that the licensee shall, in all respects, conform to all the provisions of the Liquor Control Act, Chapter 138 of the General Laws, as amended, and any rules or regulations made thereunder by the licensing authorities. The license expires December 31, 2023, unless earlier suspended, cancelled or revoked.

IN TESTIMONY WHEREOF, the undersigned have hereunto affixed their official  
signatures this first day of January 2023

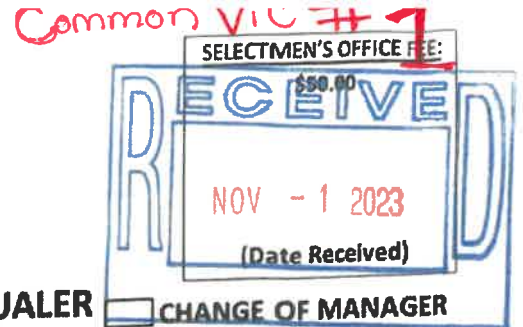
The Hours during which  
Alcoholic Beverages may be sold are  
From: Mon-Sat 8:00am-11:00pm  
Sun: 12:00pm-11:00pm  
Unless otherwise advised by  
Licensing Authority

Jennifer Constable  
Donna Pursel  
Irwin Nesoff  
Domenico Sestito  
Greg Grey

Licensing  
Authority



**TOWN OF HULL  
SELECT BOARD**  
253 Atlantic Avenue  
Tel: 781-925-2000



### APPLICATION FOR COMMON VICTUALER

NEW ☐ RENEWAL ☒ TRANSFER ☐ AMENDMENT ☐

#### SECTION 1 - APPLICANTS & BUSINESS INFORMATION

*I, the undersigned, duly authorized by the concern herein mentioned, hereby apply for a Common Victualer's License, in accordance with the provisions of Chapter 140 of the General Laws.*

Applicant's Full Legal Name: Erin Renae Herlihy  
Applicant's Legal Home Address: \_\_\_\_\_  
Applicant's Mailing Address (if different): \_\_\_\_\_  
Applicant's Home Telephone Number: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Applicant's E-Mail Addresses: Primary \_\_\_\_\_  
Applicant's (authorized) Signature: E.A. Date: 10/25/2023

*By signing above you are verify the accuracy of all information*

Full Legal Name of the Business: Gateway Donuts, LLC  
Full Street Address of the Business: 13 Bay St Hull, Ma  
Mailing Address of the Business (if different): \_\_\_\_\_  
Telephone Number of the Business (if different): 781-925-8721  
Current Owner/Manager of Record: Ricardo Abrantes  
E-Mail Addresses of the Business (if different): \_\_\_\_\_

FID of the License: \_\_\_\_\_

Do you own ☐ or lease ☒ the premises?  
If leasing, please provide the name and address of the lessor: John Bellas

#### SECTION 2 - LICENSE CLASS

(Check One)  
☒ Year Round Operation: (January 01-December 31) ☐ Seasonal Operation: (April 01 -November 30)

Expected date to open: \_\_\_\_\_ Expected date to close: \_\_\_\_\_

\*If you plan to open your business later than the beginning license date or plan to close earlier than the license end date please explain why: \_\_\_\_\_

#### SECTION 3 - HOURS OF OPERATION

☒ NO CHANGES

☐ SEE ATTACHED

OPEN: Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

CLOSE: Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

**\*SEE OTHER SIDE\***

**NEW APPLICANTS AND/OR AMENDMENTS TO EXISTING LICENSE (ONLY)**

LICENSE NUMBER

2023-18

FEE

\$50.00

THE COMMONWEALTH OF MASSACHUSETTS  
TOWN OF HULL

This is to Certify that Gateway Donuts LLC, dba Dunkin', Ricardo Abrantes, Mgr.

1 B Bay St

IS HEREBY GRANTED A

COMMON VICTUALLER'S LICENSE

In said Hull and at that place only and expires December thirty-first 20 23 unless sooner suspended or revoked for violation of the laws of the Commonwealth respecting the licensing of common victuallers. This license is issued in conformity with the authority granted to the licensing authorities by General Laws, Chapter 140, and amendments thereto.

In Testimony Whereof, the undersigned have hereunto affixed their official signatures.

Hours of Operation:

Monday through Sunday: 5:00 AM – 7:00 PM

/s/ Jennifer Constable

/s/ Donna Pursel

/s/ Irwin Nesoff

/s/ Domenico Sestito

/s/ Greg Grey

Licensing  
Authorities

ISSUED: January 1, 2023

(OVER)





**TOWN OF HULL  
SELECT BOARD**

253 Atlantic Avenue  
Tel: 781-925-2000

Common Vic # 2  
OCT 11 2023

(Date Received)

**APPLICATION FOR COMMON VICTUALER**

NEW ☐ RENEWAL ☐ TRANSFER ☐ AMENDMENT ☐

☐ CHANGE OF MANAGER  
☐ CHANGE OF HOURS  
☐ ONE DAY  
☐ OTHER \_\_\_\_\_

**SECTION 1 – APPLICANTS & BUSINESS INFORMATION**

*I, the undersigned, duly authorized by the concern herein mentioned, hereby apply for a Common Victualer's License, in accordance with the provisions of Chapter 140 of the General Laws.*

Applicant's Full Legal Name: Raul Vusi

Applicant's Legal Home Address: \_\_\_\_\_

Applicant's Mailing Address (if different): \_\_\_\_\_

Applicant's Home Telephone Number: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Applicant's E-Mail Addresses: Primary \_\_\_\_\_ Secondary \_\_\_\_\_

Applicant's (authorized) Signature: [Signature] Date: 11-20-23

*By signing above you are verifying the accuracy of all information*

Full Legal Name of the Business: Dylan's Pizza

Full Street Address of the Business: 14 Nantasket Ave

Mailing Address of the Business (if different): \_\_\_\_\_

Telephone Number of the Business (if different): 781.762.1282

Current Owner/Manager of Record: Raul Vusi

E-Mail Addresses of the Business (if different): \_\_\_\_\_

FID of the License: \_\_\_\_\_

Do you own ☐ or lease ☒ the premises?

If leasing, please provide the name and address of the lessor: \_\_\_\_\_

**SECTION 2 – LICENSE CLASS**

(Check One)

☒ Year Round Operation: (January 01-December 31) ☐ Seasonal Operation: (April 01 –November 30)

Expected date to open: \_\_\_\_\_ Expected date to close: \_\_\_\_\_

\*If you plan to open your business later than the beginning license date or plan to close earlier than the license end date please explain why: \_\_\_\_\_

**SECTION 3 - HOURS OF OPERATION**

☐ NO CHANGES

☐ SEE ATTACHED

OPEN: Mon: 11-10 Tues: 11-10 Wed: 11 Thurs: 11 Fri: 11 Sat: 11 Sun: 11

CLOSE: Mon: 10 Tues: 10 Wed: 10 Thurs: 10 Fri: 10 Sat: 10 Sun: 9

**\*SEE OTHER SIDE\***

**NEW APPLICANTS AND/OR AMENDMENTS TO EXISTING LICENSE (ONLY)**

**LICENSE NUMBER**

2023-31

**FEE**

\$50.00

THE COMMONWEALTH OF MASSACHUSETTS  
TOWN OF HULL

This is to Certify that Dylan's Pizza Inc, Raul G. Yubi

14 Nantasket Ave

IS HEREBY GRANTED A

**COMMON VICTUALLER'S LICENSE**

In said Hull and at that place only and expires December thirty-first 20 23 unless sooner suspended or revoked for violation of the laws of the Commonwealth respecting the licensing of common victuallers. This license is issued in conformity with the authority granted to the licensing authorities by General Laws, Chapter 140, and amendments thereto.

In Testimony Whereof, the undersigned have hereunto affixed their official signatures.

**Hours of Operation:**

11:00am-10:00pm Mon-Sat

11:00am-9:00pm Sunday

/s/ Jennifer Constable

/s/ Donna Pursel

/s/ Irwin Nesoff

/s/ Domenico Sestito

/s/Greg Grey

Licensing  
Authorities

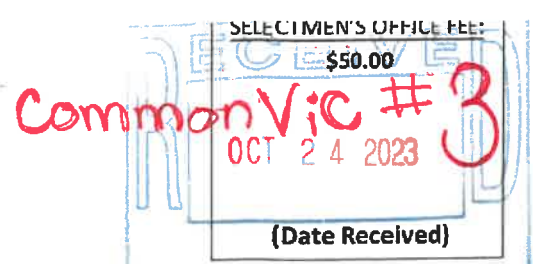
(OVER)

ISSUED: January 1, 2023





**TOWN OF HULL  
SELECT BOARD**  
253 Atlantic Avenue  
Tel: 781-925-2000



**APPLICATION FOR COMMON VICTUALER**

NEW ☐ RENEWAL ☒ TRANSFER ☐ AMENDMENT ☐

☐ CHANGE OF MANAGER  
☐ CHANGE OF HOURS  
☐ ONE DAY  
☐ OTHER \_\_\_\_\_

**SECTION 1 – APPLICANTS & BUSINESS INFORMATION**

*I, the undersigned, duly authorized by the concern herein mentioned, hereby apply for a Common Victualer's License, in accordance with the provisions of Chapter 140 of the General Laws.*

Applicant's Full Legal Name: Mokana Mai  
Applicant's Legal Home Address: \_\_\_\_\_  
Applicant's Mailing Address (if different): \_\_\_\_\_  
Applicant's Home Telephone Number: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Applicant's E-Mail Addresses: Primary \_\_\_\_\_ Secondary \_\_\_\_\_  
Applicant's (authorized) Signature x Mokana Mai Date: 9/25/23

*By signing above you are verify the accuracy of all information*

Full Legal Name of the Business: HULL JADE RESTAURANT  
Full Street Address of the Business: 516 NANTUCKET AVE HULL MA 02045  
Mailing Address of the Business (if different): \_\_\_\_\_  
Telephone Number of the Business (if different): 781 925 9125  
Current Owner/Manager of Record: Mokana Mai  
E-Mail Addresses of the Business (if different): \_\_\_\_\_  
FID of the License: \_\_\_\_\_

Do you own ☐ or lease ☒ the premises?

If leasing, please provide the name and address of the lessor: TUAN LE, TP KALL PROPERTY

**SECTION 2 – LICENSE CLASS**

(Check One)

☒ Year Round Operation: (January 01-December 31) ☐ Seasonal Operation: (April 01 –November 30)

Expected date to open: \_\_\_\_\_ Expected date to close: \_\_\_\_\_

\*If you plan to open your business later than the beginning license date or plan to close earlier than the license end date please explain why: \_\_\_\_\_

**SECTION 3 - HOURS OF OPERATION**

☐ NO CHANGES

☐ SEE ATTACHED

OPEN: Mon: 11:30am Tues: 11:30am Wed: 11:30am Thurs: 11:30am Fri: 11:30am Sat: 11:30am Sun: 12:30pm

CLOSE: Mon: 9:00pm Tues: 9:00pm Wed: 9:00pm Thurs: 9:00pm Fri: 10:00pm Sat: 10:00pm Sun: 9:00pm

**\*SEE OTHER SIDE\***

**NEW APPLICANTS AND/OR AMENDMENTS TO EXISTING LICENSE (ONLY)**

## SECTION 4 – TO BE COMPLETED BY NEW APPLICANTS OR AMENDMENTS ONLY

**\*Note\***: A PUBLIC HEARING MAY BE REQUIRED. PLEASE INDICATE WHAT CHANGES MADE BELOW:

Is your kitchen fully equipped to conduct a business \_\_\_\_\_ Size of Kitchen \_\_\_\_\_

Sink \_\_\_\_\_ Hot and Cold Water \_\_\_\_\_ Is there a Stove ☐

Gas Burners \_\_\_\_\_ Electric Burners \_\_\_\_\_ Refrigerators \_\_\_\_\_

Bar \_\_\_\_\_ Lunch Counter \_\_\_\_\_ Tables # \_\_\_\_ / \_\_\_\_ Booths # \_\_\_\_ / \_\_\_\_  
(no. of seats) (no. of seats) (no. of seats) (no. of seats)

Seating Capacity? Indoor \_\_\_\_\_ Outdoor \_\_\_\_\_ TOTAL Seating Capacity \_\_\_\_\_

Are there Restrooms for - Men ☐ Women ☐ Unisex ☐

### AMENDMENTS

☐ REQUESTING CHANGE OF HOURS

☐ SEE ATTACHED

**New Proposed Hours of Operation:**

**OPEN:** Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

**CLOSE:** Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

**Applicant's (authorized) Signature** \_\_\_\_\_

*By signing above you are verify the accuracy of all information*

☐ REQUESTING CHANGE OF MANAGER

Proposed Manager \_\_\_\_\_

Home Address \_\_\_\_\_

Email Address \_\_\_\_\_ Cell Phone \_\_\_\_\_

**Owner/Manager's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

*By signing above you are verify the accuracy of all information*

MGL 140 § 4 "...licenses shall expire on December thirty-first of each year; but they may be granted during December, to take effect on January first following."

LICENSE NUMBER 2023-23

FEE \$50.00

THE COMMONWEALTH OF MASSACHUSETTS  
TOWN OF HULL

This is to Certify that Mai and Mai, Inc. dba Hull Jade. Mokang Mai, President

516 Nantasket Ave

IS HEREBY GRANTED A

**COMMON VICTUALLER'S LICENSE**

In said Hull, and at that place only and expires December thirty-first 20 23 unless sooner suspended or revoked for violation of the laws of the Commonwealth respecting the licensing of common victuallers. This license is issued in conformity with the authority granted to the licensing authorities by General Laws, Chapter 140, and amendments thereto.

In Testimony Whereof, the undersigned have hereunto affixed their official signatures.

Hours of Operation:

Open: Mon-Sat 11:30am; Sun: 12:30pm

Close: 9:00pm Sun-Thurs; 10:00pm Fri-Sat

/s/ Jennifer Constable

/s/ Donna Pursel

/s/ Irwin Nesoff

/s/ Domenico Sestito

/s/Greg Grey

Licensing  
Authorities

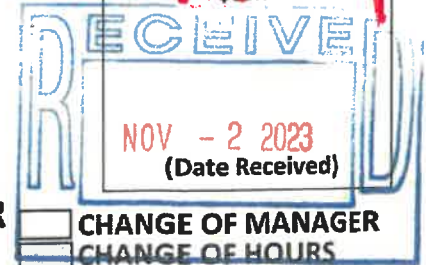
(OVER)

ISSUED: January 01, 2023



**TOWN OF HULL  
SELECT BOARD**  
253 Atlantic Avenue  
Tel: 781-925-2000

Common Virtualer  
SELECTMENTS OFFICE FEE: \$50.00



### APPLICATION FOR COMMON VICTUALER

NEW ☐ RENEWAL ☒ TRANSFER ☐ AMENDMENT ☐

☐ CHANGE OF MANAGER  
☐ CHANGE OF HOURS  
☐ ONE DAY  
☐ OTHER \_\_\_\_\_

#### SECTION 1 – APPLICANTS & BUSINESS INFORMATION

I, the undersigned, duly authorized by the concern herein mentioned, hereby apply for a Common Victualer's License, in accordance with the provisions of Chapter 140 of the General Laws.

Applicant's Full Legal Name: L STREET PIZZA COMPANY inc / MAROUN habchy  
Applicant's Legal Home Address: \_\_\_\_\_  
Applicant's Mailing Address (if different): \_\_\_\_\_  
Applicant's Home Telephone Number: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Applicant's E-Mail Addresses: Primary \_\_\_\_\_ Secondary \_\_\_\_\_  
Applicant's (authorized) Signature ME Date: 10-6-2023

By signing above you are verify the accuracy of all information

Full Legal Name of the Business: L STREET PIZZA COMPANY inc  
Full Street Address of the Business: 754 NANTASKET AVE Hull MA 02045  
Mailing Address of the Business (if different): \_\_\_\_\_  
Telephone Number of the Business (if different): 781 925 9009  
Current Owner/Manager of Record: MAROUN Habchy  
E-Mail Addresses of the Business (if different): \_\_\_\_\_  
FID of the License: \_\_\_\_\_

Do you own ☒ or lease ☐ the premises?  
If leasing, please provide the name and address of the lessor: \_\_\_\_\_

#### SECTION 2 – LICENSE CLASS

(Check One)

☒ Year Round Operation: (January 01-December 31) ☐ Seasonal Operation: (April 01 –November 30)

Expected date to open: \_\_\_\_\_ Expected date to close: \_\_\_\_\_

\*If you plan to open your business later than the beginning license date or plan to close earlier than the license end date please explain why: \_\_\_\_\_

#### SECTION 3 - HOURS OF OPERATION

☒ NO CHANGES

☐ SEE ATTACHED

OPEN: Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

CLOSE: Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

**\*SEE OTHER SIDE\***

**NEW APPLICANTS AND/OR AMENDMENTS TO EXISTING LICENSE (ONLY)**

## SECTION 4 – TO BE COMPLETED BY NEW APPLICANTS OR AMENDMENTS ONLY

**\*Note\*:** A PUBLIC HEARING MAY BE REQUIRED. PLEASE INDICATE WHAT CHANGES MADE BELOW:

Is your kitchen fully equipped to conduct a business \_\_\_\_\_ Size of Kitchen \_\_\_\_\_

Sink \_\_\_\_\_ Hot and Cold Water \_\_\_\_\_ Is there a Stove ☐

Gas Burners \_\_\_\_\_ Electric Burners \_\_\_\_\_ Refrigerators \_\_\_\_\_

Bar \_\_\_\_\_ Lunch Counter \_\_\_\_\_ Tables # \_\_\_\_ / \_\_\_\_ Booths # \_\_\_\_ / \_\_\_\_  
(no. of seats) (no. of seats) (no. of seats) (no. of seats)

Seating Capacity? Indoor \_\_\_\_\_ Outdoor \_\_\_\_\_ TOTAL Seating Capacity \_\_\_\_\_

Are there Restrooms for - Men ☐ Women ☐ Unisex ☐

### AMENDMENTS

☐ REQUESTING CHANGE OF HOURS

☐ SEE ATTACHED

New Proposed Hours of Operation:

OPEN: Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

CLOSE: Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

Applicant's (authorized) Signature \_\_\_\_\_

*By signing above you are verify the accuracy of all information*

☐ REQUESTING CHANGE OF MANAGER

Proposed Manager \_\_\_\_\_

Home Address \_\_\_\_\_

Email Address \_\_\_\_\_ Cell Phone \_\_\_\_\_

Owner/Manager's Signature \_\_\_\_\_ Date \_\_\_\_\_

*By signing above you are verify the accuracy of all information*

MGL 140 § 4 "...licenses shall expire on December thirty-first of each year; but they may be granted during December, to take effect on January first following."

**LICENSE NUMBER**2023-17**FEE**\$50.00**THE COMMONWEALTH OF MASSACHUSETTS  
TOWN OF HULL**This is to Certify that L Street Pizza Company Inc., dba L Street Pizza Maroun Habchy, Mgr.754 Nantasket Ave

IS HEREBY GRANTED A

**COMMON VICTUALLER'S LICENSE**

In said Hull and at that place only and expires December thirty-first 20 23 unless sooner suspended or revoked for violation of the laws of the Commonwealth respecting the licensing of common victuallers. This license is issued in conformity with the authority granted to the licensing authorities by General Laws, Chapter 140, and amendments thereto.

In Testimony Whereof, the undersigned have hereunto affixed their official signatures.

**Hours of Operation:**

Open: 11:00am Sun-Sat

Close 10:00pm Fri-Sat; 9:00pm Sun-Thurs

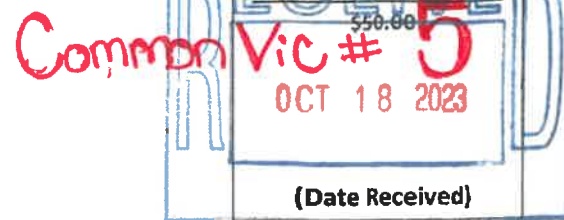
/s/ Jennifer Constable/s/ Donna Pursel/s/ Irwin Nesoff/s/ Domenico Sestito/s/Greg GrevLicensing  
AuthoritiesISSUED: January 1, 2023

(OVER)





**TOWN OF HULL  
SELECT BOARD**  
253 Atlantic Avenue  
Tel: 781-925-2000



### APPLICATION FOR COMMON VICTUALER

NEW ☐ RENEWAL ☒ TRANSFER ☐ AMENDMENT ☐

☐ CHANGE OF MANAGER  
☐ CHANGE OF HOURS  
☐ ONE DAY  
☐ OTHER \_\_\_\_\_

#### SECTION 1 – APPLICANTS & BUSINESS INFORMATION

*I, the undersigned, duly authorized by the concern herein mentioned, hereby apply for a Common Victualer's License, in accordance with the provisions of Chapter 140 of the General Laws.*

Applicant's Full Legal Name: Richard Rozworski

Applicant's Legal Home Address: \_\_\_\_\_

Applicant's Mailing Address (if different): \_\_\_\_\_

Applicant's Home Telephone Number: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Applicant's E-Mail Addresses: Primary chaz@msu.com Secondary \_\_\_\_\_

Applicant's (authorized) Signature [Signature] Date: 12-19-23

*By signing above you are verify the accuracy of all information*

Full Legal Name of the Business: Antarctic Beach Cafe

Full Street Address of the Business: 512 Atlantic Ave

Mailing Address of the Business (if different): \_\_\_\_\_

Telephone Number of the Business (if different): 781 925 9099

Current Owner/Manager of Record: Richard Rozworski

E-Mail Addresses of the Business (if different): \_\_\_\_\_

FID of the License: \_\_\_\_\_

Do you own ☐ or lease ☒ the premises?

If leasing, please provide the name and address of the lessor: HL Group

#### SECTION 2 – LICENSE CLASS

(Check One)

☒ Year Round Operation: (January 01-December 31) ☐ Seasonal Operation: (April 01 –November 30)

Expected date to open: \_\_\_\_\_ Expected date to close: \_\_\_\_\_

\*If you plan to open your business later than the beginning license date or plan to close earlier than the license end date please explain why: \_\_\_\_\_

#### SECTION 3 - HOURS OF OPERATION

☒ NO CHANGES

☐ SEE ATTACHED

OPEN: Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

CLOSE: Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

**\*SEE OTHER SIDE\***

**NEW APPLICANTS AND/OR AMENDMENTS TO EXISTING LICENSE (ONLY)**

## SECTION 4 – TO BE COMPLETED BY NEW APPLICANTS OR AMENDMENTS ONLY

**\*Note\***: A PUBLIC HEARING MAY BE REQUIRED. PLEASE INDICATE WHAT CHANGES MADE BELOW:

Is your kitchen fully equipped to conduct a business \_\_\_\_\_ Size of Kitchen \_\_\_\_\_

Sink \_\_\_\_\_ Hot and Cold Water \_\_\_\_\_ Is there a Stove ☐

Gas Burners \_\_\_\_\_ Electric Burners \_\_\_\_\_ Refrigerators \_\_\_\_\_

Bar \_\_\_\_\_ Lunch Counter \_\_\_\_\_ Tables # \_\_\_\_ / \_\_\_\_ Booths # \_\_\_\_ / \_\_\_\_  
(no. of seats) (no. of seats) (no. of seats) (no. of seats)

Seating Capacity? Indoor \_\_\_\_\_ Outdoor \_\_\_\_\_ TOTAL Seating Capacity \_\_\_\_\_

Are there Restrooms for - Men ☐ Women ☐ Unisex ☐

### AMENDMENTS

☐ REQUESTING CHANGE OF HOURS

☐ SEE ATTACHED

**New Proposed Hours of Operation:**

**OPEN:** Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

**CLOSE:** Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

**Applicant's (authorized) Signature** \_\_\_\_\_

*By signing above you are verify the accuracy of all information*

☐ REQUESTING CHANGE OF MANAGER

Proposed Manager \_\_\_\_\_

Home Address \_\_\_\_\_

Email Address \_\_\_\_\_ Cell Phone \_\_\_\_\_

**Owner/Manager's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

*By signing above you are verify the accuracy of all information*

MGL 140 § 4 "...licenses shall expire on December thirty-first of each year; but they may be granted during December, to take effect on January first following."

**LICENSE NUMBER**

2023-15

**FEE**

\$50.00

THE COMMONWEALTH OF MASSACHUSETTS  
TOWN OF HULL

This is to Certify that Nantasket Beach Café dba Saltwater Diner, Richard Bornstein Mgr.

512 Nantasket Ave

IS HEREBY GRANTED A

**COMMON VICTUALLER'S LICENSE**

In said Hull and at that place only and expires December thirty-first 20 23 unless sooner suspended or revoked for violation of the laws of the Commonwealth respecting the licensing of common victuallers. This license is issued in conformity with the authority granted to the licensing authorities by General Laws, Chapter 140, and amendments thereto.

In Testimony Whereof, the undersigned have hereunto affixed their official signatures.

Hours of Operation:

**Mondays: 8:00 AM – 2:00 PM**

/s/ Jennifer Constable

/s/ Donna Pursel

/s/ Irwin Nesoff

/s/ Domenico Sestito

/s/ Greg Grev

} Licensing  
Authorities

ISSUED: January 1, 2023

(OVER)



**TOWN OF HULL  
SELECT BOARD**

**253 Atlantic Avenue  
Tel: 781-925-2000**



**APPLICATION FOR COMMON VICTUALER**

**NEW** ☐ **RENEWAL** ☒ **TRANSFER** ☐ **AMENDMENT** ☐

☐ **CHANGE OF MANAGER**  
☐ **CHANGE OF HOURS**  
☐ **ONE DAY**  
☐ **OTHER**

**SECTION 1 – APPLICANTS & BUSINESS INFORMATION**

*I, the undersigned, duly authorized by the concern herein mentioned, hereby apply for a Common Victualer's License, in accordance with the provisions of Chapter 140 of the General Laws.*

**Applicant's Full Legal Name:** Paula M. Cofman  
**Applicant's Legal Home Address:** \_\_\_\_\_  
**Applicant's Mailing Address (if different):** \_\_\_\_\_  
**Applicant's Home Telephone Number:** \_\_\_\_\_  
**Applicant's E-Mail Addresses: Primary** \_\_\_\_\_  
**Applicant's (authorized) Signature** [Signature] **Date:** 10/31/23

*By signing above you are verify the accuracy of all information*

**Full Legal Name of the Business:** TO Dine For Inc.  
**Full Street Address of the Business:** 5-18520 Nantasket Ave Hull  
**Mailing Address of the Business (if different):** \_\_\_\_\_  
**Telephone Number of the Business (if different):** 781-773-1678  
**Current Owner/Manager of Record:** Paula Cofman Ratca Cardoso  
**E-Mail Addresses of the Business (if different):** \_\_\_\_\_  
**FID of the License:** \_\_\_\_\_

Do you own ☐ or lease ☒ the premises?

If leasing, please provide the name and address of the lessor: HL Group

**SECTION 2 – LICENSE CLASS**

(Check One)

☒ **Year Round Operation: (January 01-December 31)** ☐ **Seasonal Operation: (April 01 –November 30)**

**Expected date to open:** \_\_\_\_\_ **Expected date to close:** \_\_\_\_\_

**\*If you plan to open your business later than the beginning license date or plan to close earlier than the license end date please explain why:** \_\_\_\_\_

**SECTION 3 - HOURS OF OPERATION**

☒ **NO CHANGES**

☐ **SEE ATTACHED**

**OPEN:** Mon: closed Tues: 10-5 Wed: 10-3 Thurs: 10-5 Fri: 10-5 Sat: 10-4 Sun: \_\_\_\_\_

**CLOSE:** Mon: ✓ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: ✓

**\*SEE OTHER SIDE\***

**NEW APPLICANTS AND/OR AMENDMENTS TO EXISTING LICENSE (ONLY)**

## SECTION 4 – TO BE COMPLETED BY NEW APPLICANTS OR AMENDMENTS ONLY

**\*Note\*:** A PUBLIC HEARING MAY BE REQUIRED. PLEASE INDICATE WHAT CHANGES MADE BELOW:

Is your kitchen fully equipped to conduct a business \_\_\_\_\_ Size of Kitchen \_\_\_\_\_

Sink \_\_\_\_\_ Hot and Cold Water \_\_\_\_\_ Is there a Stove ☐

Gas Burners \_\_\_\_\_ Electric Burners \_\_\_\_\_ Refrigerators \_\_\_\_\_

Bar \_\_\_\_\_ Lunch Counter \_\_\_\_\_ Tables # \_\_\_\_ / \_\_\_\_ Booths # \_\_\_\_ / \_\_\_\_  
(no. of seats) (no. of seats) (no. of seats) (no. of seats)

Seating Capacity? Indoor \_\_\_\_\_ Outdoor \_\_\_\_\_ TOTAL Seating Capacity \_\_\_\_\_

Are there Restrooms for - Men ☐ Women ☐ Unisex ☐

### AMENDMENTS

☐ REQUESTING CHANGE OF HOURS

☐ SEE ATTACHED

New Proposed Hours of Operation:

OPEN: Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

CLOSE: Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_ Sun: \_\_\_\_\_

Applicant's (authorized) Signature \_\_\_\_\_

*By signing above you are verify the accuracy of all information*

☐ REQUESTING CHANGE OF MANAGER

Proposed Manager \_\_\_\_\_

Home Address \_\_\_\_\_

Email Address \_\_\_\_\_ Cell Phone \_\_\_\_\_

Owner/Manager's Signature \_\_\_\_\_ Date \_\_\_\_\_

*By signing above you are verify the accuracy of all information*

MGL 140 § 4 "...licenses shall expire on December thirty-first of each year; but they may be granted during December, to take effect on January first following."

LICENSE NUMBER 2023-24

FEE \$50.00

THE COMMONWEALTH OF MASSACHUSETTS  
TOWN OF HULL

This is to Certify that Paula Coffman and Rafca Cardoos dba To Dine For, Paula Coffman, Mgr.

518 Nantasket Ave

IS HEREBY GRANTED A

COMMON VICTUALLER'S LICENSE

In said Hull and at that place only and expires December thirty-first 20 23 unless sooner suspended or revoked for violation of the laws of the Commonwealth respecting the licensing of common victuallers. This license is issued in conformity with the authority granted to the licensing authorities by General Laws, Chapter 140, and amendments thereto.

In Testimony Whereof, the undersigned have hereunto affixed their official signatures.

Hours of Operation:

**Tuesday through Saturday: 10:00 AM – 5:00 PM**

/s/ Jennifer Constable

/s/ Donna Pursel

/s/ Irwin Nesoff

/s/ Domenico Sestito

/s/Greg Grey

Licensing  
Authorities

ISSUED: January 01, 2023

(OVER)



Livery #1

APPLICATION FOR LIVERY LICENSE

FEE: \$100.00

DATE: Nov 9, 2023

To the Select Board of the Town of Hull:

The undersigned hereby applies for a license to operate one motor vehicle in the Town of Hull for the purpose of carrying passengers over the route and at the rates of fare hereinafter set forth and hereby agrees to observe the orders, rules and regulations adopted and established by the Select Board relating thereto; and to file the bond and obtain the other licenses required by said orders, rules and regulations.

Name Deborah A Rock Camen Arroyo

Address 71 Kenberma St

Telephone No.

FID or SS#

Email Address

Highway Terminal and Route Any where

Schedule of Operation 24 hour Airport service

DESCRIPTION OF VEHICLE TO BE OPERATED:

Make: Honda Year 2016 Model CRV

Maker's No. Engine No. 2C4C1BG9FR589160

Seating Capacity 5

Signature of Applicant; [Signature]



Lic. No.: 2023- 10

Expires: December 31, 2023  
Fee \$100.00 (per vehicle)

**THE COMMONWEALTH OF MASSACHUSETTS**  
**LIVERY LICENSE**

*This is to certify that a License has been granted to*

**CARMEN L. ARROYO & DEBORAH A. ROCK dba BAYSIDE COACH**  
*of*  
**71 Kenberma Street, Hull, Massachusetts**

*To operate (1) one Vehicle (2016-Honda CRV 2C4C1BG9FR589160) within the  
Town limits for the transporting of passengers for hire.*

**Issued: January 01, 2023**

/s/ Jennifer Constable  
/s/ Donna Pursel  
/s/ Irwin Nesoff  
/s/ Domenico Sestito  
/s/ Greg Grey

} Licensing  
Authority

THIS CARD MUST BE CONSPICUOUSLY POSTED INSIDE THE VEHICLE

Livery #2

APPLICATION FOR A LIVERY BADGE

FEE: \$10.00

DATE: Nov 9, 2023

To the Town of Hull Licensing Authority:

The undersigned hereby makes application for a Hackney\Livery Badge in accordance with the Code of the Town of Hull, Chapter 108 and M.G.L. Chapter 40, section 22.

Name Deborah A Rock

Address 71 Kenberma St

Date of Birth

Telephone No.

Registry of Motor Vehicle Driver's License No.

Expiration Date

S.S. #

Owner of Hackney/Livery Vehicle Deborah A Rock

Owner's Address 71 Kenberma St

Email Address rockdebbre7@gmail.com

Signature of Applicant: D Rock



Lic. No.: 2023-3

Expires: December 31, 2023

**TOWN OF HULL**

**LICENSE TO OPERATE – *LIVERY BADGE***

*This is to certify that*

*Deborah A. Rock*

*of*

*71 Kenberma Street, Hull, Massachusetts*

*has been duly licensed to operate a livery for BAYSIDE COACH by the licensing  
authorities of the Town of Hull.*

***SELECT BOARD  
TOWN OF HULL***

---

***Countersigned by Operator***

Livery # 3

APPLICATION FOR A LIVERY BADGE

FEE: \$10.00

DATE: Nov 9, 2023

To the Town of Hull Licensing Authority:

The undersigned hereby makes application for a Hackney Livery Badge in accordance with the Code of the Town of Hull, Chapter 108 and M.G.L. Chapter 40, section 22.

Name Carmen L Arroyo

Address 71 Kenberma St

Date of Birth

Telephone No.

Registry of Motor Vehicle Driver's License No. \_\_\_\_\_

Expiration Date

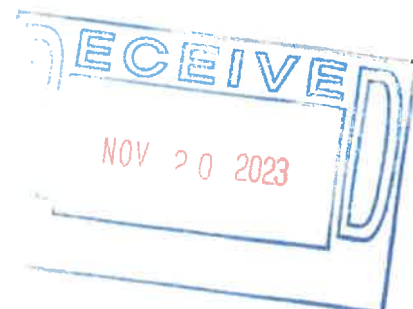
S.S. #

Owner of Hackney/Livery Vehicle Delorah A Back

Owner's Address 71 Kenberma St

Email Address \_\_\_\_\_

Signature of Applicant: Carmen Arroyo



Lic. No.: 2023-4

Expires: December 31, 2023

**TOWN OF HULL**

**LICENSE TO OPERATE – *LIVERY BADGE***

*This is to certify that*  
**CARMEN L. ARROYO**  
*of*

**71 Kenberma Street, Hull, Massachusetts**

*has been duly licensed to operate a livery for BAYSIDE COACH by the licensing  
authorities of the Town of Hull.*

**SELECT BOARD  
TOWN OF HULL**

**Countersigned by Operator**



Livery #4

## APPLICATION FOR LIVERY LICENSE

FEE: \$100.00

DATE: 11/24/23

### To the Select Board of the Town of Hull:

The undersigned hereby applies for a license to operate one motor vehicle in the Town of Hull for the purpose of carrying passengers over the route and at the rates of fare hereinafter set forth and hereby agrees to observe the orders, rules and regulations adopted and established by the Select Board relating thereto; and to file the bond and obtain the other licenses required by said orders, rules and regulations.

Name Richard E. Laws

Address 58 Lynn Ave Hull, MA

Telephone No. 781-925-5466 FID or SS# \_\_\_\_\_

Email Address seaportlivery@verizon.net

Highway Terminal and Route Hull to anywhere

Schedule of Operation anytime

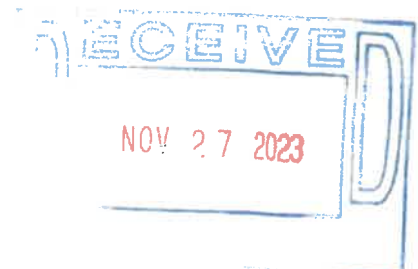
### DESCRIPTION OF VEHICLE TO BE OPERATED:

Make: Chev Year 2015 Model SUV

(VIN) 1GNSKTKC2FR659726  
Maker's No. \_\_\_\_\_ Engine No. same

Seating Capacity 7

Signature of Applicant: Richard E. Laws



Lic. No.: 2023- 6

Expires: December 31, 2023

Fee \$100.00 (per vehicle)

**THE COMMONWEALTH OF MASSACHUSETTS**  
**LIVERY LICENSE**

*This is to certify that a License has been granted to*

**RICHARD E. LAWS dba SEAPORT LIVERY SERVICE**  
*of*

**58 Lynn Ave, Hull, Massachusetts 02045**

***To operate (1) one Vehicle (2015 Chevrolet Suburban 1GNSKJKC2FR659726) within  
the Town limits for the transporting of passengers for hire.***

/s/ Jennifer Constable

/s/ Donna Pursel

/s/ Irwin Nesoff

/s/ Domenico Sestito

/s/ Greg Grey

Licensing  
Authority

THIS CARD MUST BE CONSPICUOUSLY POSTED INSIDE THE VEHICLE

## APPLICATION FOR LIVERY LICENSE

FEE: \$100.00

DATE: 11/24/23

### To the Select Board of the Town of Hull:

The undersigned hereby applies for a license to operate one motor vehicle in the Town of Hull for the purpose of carrying passengers over the route and at the rates of fare hereinafter set forth and hereby agrees to observe the orders, rules and regulations adopted and established by the Select Board relating thereto; and to file the bond and obtain the other licenses required by said orders, rules and regulations.

Name Richard E. Laws

Address 58 Lynn Ave. Hull, MA

Telephone No. 781-925-5466 FID or SS#     

Email Address scaportlivery@verizon.net

Highway Terminal and Route Hull to anywhere

Schedule of Operation anytime

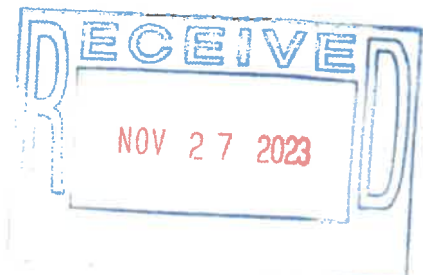
### DESCRIPTION OF VEHICLE TO BE OPERATED:

Make: KIA Year 2022 Model Carnival

(VIN) KNDNB4H39N6190214  
Maker's No.      Engine No. same

Seating Capacity 8

Signature of Applicant; Richard E. Laws



Lic. No.: 2023- 5

Expires: December 31, 2023

Fee \$100.00 (per vehicle)

**THE COMMONWEALTH OF MASSACHUSETTS**  
**LIVERY LICENSE**

*This is to certify that a License has been granted to*

**RICHARD E. LAWS dba SEAPORT LIVERY SERVICE**  
*of*

**58 Lynn Ave, Hull, Massachusetts 02045**

*To operate (1) one Vehicle (2022 Kia Carnival KNDNB4H39N6190214) within the  
Town limits for the transporting of passengers for hire.*

/s/ Jennifer Constable

/s/ Donna Pursel

/s/ Irwin Nesoff

/s/ Domenico Sestito

/s/ Greg Grey

Licensing  
Authority

THIS CARD MUST BE CONSPICUOUSLY POSTED INSIDE THE VEHICLE

## APPLICATION FOR LIVERY LICENSE

FEE: \$100.00

DATE: 11/24/23

### To the Select Board of the Town of Hull:

The undersigned hereby applies for a license to operate one motor vehicle in the Town of Hull for the purpose of carrying passengers over the route and at the rates of fare hereinafter set forth and hereby agrees to observe the orders, rules and regulations adopted and established by the Select Board relating thereto; and to file the bond and obtain the other licenses required by said orders, rules and regulations.

Name Richard E. Laws

Address 58 Lynn Ave Hull MA

Telephone No. 781-925-5466 FID or SS#       

Email Address seaportlivery@verizon.net

Highway Terminal and Route Hull to anywhere

Schedule of Operation anytime

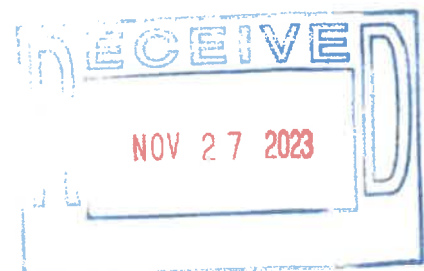
### DESCRIPTION OF VEHICLE TO BE OPERATED:

Make: KIA Year 2023 Model Sportage

(VIN) KNDPVCAGDP7024085 Engine No. same

Seating Capacity 5

Signature of Applicant: Richard E. Laws



Lic. No.: 2023- 8

Expires: December 31, 2023

Fee \$100.00 (per vehicle)

**THE COMMONWEALTH OF MASSACHUSETTS**

**LIVERY LICENSE**

*This is to certify that a License has been granted to*

**RICHARD E. LAWS dba SEAPORT LIVERY SERVICE**

*of*

**58 Lynn Ave, Hull, Massachusetts 02045**

***To operate (1) one Vehicle (2023 Kia Sportage KNDPVCAG0P7024085) within the Town limits for the transporting of passengers for hire.***

/s/ Jennifer Constable

/s/ Donna Pursel

/s/ Irwin Nesoff

/s/ Domenico Sestito

/s/ Greg Grey

Licensing  
Authority

THIS CARD MUST BE CONSPICUOUSLY POSTED INSIDE THE VEHICLE



## APPLICATION FOR A LIVERY BADGE

**FEE: \$10.00**

**DATE:** 11/24/23

### To the Town of Hull Licensing Authority:

The undersigned hereby makes application for a Hackney\Livery Badge in accordance with the Code of the Town of Hull, Chapter 108 and M.G.L. Chapter 40, section 22.

**Name** Richard E. Laws

**Address** 58 Lynn Ave Hull MA

**Date of Birth** \_\_\_\_\_ **Telephone No.** 781-925-5466

**Registry of Motor Vehicle Driver's License No.** \_\_\_\_\_

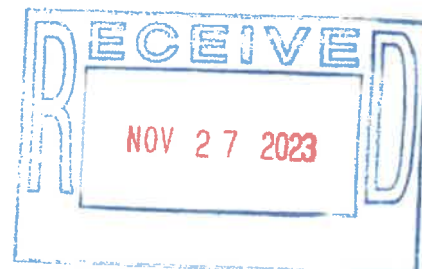
**Expiration Date** \_\_\_\_\_ **S.S. #** \_\_\_\_\_

**Owner of Hackney/Livery Vehicle** Richard E. Laws

**Owner's Address** 58 Lynn Ave Hull MA

**Email Address** seaportlivery@verizon.net

**Signature of Applicant:** Richard E. Laws



Lic. No.: 2023-7

Expires: December 31, 2023

**TOWN OF HULL**

**LICENSE TO OPERATE – *LIVERY BADGE***

*This is to certify that*

***RICHARD E. LAWS***

*of*

***58 Lynn Ave, Hull, Massachusetts***

***has been duly licensed to operate a livery for SEAPORT LIVERY SERVICE by the  
licensing authorities of the Town of Hull.***

***SELECT BOARD  
TOWN OF HULL***

---

***Countersigned by Operator***



**TOWN OF HULL**  
**Select Board**  
**253 Atlantic Ave**  
**781-925-2000**

Lodging # 1

SELECT BOARD'S OFFICE

USE

(Date Received)

**APPLICATION FOR LODGING HOUSE LICENSE**

**FEE \$50.00**

**NEW** \_\_\_\_\_ **RENEWAL** X **TRANSFER** \_\_\_\_\_ **AMENDMENT** \_\_\_\_\_ **CHANGE OF MANAGER** \_\_\_\_\_

**SECTION 1 – APPLICANTS & BUSINESS INFORMATION**

The undersigned hereby makes application for a Lodging House License in accordance with the provisions of M.G.L. Chapter 140

Applicant/Corporation/LLC Impenetrable Hull LLC  
d/b/a if Applicable The Nantascot Lodging House  
Address of Lodging House 475 Nantasket Ave Hull, MA 02045  
Lodging House Email Address info@newenglandpropertyrentals.com  
Lodging House Phone Number 617 649 6948  
Description of Premises 14 Room Residential Rooming House

**SECTION 3 – MANAGER AND/OR MANAGING COMPANY INFORMATION**

Manager's Name Dan Botwinik  
Managing Company (if Applicable) New England Property Rentals  
Managing Company's Mailing Address \_\_\_\_\_  
Contact Person Jainny Arismendi / Carlos Rincon Direct Line/Extension \_\_\_\_\_

**SECTION 3 – LODGING HOUSE INFORMATION**

**Total # of Floors** 4 **Total # of Rooms** 14 **Total # of Lodgers** 14

Do you have a Building Certificate? \_\_\_\_\_ Expiration Date \_\_\_\_\_

Do you agree to abide by the provisions of M.G.L. Chapter 140, sections 22-23 and maintain the register and posting called for therein? YES ☒ NO ☐ (approval of license constitutes an order by the Licensing Authority to maintain said register)

Signature of Applicant Dan Botwinik  
Applicant Printed Name Dan Botwinik

LICENSE NUMBER

2023-04

FEE

\$50.00

THE COMMONWEALTH OF MASSACHUSETTS  
TOWN OF HULL

This is to Certify that a Lodging House License is hereby granted to Impenetrable Hull LLC dba The Nantascot Lodging House, Dan Botwinik, Mgr. at 475 Nantasket Ave

In said HULL and that place only and expires December thirty-first 20 23 unless sooner suspended or revoked for violation of the laws of the Commonwealth of Massachusetts relating to the licensing of Lodging Houses.

This license is issued in conformity with the authority granted to the licensing authorities under section twenty-three, of chapter one hundred and forty, of the General Laws and is subject to the provisions of sections twenty-two to thirty-one inclusive of said chapter..

In Testimony Whereof, the undersigned have hereunto affixed their official signatures,

This 1st day of January 20 23

/s/ Jennifer Constable

/s/ Donna Pursel

/s/ Irwin Nesoff

/s/ Domenico Sestito

/s/ Greg Grev

} Licensing  
Authorities

(OVER)

## COMMUNITY USE OF PUBLIC BUILDINGS POLICY

The Town of Hull recognizes the importance of community meeting space and, accordingly, establishes the following policy to provide clear guidance for utilization of appropriate and available town facilities. Public meeting space promotes community engagement and provides support to organizations serving the Hull community.

### Eligibility:

1. For this policy, Community Organizations are defined as non-profit, civic, and/or charitable organizations based in Hull that primarily serve the Hull community.
2. Eligible organizations must be officially registered as non-profit entities and provide documentation of their non-profit status.

### Reservation Process:

1. Community Organizations may reserve spaces in two facilities -the Hull Public Library (9 Main Street) and the Anne M. Scully Senior Center (197A Samoset Avenue) under the following conditions:
  - a) Spaces must be rented during regular public operating hours.
  - b) Reservations are allowed only for spaces not in use by the facility staff for other events, programs, or meetings.
2. Organizations must submit written requests via email or letter to the Director of the relevant facility:
  - a) Director, Hull Public Library, 9 Main Street, Phone: 781-925-2295 Email: [hucirc@ocln.org](mailto:hucirc@ocln.org)
  - b) Director, Anne M. Scully Senior Center, 197A Samoset Avenue, Phone: 781-925-1239, Email: [HullCOA@town.hull.ma.us](mailto:HullCOA@town.hull.ma.us)
3. Requests should include the following information:
  - a.) Name of Organization
  - b.) Purpose of the meeting or event
  - c.) Date and time requested
  - d.) Estimated number of attendees
  - e.) Requested seating or other equipment uses
4. Requests must be submitted at least two weeks prior to the desired date of use to allow for proper review and scheduling.
5. Reservations are granted on a first come, first served basis.

### Usage Guidelines:

1. Approved organizations may use town buildings for meetings, workshops, seminars, and events aligned with their mission support to the Hull community.
2. Organizations are responsible for setup, cleanup, and any costs related to additional equipment or services.
3. Compliance with all applicable laws, regulations, and town policies is expected.
4. No alcohol is permitted.
5. No food or use of kitchen facilities is allowed without permission from the Director, and may incur additional fees.

6. Disruptive behavior infringing on other residents' facility use or staff responsibilities is prohibited.
7. The town reserves the right to revoke building usage privileges for policy violations.

**Fee:**

1. A fee of [\$/hour] applies to Community Organization usage of relevant facilities.
2. The Director may waive or reduce fees on a case-by-case basis.

**Review and Amendments:** This policy will be reviewed and evaluated from time to time by the Select Board in conjunction with the Town Manager.