



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.

Board or Committee	Select Board
Date & Time of Meeting	Wednesday, November 29th, 2023 at 7:00 pm
Meeting Location	Hull Town Hall, 253 Atlantic Ave
Requested By:	Jennifer Constable, Town Manager

AGENDA

APPOINTMENTS

- 7:00 Public Hearing: Clint Smith, Manager, 165 Nantasket Ave, Taco Guy Corp. Re: Application for a Common Victualer License (NEW). Hours of operation; Monday through Saturday 11 am until 7:30 pm and Sunday 7:30 am until 7:30 pm.**
- 7:10 Kate Barclay Re: Letter of interest to serve on the Affordable Housing Committee.**

APPROVALS

- 1. Mike McGurl, Executive Director, 1117 Nantasket Ave, Hull Life Saving Museum Re: One Day Wine and Malt License on Friday, December 8, 2023 from 6:00 pm to 9:00 pm for the Festival of Trees Decorating.**

ANNUAL ALCOHOL

- 1. Daddy's Ventures Inc., dba Daddy's Dry Dock, 280 Nantasket Ave, Jeffrey Lemkin, Mgr. Re: (A) All Alcohol as a General on Premise Licensee; (B) Common Victualer; (C) Entertainment (Jukebox, DJ, Live); (D) Automatic Amusement (RENEWAL).**
- 2. Nantasket Beach Salt Water Club, Inc. dba Nantasket Beach Salt Water Club, 3 Fitzpatrick Way, Nicole Londergan, Mgr. Re: (A) All Alcohol License; (B) Common Victualer License; and (C) Entertainment License (RENEWAL) .**
- 3. PF Hospitality Inc., dba the Sandbar, 297 Nantasket Ave, Lillian Parker, 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 (Con't)

4. **Paragon Entertainment Ventures, LLC dba Paragon Arcade, 189-197 Nantasket Ave, Charles Veysey, Mgr. Re: (A) All Alcohol; (B) Common Victualer; (C) Entertainment; (D) Auto Amusement (RENEWAL).**

COMMON VICTUALER

1. **Crave, 303 Nantasket Ave, Casey Mahoney, Mgr. Re: Common Victualer (RENEWAL).**
2. **Crave, 43 Hull Shore Drive, Casey Mahoney, Mgr. Re: Common Victualer (RENEWAL).**
3. **Placido & Gaetano Treviso dba Nantasket Seafood, 533B Nantasket Ave, Placido & Gaetano Treviso, Owners Re: Common Victualer (RENEWAL).**
4. **P and N Bakeries, Inc dba Weinberg's Bakery, 519 Nantasket Ave, Valerie Peterson, Mgr. Re: Common Victualer License (RENEWAL).**

PACKAGE STORE

1. **Madhu, Inc. dba Smart Save Variety Store, 169 Nantasket Avenue, Nilesh Patel, Manager Re: Wine and Malt as a Package Store (RENEWAL).**
2. **Tiger Wind dba Nantasket Liquors, 307 Nantasket Ave, Hong Jiang Wang, Mgr. Re: All Alcohol Package Store (RENEWAL).**
3. **EAM Market, Inc. dba The Village Market, 505 Nantasket Ave, James Francis McGinnis, Mgr. Re: All Alcohol as a Package Store (RENEWAL).**

LODGING HOUSE

1. **Park Ave Realty Trust, LLC. dba Nantasket Beach Lodging, 12 Park Ave, Kirk Davis, Manager Re: Lodging House License (RENEWAL).**
2. **Sandpiper Real Estate LLC. dba Sandpiper Inn, 165 Nantasket Ave, Steven Austin, Mgr. Re: Lodging House License (RENEWAL).**

CLASS II WHOLESALE

1. **Ben's Auto, 7 Weston St, Benjamin Capone, Jr., Owner Re: Class II Wholesale License (RENEWAL) .**

CORRESPONDENCE

1. **Darrell M. Bright, Election Officer/Retirement Administrator, Hull Contributory Retirement Board Re: Retirement Board Election Results**



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

APPLICATION FOR COMMON VICTUALER

7.00 Appointment
Public Hearing

SELECTMEN'S OFFICE FEE: \$50.00

RECEIVED

NOV - 7 2023
(Date Received)

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

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: CLINT SMITH

Applicant's Legal Home Address:

Applicant's Mailing Address (if different):

Applicant's (authorized) Signature: [Signature] Date: 11/7/23

By signing above you are verify the accuracy of all information

Full Legal Name of the Business: JACO BOW CORP

Full Street Address of the Business: 165 NAWMASKET AVE.

Mailing Address of the Business (if different):

Telephone Number of the Business (if different):

Current Owner/Manager of Record: CLINT SMITH

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: SANDPIPER REALTY LLC

SECTION 2 - LICENSE CLASS

(Check One)

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

Expected date to open: JAN 2 2024 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: 11-7³⁰ Tues: 11-7³⁰ Wed: 11-7³⁰ Thurs: 11-7³⁰ Fri: 11-7³⁰ Sat: 11-7³⁰ Sun: 7³⁰-7³⁰

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 YES Size of Kitchen 20 x 40

Sink ☒ Hot and Cold Water ☒ Is there a Stove ☒

Gas Burners ☒ Electric Burners _____ Refrigerators ☒

Bar N/A Lunch Counter N/A Tables # 4 16 Booths # 1 N/A
(no. of seats) (no. of seats) (no. of seats) (no. of seats)

Seating Capacity? Indoor 16 Outdoor 0 TOTAL Seating Capacity 16

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 CLINT SMITH

Owner/Manager's Signature _____

Date 11/17/23

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."

LEGAL NOTICE

Notice is hereby given under Chapter 140 of the General Laws and the Town of Hull's Licensing Rules and Regulations and all other legal authority to the extent applicable that The Taco Guy Corporation., has applied for a license to be a **Common Victualler**, (Clint Smith, Manager), as a restaurant, from 165 Nantasket Avenue, Hull, Massachusetts.). Description of premises included within a first floor storefront consisting of a 4 tables accommodating seating for approximately 16. **Proposed hours of operation:** Monday – Saturday: 11:00 a.m. to 7:30 p.m. and Sunday: 7:30 am – 7:30 pm.

On the foregoing application to the Licensing Authorities IT IS ORDERED: That a public hearing will be held on the said application at the Office of the Licensing Authorities located in the Municipal Building in the Town of Hull on **Wednesday, the twenty-ninth (29th) day of November 2023 at 7:00 p.m.** and that the applicant give public notice of said time and place of the hearing by publishing an attested copy of the said Notice and order thereon by mailing to the abutters and publishing said notice in the Hull Times at least ten days before the time of the hearing.

Copies of applications with additional details are available for inspection at the Office of the Select Board, Town Hall, 253 Atlantic Avenue, Hull, MA 02045

LOCAL LICENSING AUTHORITIES

Greg Grey
Irwin Nesoff
Jason McCann
Jerry Taverna
Brian McCarthy

Hull Times: November 17, 2023

7:10 Appointment

Subject:

FW: Hull Affordable Housing Committee Vacant Seat

From: Katie Barclay
Sent: Thursday, November 2, 2023 4:46 PM
To: West, Lori
Cc:
Subject: Hull Affordable Housing Committee Vacant Seat



Lori West,

After speaking with some of the current members of the AHC, I am interested in filling the vacant citizen seat on the Hull Affordable Housing Committee. Cyndi Koebert recommended that I email you with my interest and inquires as

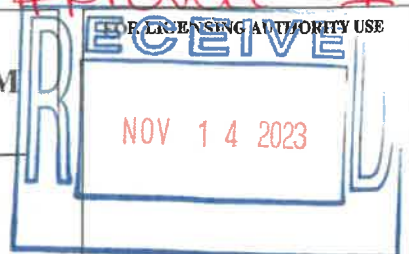
to what the next steps forward would be. I understand that this position is Select Board appointed and would greatly appreciate their consideration for this opportunity. I look forward to learning what this process entails and hope to fill

the vacant seat. Thank you for your time and consideration.

Best Regards,

Kate Barclay

Approval # 1



TOWN OF HULL
ALCOHOL LICENSE INFORMATION FORM
NEW ☐ RENEWAL ☐ TRANSFER ☐
☒ **ONE DAY LICENSE 12/8/2023**
AMENDMENT ☐

Name To Appear on License: Hull Lifesaving Museum
Business Name (dba) if different: _____
FID of Licensee: _____ ABCC License Number: _____
Address of Premises: 1117 Nantsket Ave Hull MA 02045
Phone Number of Premises: 781-925-5433 Business Email: Maureen@Hulllifesavingmuseum.org
Business Mailing Address: ☐ Same as above _____
Owner of Business: Mike McGurl Executive Director
Manager of Record: Mike McGurl
Manager's Contact Phone: Cell Phone: _____ Home Phone : _____
Manager's Home Address: _____
Applicant's (authorized) Signature Mike McGurl Digitally signed by Mike McGurl
Date: 2022.09.16 12:53:09 -04'00' DATE: 11/14/2023
By signing above you are verifying the accuracy of all information

License Class: ☐ Annual ☐ Seasonal ☒ **One Day (1 + 1 Day[s])** Nature of Event: Festival of Trees
Location of Event: Hull Lifesaving Museum
TYPE OF LICENSE: (CHECK ONLY ONE)
☐ Club ☐ Package Store ☐ Veteran's Club ☐ General On Premise ☐ Restaurant
☐ Innholder ☐ Tavern ☐ Other (Specify) Museum
LICENSE CATEGORY:
☐ All Alcohol ☒ Wine & Malt ☐ Malt Only ☐ Wine Only ☐ Wine & Malt with Cordials
☐ Other (please specify) _____
HOURS OF OPERATION: (please use additional sheet if needed)
OPEN:
Mon: _____ Tues: _____ Wed: _____ Thurs: _____ Fri: 6-9 Sat: _____ Sun: _____
CLOSE:
Mon: _____ Tues: _____ Wed: _____ Thurs: _____ Fri: _____ Sat: _____ Sun: _____
☐ REQUESTING CHANGE OF HOURS (if different from previous license period)

Seating Capacity: (if applicable) Indoor Outdoor Total
Occupancy Number: _____
Entertainment License: ☐ Yes ☐ No

Request for New Year's Eve Extension?

☐ YES ☐ NO

Annual Alcohol Approval #1



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: Daddy's Ventures, Inc
Business Name (dba) if different: Daddy's Beach Club
FID of Licensee: _____ Address of Premises: 280 Nantasket Ave
Phone Number of Premises: 781 925-3600 Business Email: Daddy's Beach Club@Gmail.com
Business Mailing Address: ☒ Same as above
Owner of Business: Daddy's Ventures, Inc
Manager of Record: Jeffrey Lenkin
*Proposed Manager (must file COM with ABCC): _____

Phone: _____ Residential Address: _____

Applicant's (authorized) Signature

Date: 10/19/23

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) ☒ Indoor ☐ Outdoor 138 Total

Occupancy Number: 180

Entertainment License: ☒ Yes ☐ No

Request for New Year's Eve Extension?

☒ YES ☐ NO

Hull A2023-2

LICENSE

ABCC 0002-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: DADDY'S VENTURES, INC., DADDY'S BEACH CLUB,
JEFFREY LEMKIN, MANAGER, 280 NANTASKET AVENUE

On the following described premises: One-story building with full basement, kitchen, dining room and office. Entrances and exits on Nantasket Avenue and Hull Shore Drive

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 SUNDAY :

11 AM – 1 AM

Unless otherwise advised by Licensing Authority

Jennifer Constable

Donna Pursel

Irwin Nesoff

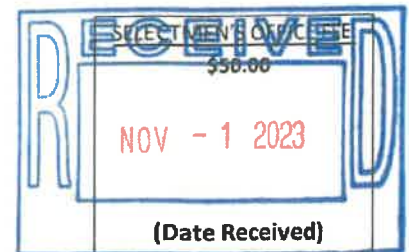
Domenico Sestito

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: Daddy's Ventures, Inc

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: _____

By signing above you are verify the accuracy of all information

Full Legal Name of the Business: Daddy's Ventures, Inc

Full Street Address of the Business: 280 Nantasket Ave

Mailing Address of the Business (if different): _____

Telephone Number of the Business (if different): _____

Current Owner/Manager of Record: Jeffrey Lemkin

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: JOLRE INC

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 2023-02

FEE \$50.00

THE COMMONWEALTH OF MASSACHUSETTS
TOWN OF HULL

This is to Certify that Daddy's Ventures, Inc., dba Daddy's Beach Club,

Jeffrey Lemkin, Manager, 280 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 Sunday
11 AM - 1 AM**

ISSUED: January 1, 2023

/s/ Jennifer Constable

/s/ Donna Pursel

/s/ Irwin Nesoff

/s/ Domenico Sestito

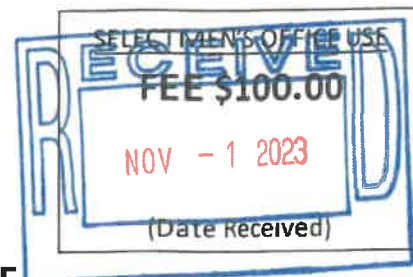
/s/ Greg Grey

} Licensing
Authorities

(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 Daddy's Ventures Inc
Business's Full Legal Name Daddy's Beach Club
Business Address 280 Nantasket Ave
Mailing Address ☒ Same as above
Business Telephone Number 781 925-3600 FID#
Business Email Address Daddysbeachclub@gmail.com
Description of Premises One story restaurant/Bar w/ Live entertainment

Manager of Record /*Proposed Manager* Jeffrey Lenkin

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: 2023-02

FEE: \$100.00

THE COMMONWEALTH OF MASSACHUSETTS
TOWN OF HULL

This is to Certify that **Daddy's Ventures, Inc., dba Daddy's Beach Club,**

Jeffrey Lemkin, Manager, 280 Nantasket Avenue

IS HEREBY GRANTED A LICENSE

For Entertainment as a Victualer at: 280 Nantasket Avenue
Type of Entertainment: Live, Jukebox, DJ & Karaoke
Hours: Sunday through Wednesday – 11:00 a.m. to 11:30 p.m
Thursday through Saturday – 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.

/s/ Jennifer Constable

/s/ Donna Pursel

/s/ Irwin Nesoff

/s/ Domenico Sestito

/s/ Greg Grev

} Licensing
Authorities

ISSUED: January 1, 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 Daddy's Ventures, Inc
Business's Full Legal Name Daddy's Beach Club
Business Address 280 Nantasket Ave
Mailing Address Same
Business Telephone Number 781 925-3600 Business Email Address _____ FID# x
Description of Premises One story restaurant/Bar w/ live entertainment

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 _____ No. _____
TYPE Pool Table No. 1
TYPE _____ No. _____
TYPE _____ No. _____

Have all devices been approved by the Director of Standards? yes
Distributor's Name and Address: Commonwealth Vending Quincy, MA

SECTION 4 – MANAGER INFORMATION

Owner/Manager's Signature _____

By signing above you are verify the accuracy of all information

Owner/Manager's Name Printed Jeffrey Lenkin

LICENSE NUMBER 2023-01

FEE \$20.00

THE COMMONWEALTH OF MASSACHUSETTS
TOWN OF HULL

This is to Certify

Daddy's Ventures, Inc., dba Daddy's Beach Club,
Jeffrey Lemkin, Manager, 280 Nantasket Avenue

IS HEREBY GRANTED AN AUTOMATIC DEVICE LICENSE

TYPE OF DEVICE: Pool Table
WHICH ARE KEPT ON THE FOLLOWING DESCRIBED PREMISES:
One Story Building

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 1, 2023
NOT TRANSFERABLE

Annual Alcohol Approval #2



TOWN OF HULL

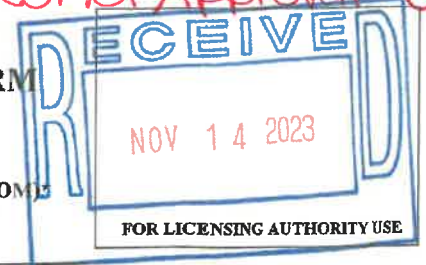
ALCOHOL LICENSE INFORMATION FORM

NEW ☐ RENEWAL ☒ TRANSFER ☐

AMENDMENT ☐ ☐ CHANGE OF MANAGER (COM) ☐

ONE DAY ☐ Date: _____

☐ CHANGE OF HOURS (COH) ☐ OTHER



Full Legal Name of Business: NANTASSET BEACH saltwater Club, Inc.

Business Name (dba) if different: _____

FID of Licensee: _____ Address of Premises: 3 FITZPATRICK WAY

Phone Number of Premises: 781-925-9801 Business Email: _____

Business Mailing Address: ☐ Same as above _____

Owner of Business: _____

Manager of Record: Nichole Loudergan

*Proposed Manager (must file COM with ABCC): Nichole Loudergan

Applicant's (authorized) Signature _____

Nichole

Date: 11-15-2023

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: 8 AM Tues: 8 AM Wed: 8 AM Thurs: 8 AM Fri: 8 AM Sat: 8 AM Sun: 10 AM

REQUESTING TO CLOSE:

Mon: 1 AM Tues: 1 AM Wed: 1 AM Thurs: 1 AM Fri: 1 AM Sat: 1 AM Sun: 1 AM

Seating Capacity: (if applicable) 90 Indoor 150 Outdoor 240 Total

Occupancy Number: 90

Entertainment License: ☒ Yes ☐ No

Request for New Year's Eve Extension?

☒ YES ☐ NO

P/A - no changes from 2023

Hull A2023-25

LICENSE

ABCC-055400004

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: Nantasket Beach Salt Water Club, Inc. Nichole Londergan, Mgr
3 Fitzpatrick Way

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 Eighth day of November 2023.

The Hours during which
Alcoholic Beverages may be sold are:

From:

OPEN: 8 AM WEEKDAYS
10 AM SUNDAYS

CLOSE: 1 AM

Greg Grey
Irwin Nesoff
Jason P. McCann
Brian S. McCarthy
Jerry Taverna

Licensing
Authorities

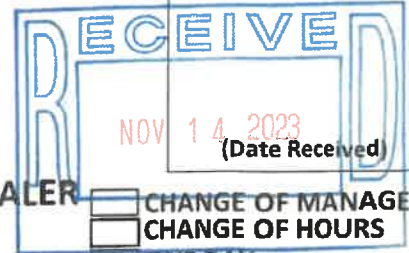
Unless otherwise advised by Licensing Authority



**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: Nichole Londergan

Applicant's (authorized) Signature

Nichole Londergan

Date: 11-15-2023

By signing above you are verify the accuracy of all information

Full Legal Name of the Business: NANTASKET BEACH SALTWATER CUB

Full Street Address of the Business: 3 FITZPATRICK WAY

Mailing Address of the Business (if different):

Telephone Number of the Business (if different): 781-925-9801

Current Owner/Manager of Record: Nichole Londergan

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: 8AM Tues: 8AM Wed: 8AM Thurs: 8AM Fri: 8AM Sat: 8AM Sun: 8AM/10AM

CLOSE: Mon: 1AM Tues: 1AM Wed: 1AM Thurs: 1AM Fri: 1AM Sat: 1AM Sun: 1AM

SEE OTHER SIDE

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

NO CHARGES FROM 2023

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 2023-26

FEE \$50.00

THE COMMONWEALTH OF MASSACHUSETTS
TOWN OF HULL

This is to Certify that Nantasket Beach Salt Water Club, Inc., Nichole Londergan Mer.

3 Fitzpatrick Way

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: 8:00am Weekdays, 10:00am Sundays

Close: 1:00am

/s/ Donna Pursel

/s/ Greg Grey

/s/ Irwin Nesoff

/s/ Domenico Sestito

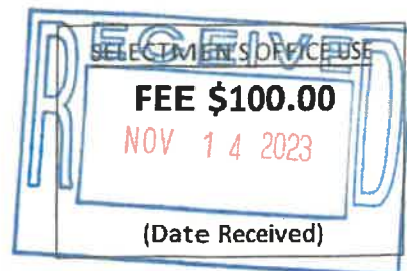
} Licensing
Authorities

ISSUED: April 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 Nichole Londergan
Business's Full Legal Name Nantasket Beach Saltwater Club
Business Address 3 Fitzpatrick Way
Mailing Address ☐ Same as above
Business Telephone Number 781-925-9801 FID# _____
Business Email Address _____
Description of Premises Boat Clubhouse / outdoors
Manager of Record /*Proposed Manager* Nichole Londergan

Owner/Manager's Signature

If Amending Manager of Record

[Signature]
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 8pm Tues 8pm Wed 8pm Thurs 8pm Fri 8pm Sat 8pm Sun 10am

End Time: Mon 1am Tues 1am Wed 1am Thurs 1am Fri 1am Sat 1am Sun 1am

Outdoors 8pm - 10pm All days

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

NO Change from 2023

LICENSE NUMBER: 2023-09

FEE: \$100.00

THE COMMONWEALTH OF MASSACHUSETTS
TOWN OF HULL

This is to Certify that **Nantasket Beach Salt Water Club, Inc.**

Nichole Londergan, Manager, 3 Fitzpatrick Way

IS HEREBY GRANTED A LICENSE

For Entertainment as a Victualer at: 3 Fitzpatrick Way

Type of Entertainment: Live, Jukebox, & DJ

**Indoor Hours: Monday – Saturday | 8:00am to 1:00am
Sunday | 10:00am to 1:00am**

**Outdoor Hours: Monday – Saturday | 8:00am to 10:00pm
Sunday | 10:00am to 10:00pm**

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

ISSUED: April 01, 2023

/s/ Donna Pursel

/s/ Greg Grev

/s/ Irwin Nesoff

/s/ Domenico Sestito

} Licensing
Authorities

Annual Alcohol Approval # 3



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: PF Hospitality Inc
Business Name (dba) if different: Sandbar
FID of Licensee: 297 Nantasket Ave
Address of Premises: 297 Nantasket Ave
Phone Number of Premises: 781-922 4800 Business Email: thesandbarhull@gmail.com
Business Mailing Address: ☒ Same as above
Owner of Business: Lillian Parker
Manager of Record: Lillian Parker
*Proposed Manager (must file COM with ABCC):

Phone: Residential Address :

Applicant's (authorized) Signature

Lillian Parker

Date: 11/8/2023

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) Indoor Outdoor Total

Occupancy Number:

Entertainment License: ☒ Yes ☐ No

Request for New Year's Eve Extension?

☒ YES ☐ NO

Hull A2023-7

LICENSE

ABCC 00015-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: PF Hospitality Inc., dba The Sandbar

Lillian Parker, Manager, 297 Nantasket Avenue

On the following described premises: One story brick building with a kitchen, dining room and lounge area. Cellar for storage. One front entrance and one rear entrance.

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:

Please See Attached Document

Unless otherwise advised by Licensing Authority

Jennifer Constable

Donna Pursel

Irwin Nesoff

Domenico Sestito

Greg Grey

} Licensing
Authorities

Hours
Approved as
of 11-16-22

Sandbar Alcohol License						
Hours of Operation for 11-16-22 to 12-31-22						
Hours of Operation for 1-1-23 to 12-31-23						
M	T	W	T	F	S	Sun
2:00 PM	2:00 PM	2:00 PM	2:00 PM	12:00 PM	12:00 PM	12:00 PM
1:00 AM	0.041667	1:00 AM	1:00 AM	1:00 AM	1:00 AM	1:00 AM

Alcohol All Monday Holidays and other Legal Holidays Open 12 pm to 1 AM

Hours
Approved as
of 11-16-22

Sandbar Common Victular Licenses						
Hours of Operation for 11-16-22 to 12-31-22						
Hours of Operation for 1-1-23 to 12-31-23						
M	T	W	T	F	S	Sun
2:00 PM	2:00 PM	2:00 PM	2:00 PM	12:00 PM	12:00 PM	12:00 PM
1:00 AM	0.041667	1:00 AM	1:00 AM	1:00 AM	1:00 AM	1:00 AM

Hours
Approved as
of 11-16-22

Sandbar Entertainment License						
Hours of Operation for 11-16-22 to 12-31-22						
Hours of Operation for 1-1-23 to 12-31-23						
M	T	W	T	F	S	Sun
2:00 PM	2:00 PM	2:00 PM	2:00 PM	12:00 PM	12:00 PM	2:00 PM
1:00 AM	0.041667	1:00 AM	1:00 AM	1:00 AM	1:00 AM	1:00 AM
Monday thru Thursday				Friday Thru Sunday		
*Live music stops at 11:00 pm				* 5 piece with amplification permitted		
*Only 3 piece Accoustic no amplification				*all other conditions in effect		
*Same as 2022 license						

All Monday Holidays and other Legal Holidays Open 2:00 pm to 1 AM



**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: Lillian Parker
Applicant's Legal Home Address: _____
Applicant's Mailing Address (if different): _____
Applicant's Home Telephone Number: _____ Cell Phone: Same
Applicant's E-Mail Addresses: Primary _____ Secondary _____
Applicant's (authorized) Signature [Signature] Date: 11/8/23

By signing above you are verify the accuracy of all information

Full Legal Name of the Business: PF Hospitality Inc dba Sandbar
Full Street Address of the Business: 297 Nantasket Ave Hull Ma 02045
Mailing Address of the Business (if different): _____
Telephone Number of the Business (if different): 781 922 4800
Current Owner/Manager of Record: Lillian Parker
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: Dan Coffey

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: 2023-7

FEE \$50.00

THE COMMONWEALTH OF MASSACHUSETTS

TOWN OF HULL

This is to Certify that

**PF Hospitality Inc., dba The Sandbar
Lillian Parker, Manager, 297 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:

Please see attached document

ISSUED: January 01, 2023

/s/ Jennifer Constable

/s/ Donna Pursel

/s/ Irwin Nesoff

/s/ Domenico Sestito

/s/ Greg Grey

} Licensing
Authorities

(OVER)

Hours
Approved as
of 11-16-22

Sandbar Alcohol License						
Hours of Operation for 11-16-22 to 12-31-22						
Hours of Operation for 1-1-23 to 12-31-23						
M	T	W	T	F	S	Sun
2:00 PM	2:00 PM	2:00 PM	2:00 PM	12:00 PM	12:00 PM	12:00 PM
1:00 AM	0.041667	1:00 AM	1:00 AM	1:00 AM	1:00 AM	1:00 AM

Alcohol All Monday Holidays and other Legal Holidays Open 12 pm to 1 AM

Hours
Approved as
of 11-16-22

Sandbar Common Victular Licenses						
Hours of Operation for 11-16-22 to 12-31-22						
Hours of Operation for 1-1-23 to 12-31-23						
M	T	W	T	F	S	Sun
2:00 PM	2:00 PM	2:00 PM	2:00 PM	12:00 PM	12:00 PM	12:00 PM
1:00 AM	0.041667	1:00 AM	1:00 AM	1:00 AM	1:00 AM	1:00 AM

Hours
Approved as
of 11-16-22

Sandbar Entertainment License						
Hours of Operation for 11-16-22 to 12-31-22						
Hours of Operation for 1-1-23 to 12-31-23						
M	T	W	T	F	S	Sun
2:00 PM	2:00 PM	2:00 PM	2:00 PM	12:00 PM	12:00 PM	2:00 PM
1:00 AM	0.041667	1:00 AM	1:00 AM	1:00 AM	1:00 AM	1:00 AM
Monday thru Thursday				Friday Thru Sunday		
*Live music stops at 11:00 pm				* 5 piece with amplification permitted		
*Only 3 piece Accoustic no amplification				*all other conditions in effect		
*Same as 2022 license						

All Monday Holidays and other Legal Holidays Open 2:00 pm to 1 AM



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

SELECTMEN'S OFFICE USE

FEE \$100.00

NOV - 1 2023
(Date Received)

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 Lillian Parker

Business's Full Legal Name PF Hospitality Inc dba Sand Bar

Business Address 297 Nantasket Ave Hull Ma 02045

Mailing Address ☒ Same as above

Business Telephone Number 781 922 4800 FID#

Business Email Address thesandbarhull@gmail.com

Description of Premises onsite restaurant bar

Manager of Record /*Proposed Manager* Lillian Parker

Home Address

Home Telephone Cell Phone same

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: 2023-5

FEE: \$100.00

THE COMMONWEALTH OF MASSACHUSETTS
TOWN OF HULL

This is to Certify that

PF Hospitality Inc., dba The Sandbar,
Lillian Parker, Manager, 297 Nantasket Avenue
IS HEREBY GRANTED A LICENSE

For Entertainment as a Victualer at: 297 Nantasket Avenue

Type of Entertainment: Jukebox, DJ, Karaoke, and Live (3 Instruments, Guitar and Brass;
Acoustic, no amplification)

Hours: see attached document

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 01, 2023

Hours
Approved as
of 11-16-22

Sandbar Alcohol License						
Hours of Operation for 11-16-22 to 12-31-22						
Hours of Operation for 1-1-23 to 12-31-23						
M	T	W	T	F	S	Sun
2:00 PM	2:00 PM	2:00 PM	2:00 PM	12:00 PM	12:00 PM	12:00 PM
1:00 AM	0.041667	1:00 AM	1:00 AM	1:00 AM	1:00 AM	1:00 AM

Alcohol All Monday Holidays and other Legal Holidays Open 12 pm to 1 AM

Hours
Approved as
of 11-16-22

Sandbar Common Victular Licenses						
Hours of Operation for 11-16-22 to 12-31-22						
Hours of Operation for 1-1-23 to 12-31-23						
M	T	W	T	F	S	Sun
2:00 PM	2:00 PM	2:00 PM	2:00 PM	12:00 PM	12:00 PM	12:00 PM
1:00 AM	0.041667	1:00 AM	1:00 AM	1:00 AM	1:00 AM	1:00 AM

Hours
Approved as
of 11-16-22

Sandbar Entertainment License						
Hours of Operation for 11-16-22 to 12-31-22						
Hours of Operation for 1-1-23 to 12-31-23						
M	T	W	T	F	S	Sun
2:00 PM	2:00 PM	2:00 PM	2:00 PM	12:00 PM	12:00 PM	2:00 PM
1:00 AM	0.041667	1:00 AM	1:00 AM	1:00 AM	1:00 AM	1:00 AM
Monday thru Thursday				Friday Thru Sunday		
*Live music stops at 11:00 pm *Only 3 piece Accoustic no amplification *Same as 2022 license				* 5 piece with amplification permitted *all other conditions in effect		

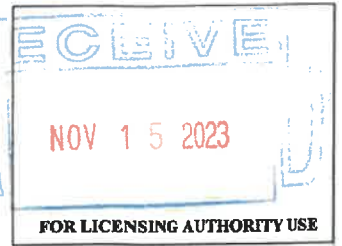
All Monday Holidays and other Legal Holidays Open 2:00 pm to 1 AM



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: Paragon Entertainment Ventures LLC
 Business Name (dba) if different: Paragon Boardwalk
 FID of Licensee: _____ Address of Premises: 183-197 Nantasket Ave
 Phone Number of Premises: (781) 925-0011 Business Email: info@paragonboardwalk.com
 Business Mailing Address: ☐ Same as above
 Owner of Business: Diana Reale
 Manager of Record: Charles Vensen
 *Proposed Manager (must file COM with ABCC): _____

Phone: _____ Residential Address _____

Applicant's (authorized) Signature [Signature] Date: 11/14/2023
 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) _____ Indoor _____ Outdoor _____ Total _____

Occupancy Number: 240

Entertainment License: ☒ Yes ☐ No

Request for New Year's Eve Extension?

☒ YES

☒ NO

Hull A2023-19

LICENSE

ABCC-04218-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: Charles Veysey, Paragon Entertainment Ventures, LLC

189-193 Nantasket Ave

On the following described premises: Alcohol can be served in the Boardwalk space,
the Beer Hall and the Arcade ****Max Occupancy is 240**

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
From: See Attached Terms

Jennifer Constable
Donna Pursel
Irwin Nesoff
Domenico Sestito
Greg Grey

} Licensing
Authority

***All Licenses and Attachments Must Be**
Displayed in Each Licensed Area

Hours
Approved as
of 05-25-22

Paragon Alcohol License
Hours of Operation for 2022
Boardwalk Area and Craft Beer Hall

	M	T	W	T	F	S	S
12/31/2021	Closed	Closed	Closed	Closed	Closed	Closed	Closed
1/11/2022	Closed	Closed	Closed	Closed	4:00 PM 11:00 PM	11:00 AM 11:00 PM	11:00 AM 11:00 PM
3/1/2022	Closed	Closed	2:00 PM 11:00 PM	2:00 PM 11:00 PM	2:00 PM 11:00 PM	11:00 AM 11:00 PM	11:00 AM 11:00 PM
5/4/2022	11:00 AM 11:00 PM	11:00 AM 11:00 PM	11:00 AM 11:00 PM	11:00 AM 11:00 PM	11:00 AM 11:00 PM	11:00 AM 11:00 PM	11:00 AM 11:00 PM
10/14/2022	Closed	Closed	2:00 PM 11:00 PM	2:00 PM 11:00 PM	2:00 PM 11:00 PM	11:00 AM 11:00 PM	11:00 AM 11:00 PM

Alcohol All Monday Holidays and other Legal Holidays Open 11 am to 11 pm

Hours
Approved as
of 05-25-22

**Paragon Alcohol License
Hours of Operation for 2022
Arcade**

	M	T	W	T	F	S	S
12/31/2021 1/10/2022	Closed	Closed	Closed	Closed	Closed	Closed	Closed
1/11/2022 2/29/2022	Closed	Closed	Closed	Closed	5:00 PM 11:00 PM	5:00 PM 11:00 PM	5:00 PM 11:00 PM
3/1/2022 5/3/2022	Closed	Closed	5:00 PM 11:00 PM	5:00 PM 11:00 PM	5:00 PM 11:00 PM	5:00 PM 11:00 PM	5:00 PM 11:00 PM
5/4/2022 10/13/2022	5:00 PM 11:00 PM	5:00 PM 11:00 PM	5:00 PM 11:00 PM	5:00 PM 11:00 PM	5:00 PM 11:00 PM	5:00 PM 11:00 PM	5:00 PM 11:00 PM
10/14/2022 12/31/2022	Closed	Closed	5:00 PM 11:00 PM	5:00 PM 11:00 PM	5:00 PM 11:00 PM	5:00 PM 11:00 PM	5:00 PM 11:00 PM

Alcohol All Monday Holidays and other Legal Holidays Open 5 pm to 11 pm



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

SELECTMEN'S OFFICE FEE:

\$50.00

(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: Mr. Charles Vaysey

Applicant's Legal Home Address: _____

Applicant's Mailing Address (if different): _____

Applicant's Home Telephone Number: _____ Cell Phone: _____

Applicant's E-Mail Addresses: Primary charles@paragonboardwalk.com Secondary _____

Applicant's (authorized) Signature [Signature] Date: 11/14/2023

By signing above you are verify the accuracy of all information

Full Legal Name of the Business: Paragon Entertainment Ventures LLC

Full Street Address of the Business: 183-187 Nantasket Ave

Mailing Address of the Business (if different): _____

Telephone Number of the Business (if different): (781) 925-0011

Current Owner/Manager of Record: Diana Reale owner / charles vaysey manager

E-Mail Addresses of the Business (if different): info@paragonboardwalk.com

FID of the License: _____

Do you own ☐ or lease ☒ the premises?

If leasing, please provide the name and address of the lessor: Nantasket Dwelling

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: 2023-4

FEE: \$50.00

THE COMMONWEALTH OF MASSACHUSETTS
TOWN OF HULL

This is to Certify that Paragon Entertainment Ventures, LLC.

Charles Veysey, Manager, 189-193 Nantasket Ave

IS HEREBY GRANTED A LICENSE

COMMON VICTUALLER'S LICENSE

See Attached Terms and Conditions

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 Grev

} **Licensing
Authority**

ISSUED: January 1, 2023

***All Licenses and Attachments Must Be Displayed in Each Licensed Area**

Hours
Approved as
of 05-25-22

Paragon Common Victular Licenses

Hours of Operation for 2022

Arcade @ Craft Beer Hall

	M	T	W	T	F	S	S
12/31/2021	1/10/2022	Closed	Closed	Closed	Closed	Closed	Closed
1/11/2022	2/29/2022	Closed	Closed	Closed	3:00 PM	9:00 AM	9:00 AM
					12:00 AM	12:00 AM	12:00 AM
3/1/2022	5/3/2022	Closed	Closed	1:00 PM	1:00 PM	9:00 AM	9:00 AM
				12:00 AM	12:00 AM	12:00 AM	12:00 AM
5/4/2022	10/13/2022	11:00 AM	11:00 AM	11:00 AM	11:00 AM	11:00 AM	11:00 AM
		12:00 AM	12:00 AM	12:00 AM	12:00 AM	12:00 AM	12:00 AM
10/14/2022	12/31/2022	Closed	Closed	1:00 PM	1:00 PM	9:00 AM	9:00 AM
				12:00 AM	12:00 AM	12:00 AM	12:00 AM

All Monday Holidays and other Legal Holidays Open 5 pm to 11 pm

Hours
Approved as
of 12-15-21

Paragon Common Victular Licenses

Hours of Operation for 2022

Boardwalk Area

5/4/2022	10/13/2022	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am
		10:00 PM	10:00 PM	10:00 PM	10:00 PM	10:00 PM	10:00 PM	10:00 PM	10:00 PM

10/14/2022	12/31/2022	Closed	Closed	2:00 PM	2:00 PM	2:00 PM	2:00 PM	11:00am	11:00am
				10:00 PM	10:00 PM	10:00 PM	10:00 PM	10:00 PM	10:00 PM

All Monday Holidays and other Legal Holidays Open 5 pm to 11 pm



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

SELECTMEN'S OFFICE USE

FEE \$100.00

NOV 15 2023

(Date Received)

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 Charles Veysey
Business's Full Legal Name Paragon Entertainment Ventures LLC
Business Address 183-197 Nantasket Ave
Mailing Address ☐ Same as above
Business Telephone Number 781-925-0011 FID#
Business Email Address info@paragonboardwalk.com
Description of Premises

Manager of Record /*Proposed Manager* Charles Veysey
Home Address
Home Telephone Cell Phone
Email Address charles@paragonboardwalk.com
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: 2023-14

FEE: \$100.00

THE COMMONWEALTH OF MASSACHUSETTS
TOWN OF HULL

This is to Certify that Paragon Entertainment Ventures, LLC.

Charles Veysey, Manager, 189-193 Nantasket Ave

IS HEREBY GRANTED AN ENTERTAINMENT LICENSE

as a Victualler at: 189-193 Nantasket Ave

Type of Entertainment: See Attached Terms and Conditions

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

/s/ Jennifer Constable

/s/ Donna Pursel

/s/ Irwin Nesoff

/s/ Domenico Sestito

/s/ Greg Grey

**Licensing
Authority**

ISSUED: January 1, 2023

***All Licenses and Attachments Must Be Displayed in Each Licensed Area**

Hours
Approved as
of 05-25-22

Paragon Entertainment License

Hours of Operation for 2022

Arcade and Craft Beer Hall (INTERIOR)

	M	T	W	T	F	S	S
12/31/2021	1/10/2022	Closed	Closed	Closed	Closed	Closed	Closed
1/11/2022	2/29/2022	Closed	Closed	Closed	3:00 PM	9:00 AM	9:00 AM
					11:00 PM	11:00 PM	11:00 PM
3/1/2022	5/3/2022	Closed	Closed	1:00 PM	1:00 PM	9:00 AM	9:00 AM
				11:00 PM	11:00 PM	11:00 PM	11:00 PM
5/4/2022	10/13/2022	11:00 AM	11:00 AM	11:00 AM	11:00 AM	11:00 AM	11:00 AM
		11:00 PM	11:00 PM	11:00 PM	11:00 PM	11:00 PM	11:00 PM
10/14/2022	12/31/2022	Closed	Closed	1:00 PM	1:00 PM	9:00 AM	9:00 AM
				11:00 PM	11:00 PM	11:00 PM	11:00 PM

All Monday Holidays and other Legal Holidays Open 5 pm to 11 pm

Approved on
6/29/2022

Amended Paragon Entertainment License

Hours of Operation for 2022

Boardwalk Area and Mini-Golf (EXTERIOR ONLY)						
Piped Music ONLY				Live/Piped Music		
Sun	M	T	W	T	F	Sat
11:00AM	11:00AM	11:00AM	11:00AM	11:00AM	11:00AM	11:00AM
10:00 PM	10:00 PM	10:00 PM	10:00 PM	11:00 PM	11:00 PM	11:00 PM

5/4/2022 10/13/2022

ALL MONDAY HOLIDAYS OR OTHER LEGAL HOLIDAYS OPEN FROM 11:00 AM TO 11:00 PM WITH PIPED OR LIVE MUSIC

- * No light shows outside
- * Make all efforts to mitigate noise
- * Submit Noise Mitigation Report to Select Board on Monday, 8-1-2022
- * Contact Information of the Manager posted and available if an upon requests
- * Turn volume down in general



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

SELECT BOARD'S OFFICE
USE

(Date Received)
NOV 15 2023

APPLICATION FOR AUTOMATIC AMUSEMENT DEVICE

FEE \$20.00 Per Device

NEW ☐ RENEWAL ☒ TRANSFER ☐ AMENDMENT ☐

SECTION 1 – APPLICANTS & BUSINESS INFORMATION

Applicant's Full Legal Name M. Charles Vekey
Business's Full Legal Name Paragon Entertainment Ventures LLC
Business Address 183-197 Nantasket Ave
Mailing Address 183-197 Nantasket Ave
Business Telephone Number 781-925-0011 Business Email Address info@paragonboardwalk.com FID#
Description of Premises Family Friendly Amusement Center, Restaurant AND Beer Hall
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 REDEMPTION No. 15
TYPE VIDEO No. 15
TYPE Mechanics No. 10
TYPE No.

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

Distributor's Name and Address: BETSON - 960 Turnpike St. Canton, MA 02021
Anchor Express 238 Cooper Street
Lincoln, RI 02865

SECTION 4 – MANAGER INFORMATION

Owner/Manager's Signature M. Charles Vekey
By signing above you are verify the accuracy of all information

Owner/Manager's Name Printed M. Charles Vekey

Home Address

Home Telephone

Cell Phone

Email Address

LICENSE NUMBER: 2023-5

FEE: \$800.00

THE COMMONWEALTH OF MASSACHUSETTS
TOWN OF HULL

This is to Certify that

Paragon Entertainment Ventures, LLC, Charles Veisev, Mgr.
189-193 Nantasket Ave

IS HEREBY GRANTED AN
AUTOMATIC AMUSEMENT DEVICE LICENSE

TYPE OF DEVICE:

Redemption	15 Machines
Video	15 Machines
Merchandise	10 Machines

DESCRIPTION OF PREMISES: ONE STORY BUILDING

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.

ISSUED: January 1, 2023
NOT TRANSFERABLE

/s/ Jennifer Constable

/s/ Donna Pursel

/s/ Irwin Nesoff

/s/ Domenico Sestito

/s/ Greg Grey

} Licensing
Authorities

Common Vic Approval #1



**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: Casey Mahoney
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 Casey Mahoney Date: 11.1.23

By signing above you are verify the accuracy of all information

Full Legal Name of the Business: CRAVE
Full Street Address of the Business: 303 W Antasket Ave
Mailing Address of the Business (if different): _____
Telephone Number of the Business (if different): _____
Current Owner/Manager of Record: CASEY MAHONEY
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 2023-32

FEE \$50.00

THE COMMONWEALTH OF MASSACHUSETTS
TOWN OF HULL

This is to Certify that Casey Mahoney dba Crave, Casey Mahoney, Mgr.

303 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:

Monday through Sunday: 6:00 AM – 8:00 PM

/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 Avenue
Tel: 781-925-2000

Common Vic Approval #2

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: CASEY MAHONEY

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 Casey Mahoney Date: 11-2-23

By signing above you are verify the accuracy of all information

Full Legal Name of the Business: CRAVE

Full Street Address of the Business: 45 Hull Shore Dr

Mailing Address of the Business (if different): 303 Nantasket Ave

Telephone Number of the Business (if different): _____

Current Owner/Manager of Record: CASEY MAHONEY

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- 33

FEE \$50.00

THE COMMONWEALTH OF MASSACHUSETTS
TOWN OF HULL

This is to Certify that Casey Mahoney dba Crave, Casey Mahoney, Mgr.

43 Hull Shore Drive (At the The Nantasket beach Resort)

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: 7:00 AM – 3:00 PM

/s/ Jennifer Constable

/s/ Donna Pursel

/s/ Irwin Nesoff

/s/ Domenico Sestito

/s/ Greg Grey

} Licensing
Authorities

ISSUED: January 01, 2023

(OVER)

Common Vic Approval # 3



**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: Placido Treviso

Applicant's E-Mail Addresses: Primary _____ Secondary _____

Applicant's (authorized) Signature [Signature] Date: 10-2-2023

By signing above you are verify the accuracy of all information

Full Legal Name of the Business: NANTASKET SEAFOOD + PIZZA LLC

Full Street Address of the Business: 533 B NANTASKET AVE HULL MASS 02045

Mailing Address of the Business (if different): SAME

Telephone Number of the Business (if different): 781-925-2803

Current Owner/Manager of Record: PLACIDO TREVISIO

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: 11:00 AM Tues: 11:00 AM Wed: 11:00 AM Thurs: 11:00 AM Fri: 11:00 AM Sat: 11:00 AM Sun: Closed

CLOSE: Mon: 9:00 PM Tues: 9:00 PM Wed: 9:00 PM Thurs: 9:00 PM Fri: 9:00 PM Sat: 9:00 PM Sun: Closed

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 Yes Size of Kitchen _____

Sink 3 Hot and Cold Water Yes Is there a Stove 2

Gas Burners 1 Electric Burners 1 Refrigerators 4

Bar _____ Lunch Counter _____ Tables # 4 1 12 Booths # 1
(no. of seats) (no. of seats) (no. of seats) (no. of seats)

Seating Capacity? Indoor 12 Outdoor _____ TOTAL Seating Capacity _____

Are there Restrooms for - Men ☐ Women ☐ Unisex 1

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 10-2-2023

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

2023-14

FEE

\$50.00

THE COMMONWEALTH OF MASSACHUSETTS
TOWN OF HULL

This is to Certify that Nantasket Seafood and Pizza LLC, Placido Treviso, Mgr.

533 B 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:

Mon-Sat: 11:00am-9:00pm

Sunday: Closed

/s/ Jennifer Constable

/s/ Donna Pursel

/s/ Irwin Nesoff

/s/ Domenico Sestito

/s/Greg Grey

Licensing
Authorities

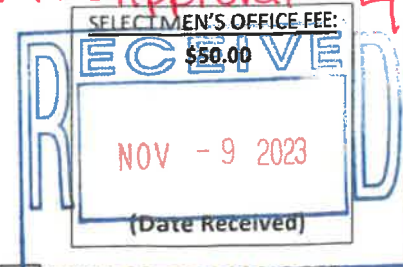
ISSUED: January 1, 2023

(OVER)



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

Common Vic Approval #4



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: P+N Bakeries Inc. DBA Weinberg's Bakery

Applicant's (authorized) Signature [Signature] Date: 11-5-2023

By signing above you are verify the accuracy of all information

Full Legal Name of the Business: P+N Bakeries Inc DBA Weinberg's Bakery

Full Street Address of the Business: 519 Nantasket Ave Hull Ma 02045

Mailing Address of the Business (if different):

Telephone Number of the Business (if different): 781-773-1009 781-214-9182

Current Owner/Manager of Record: Valerie Peterson

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

FID of the License:

Do you own ☐ or lease ☒ the premises? Bruce Minovitz

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

Hull, Ma 02045

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

2023-16

FEE

\$50.00

THE COMMONWEALTH OF MASSACHUSETTS
TOWN OF HULL

This is to Certify that P & N Bakeries, Inc. dba Weinberg's Bakery, Valerie Elizabeth Peterson, Mgr

519 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:

Monday through Friday: 5:00 AM – 5:00 PM

Saturday through Sunday: 6:00 AM – 5:00 PM

/s/Jennifer Constable

/s/ Donna Pursel

/s/ Irwin Nesoff

/s/ Domenico Sestito

/s/ Greg Grey

Licensing
Authorities

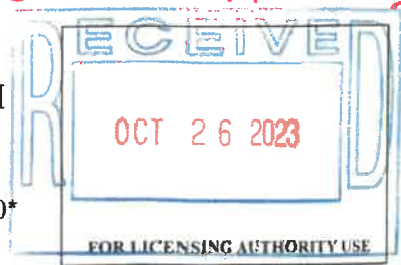
ISSUED: January 1, 2023

(OVER)

Package Store Approval #1



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: Madhu Inc.
Business Name (dba) if different: Smart Save Variety
FID of Licensee: _____ Address of Premises: 169 Nantasket Ave Hull MA 02045
Phone Number of Premises: 781-773 1895 Business Email: nildip27@gmail.com
Business Mailing Address: ☒ Same as above
Owner of Business: Madhu Inc - Nilesh Patel
Manager of Record: Nilesh Patel
*Proposed Manager (must file COM with ABCC): same

Phone: _____ Residential Address : _____
Applicant's (authorized) Signature: Nilesh Patel 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: _____
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) _____ Indoor _____ Outdoor ☒ Total

Occupancy Number: _____

Entertainment License: ☐ Yes ☒ No

Request for New Year's Eve Extension?
☐ YES ☒ NO

Hull A2023-18

LICENSE

ABCC 00081-PK-0554

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

Wines and Malt Beverages

Not To Be Drunk on Premises

To: Madhu, Inc. dba Smart Save Variety Store, Nilesch Patel, Mgr.
169 Nantasket Ave

On the following described premises: First floor store with entrance/exit at Nantasket Ave. Back room has exit leading to Park Avenue. Walk-in cooler. back room for storage.

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: 10:00am-11:00pm
Unless Otherwise Advised by the
Licensing Authority

Jennifer Constable
Donna Pursel
Irwin Nesoff
Domenico Sestito
Greg Grey

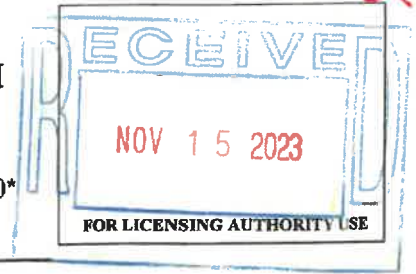
} Licensing
Authority



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: Tiger Wind Inc
 Business Name (dba) if different: Nantasket Liquor
 FID of Licensee: _____ Address of Premises: 307 Nantasket Ave
 Phone Number of Premises: 781 925 1000 Business Email: nantasket.wang@gmail.com
 Business Mailing Address: ☒ Same as above
 Owner of Business: Hong Jiang Wang
 Manager of Record: Hong Jiang Wang

*Proposed Manager (must file COM with ABCC): _____

Phone: _____

Residential Address: _____

Applicant's (authorized) Signature _____

Date: 10/16/2023

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: 9-11 Tues: 9-11 Wed: 9-11 Thurs: 9-11 Fri: 9-11 Sat: 9-11 Sun: 10-9

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: Tiger Wind, Inc. dba Nantasket Liquors, Hong Jiang Wang, Mgr.
307 Nantasket Ave

On the following described premises: One story cinder block building, consisting of room for sales and storage. One entrance, one rear entrance.

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 9:00am-11:00pm
Sun: 10:00am-9:00pm
Unless Otherwise Advised by the
Licensing Authority

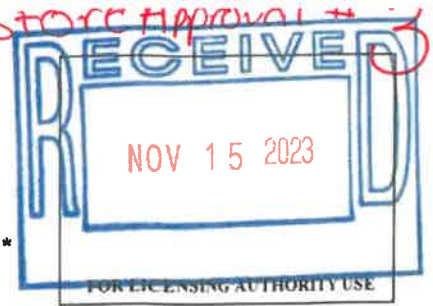
Jennifer Constable
Donna Pursel
Irwin Nesoff
Domenico Sestito
Greg Grey

} Licensing
Authority

Package Store Approval #

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: VILLAGE MARKET

Business Name (dba) if different: EAM MARKET INC

FID of Licensee: _____ Address of Premises: 505 NANTUCKET AVE, HULL MA

Phone Number of Premises: 781.925.3900 Business Email: _____

Business Mailing Address: ☒ Same as above _____

Owner of Business: JAMES McINNIS

Manager of Record: JAMES McINNIS

*Proposed Manager (must file COM with ABCC): _____

Phone: _____ Residential Address: _____

Applicant's (authorized) Signature [Signature] Date: 11/13/2023
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 _____ Total

Occupancy Number: _____

Entertainment License: ☐ Yes ☐ No

Request for New Year's Eve Extension?

☐ YES ☐ NO

Hull A2023-16

LICENSE

ABCC 89229-PK-0554

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: EAM Market, Inc. dba The Village Market, James Francis McInnis, Mgr.
505 Nantasket Ave

On the following described premises: Solid block building with solid concrete basement Store entrance and exit on Nantasket Ave. One large sales area. Cellar for storage. 11,000 sq. ft. retail grocery and convenience store.

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-10:00pm
Sun: 10:00am-10:00pm

Unless Otherwise Advised by the
Licensing Authority

Jennifer Constable
Donna Pursel
Irwin Nesoff
Domenico Sestito
Greg Grey

Licensing
Authority



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

Lodging House Approval



APPLICATION FOR LODGING HOUSE LICENSE

NEW _____ RENEWAL ☒ TRANSFER _____ AMENDMENT _____

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 Park Ave R.T., LLC
d/b/a if Applicable Nantasket Beach Lodging
Address of Lodging House 12 Park Ave Hull, MA
Lodging House Email Address Nantasket Beach Lodging @ Gmail . com
Lodging House Phone Number 781 925 1883
Description of Premises 28 room lodging house 4 1 bdrm apt

SECTION 3 – MANAGER AND/OR MANAGING COMPANY INFORMATION

Manager's Name Kirk Davis
Managing Company (if Applicable) _____
Managing Company's Mailing Address _____
Contact Person _____ Direct Line/Extension _____

SECTION 3 – LODGING HOUSE INFORMATION

Total # of Floors 4 Total # of Rooms 28 a apt Total # of Lodgers varies

Do you have a Building Certificate? yes Expiration Date 12/31/23

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 [Signature]
Applicant Printed Name William Seroll

LICENSE NUMBER

2023-02

FEE

\$50.00

**THE COMMONWEALTH OF MASSACHUSETTS
TOWN OF HULL**

This is to Certify that a Lodging House License is hereby granted to Nantasket Beach Lodging, Kirk Davis, Mer.
at 12 Park 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 Grey

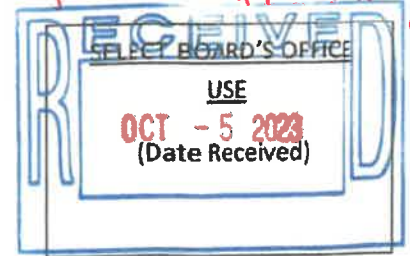
} Licensing
Authorities

(OVER)

Lodging House Approval #2



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



APPLICATION FOR LODGING HOUSE LICENSE

FEE \$50.00

NEW ☐ RENEWAL ☒ 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 Sandpiper Real Estate LLC
d/b/a if Applicable The Sandpiper Inn
Address of Lodging House 165 Nantasket Ave
Lodging House Email Address invoices.quality.preferred@gmail.com
Lodging House Phone Number 781-389-4992
Description of Premises lodging house

FID of the License: _____

SECTION 3 – MANAGER AND/OR MANAGING COMPANY INFORMATION

Manager's Name Steven Austin

Managing Company (if Applicable) _____

Managing Company's Mailing Address _____

Contact Person _____ Direct Line/Extension _____

SECTION 3 – LODGING HOUSE INFORMATION

Total # of Floors 3 Total # of Rooms 18 Total # of Lodgers 18

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 [Signature]

Applicant Printed Name Steve Austin

LICENSE NUMBER

2023-03

FEE

\$50.00

THE COMMONWEALTH OF MASSACHUSETTS
TOWN OF HULL

This is to Certify that a Lodging House License is hereby granted to The Sandpiper Inn, Steven Austin, Mgr.
at 165 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 Grey

} Licensing
Authorities

(OVER)

THE COMMONWEALTH OF MASSACHUSETTS

Town HULL OF HULL

**APPLICATION FOR A LICENSE TO BUY, SELL, EXCHANGE
OR ASSEMBLE SECOND HAND MOTOR VEHICLES
OR PARTS THEREOF**

I, the undersigned, duly authorized by the concern herein mentioned, hereby apply for a CLASS II class license, to Buy, Sell, Exchange or Assemble second hand motor vehicles or parts thereof, in accordance with the provisions of Chapter 140 of the General Laws.

1. What is the name of the concern? BEN'S AUTO

Business address of concern. No. 7 WESTON STREET St.,
HULL, MA City — Town.

2. Is the above concern an individual, co-partnership, an association or a corporation? _____

3. If an individual, state full name and residential address.

BENJAMIN CAPONE JR
HULL, MA 02045

4. If a co-partnership, state full names and residential addresses of the persons composing it.

5. If an association or a corporation, state full names and residential addresses of the principal officers.

President _____

Secretary _____

Treasurer _____

6. Are you engaged principally in the business of buying, selling or exchanging motor vehicles? _____

If so, is your principal business the sale of new motor vehicles? _____

Is your principal business the buying and selling of second hand motor vehicles? _____

Is your principal business that of a motor vehicle junk dealer? _____

7. Give a complete description of all the premises to be used for the purpose of carrying on the business.

wholesale only
NO CARS TO BE STORED ON SITE.

8. Are you a recognized agent of a motor vehicle manufacturer? _____

NO
(Yes or No)

If so, state name of manufacturer _____

9. Have you a signed contract as required by Section 58, Class 1? _____

NO
(Yes or No)

10. Have you ever applied for a license to deal in second hand motor vehicles or parts thereof? _____

(Yes or No)

If so, in what city — town _____

Did you receive a license? _____

(Yes or No)

For what year? _____

11. Has any license issued to you in Massachusetts or any other state to deal in motor vehicles or parts thereof ever been suspended or revoked? _____

NO
(Yes or No)

Sign your name in full _____

Benjamin Caplan
(Fully authorized to represent the concern herein mentioned)

Residence _____

IMPORTANT.

EVERY QUESTION MUST BE ANSWERED WITH
FULL INFORMATION, AND FALSE STATEMENTS
HEREIN MAY RESULT IN THE REJECTION OF
YOUR APPLICATION OR THE SUBSEQUENT
REVOCATION OF YOUR LICENSE IF ISSUED.

NOTE: If the applicant has not held a license in the year prior to this application, he must file a duplicate of the application with the registrar. (See Sec. 59)

License Number

2023-04

The Commonwealth of Massachusetts

Town Of Hull

Fee

\$100.00

USED CAR DEALER'S LICENSE-CLASS II

TO BUY AND SELL SECOND-HAND MOTOR VEHICLES

In accordance with the provisions of Chapter 140 of The General Laws with amendments thereto

Ben's Auto, Benjamin Capone Jr., Owner. is here by licensed to buy and sell second-hand motor vehicles at 7 Weston Street on premises described as follows:
an office with a desk and a phone

No Storage of Cars and No Onsite Repairs

/s/ Jennifer Constable

/s/ Donna Pursel

/s/ Irwin Nesoff

/s/ Domenico Sestito

/s/ Greg Grev

Licensing
Authority

This License Expires January 1, 20 24

THIS LICENSE MUST BE POSTED IN A CONSPICUOUS PLACE UPON THE PREMISES.

(OVER)

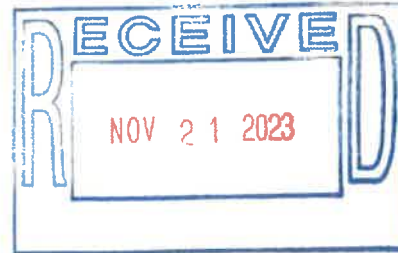
Correspondence # 1



HULL CONTRIBUTORY RETIREMENT BOARD

253 Atlantic Avenue
Hull, Massachusetts 02045
Phone: 781-925-2282 Fax: 781-925-8509

November 21, 2023



Greg Grey
Board of Selectmen
Town Hall
253 Atlantic Avenue
Hull, MA 02045

Dear Mr. Grey, Chairperson:

Please be advised that at the meeting of the Hull Retirement Board held Tuesday, November 21, 2023, the Board determined that Bartley Kelly and Christopher DiIorio were the only 2 candidates nominated for the third and fourth elected member positions of the Hull Retirement Board. Therefore it was voted to declare Bartley Kelly and Christopher DiIorio to be elected to the Hull Retirement Board in accordance with M.G.L. Chapter 32, 840 CMR 7.00. The term will commence on December 31, 2023 and expire on December 30, 2026.

If you have any questions or concerns regarding the above, please do not hesitate to call.

Sincerely,

Darrell M. Bright
Election Officer/Retirement Administrator
Hull Retirement Board

Cc: Town Clerk
PERAC



HULL CONTRIBUTORY RETIREMENT BOARD

253 Atlantic Avenue

Hull, Massachusetts 02045

Phone: 781-925-2282 Fax: 781-925-8509

Election by Declaration Announcement

It is hereby determined that Bartley Kelly and Christopher Dilorio were the only 2 candidates nominated for the third and fourth elected member positions of the Hull Retirement Board. Therefore, at the meeting of the Hull Retirement Board held on Tuesday, November 21, 2023, the Board voted to declare elected both Bartley Kelly and Christopher Dilorio to the Hull Retirement Board and that no election shall be held. The term will commence on December 31, 2023 and expire on December 30, 2026. Both Bartley Kelly and Christopher Dilorio will serve in all respects as though they had been elected by election.

Hull Retirement Board

Board Voted 11/21/2023