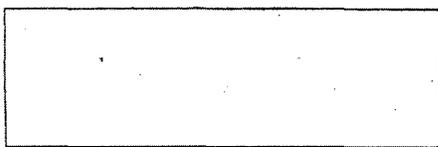


5/5/06-12

# Town of Acton License or Permit Application

For Town Use Only

To the Licensing Authorities of Acton:



The undersigned hereby makes application for the following described license, in accordance with the provisions of the General Laws, and amendments thereto.

Please indicate the License or Permit for which application is being made

- Auction      Entertainment      One Day Liquor      Common Victualler      Class 1 or 11
- Automated Amusement      24 Hour Permit      Fair or Sale      Concert      Other \_\_\_\_\_

Name of Organization/Applicant Pelagic Sailing Club  
 Location of Event NARA PARK  
 Name of Owner of Premises Town of Acton

**DESCRIPTION OF EVENT** (i.e.; Fee or donation charged?, Name of operators of event? Purpose of event? Parking availability?)

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

Date of Event: Aug 3, 06 Hours of Event or Operation 5:00 - 8:30

Name of person making application Charles Olmstead  
Occupation Retired

Residential Address 18 Kinsley Rd Acton, MA

Business Address \_\_\_\_\_

Telephone: Home 978 263 4320 Business \_\_\_\_\_

E-Mail Address: Charles.h.olmstead@verizon.net

Date of Naturalization, if not born in U.S. \_\_\_\_\_

Have you ever been arrested for any law violation?

Male or female M

If so, when \_\_\_\_\_

Date of Birth 3/21/34

Where \_\_\_\_\_

Place of Birth Detroit

State Briefly \_\_\_\_\_

Father's Name Charles Olmstead

Mother's Maiden Name Dean

Height 6 ft. 2 Inches

Weight 210

Complexion Fair

Hair Grey

Eyes Blue

References (names and addresses)

Don Mc Kinsley

Don Johnson

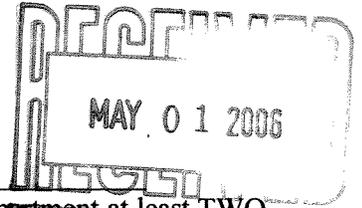
Bill Ryan

Signature of Applicant Charles Olmstead



**TOWN OF ACTON  
RECREATION DEPARTMENT**  
472 Main Street  
Acton, Massachusetts, 01720  
Telephone (978) 264-9608  
Fax (978) 264-9630  
www.acton-ma.gov  
**2006 APPLICATION FOR USE  
OF RECREATION FACILITIES**

Aug 3, 2006



**Complete Sections I & II only.** File application with the Acton Recreation Department at least **TWO WEEKS** prior to the date desired. Adult and Youth Organizations must provide a current Certificate of Liability Insurance and sign the Acton Recreation Field Use Permit and Weather Policy (available on-line or at the Rec. Dept.) for a Permit to be granted. Uncompleted applications will be returned. Please allow up to two weeks for your application to be processed. Upon approval of application, payment is due to secure your facilities rental and permit will be issued.

**Section I**

Application Date: 5/11/06 E-mail Address: Charles.h-olmstead@verizon.net  
Name of Organization: Pelagic Sailing Club  
Contact Person: Charles Olmstead Phone: Home (978) 263 4320  
Address: 18 Kinsley Rd Work ( ) \_\_\_\_\_  
Town/City: Acton State: MA Zip Code: 01720  
Organization: Resident Non- Resident \_\_\_\_\_ Number of Participants: 70  
Describe Activity: Picnic

**Section II**

**FACILITY/ FIELD REQUESTED: (PLEASE CHECK)**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Jones Field             | <input type="checkbox"/> School Street Field      | <input type="checkbox"/> 2A/27 Veteran's Field        |
| <input type="checkbox"/> Hart Field              | <input type="checkbox"/> MacPherson Field         | <input type="checkbox"/> Elm Street Field             |
| <input type="checkbox"/> Concord Road Field      | <input type="checkbox"/> NARA Park Softball       | <input type="checkbox"/> Great Hill Field             |
| <input type="checkbox"/> Little Great Hill Field | <input type="checkbox"/> NARA Park Soccer         | <input checked="" type="checkbox"/> NARA picnic area* |
| <input type="checkbox"/> NARA Park Bathhouse*    | <input type="checkbox"/> NARA Park Amphitheater   | <input type="checkbox"/> Jones Playground             |
| <input type="checkbox"/> Elm Street Playground   | <input type="checkbox"/> Elm Street Tennis Courts | <input type="checkbox"/> 2A/27 Playground             |
| <input type="checkbox"/> Goward Playground       | <input type="checkbox"/> Gardner Playground       | <input type="checkbox"/> NARA Playground              |

NARA Swimming (additional charge)

\* The Picnic Area and Bathhouse at NARA are not available for rental during NARA Youth and Mighty Mini Summer Program Hours.

**DATE REQUESTED: (We do not offer rain-dates)**

1<sup>st</sup> Choice Aug 3 Time Requested: Start Time: 5:30 End Time: 8:30

2<sup>nd</sup> Choice Aug 10 Time Requested: Start Time: 5:30 End Time: 8:30

Will Food/Beverages be Served? Yes If Yes, be specific lobster & clam chowder

Will Alcohol be Served?\* Yes Has a permit been obtained by the Board of Selectmen? \_\_\_\_\_

\*A separate application and fees for liquor license is obtained through the Town Manager's Office—please note this application if filed with the Board of Selectmen and is needed at least two weeks prior to your event).

**Equipment Requested:**

picnic tables 10 number needed \_\_\_\_\_ stage electricity (concerts only)

Catered

CANCELLATION MUST BE MADE AT LEAST 48 BUSINESS HOURS PRIOR TO THE EVENT, OTHERWISE APPLICANT WILL FORFEIT THE ENTIRE SECURITY DEPOSIT AND ANY FEES PAID. VIOLATION OF ANY SPECIAL REQUIREMENTS OF THIS PERMIT WILL RESULT IN A LOSS OF YOUR SECURITY DEPOSIT.

The Lessee or user of the facility/field will hold the Town of Acton and all its agents harmless from any problem resulting from the leasing or utilization of the premises. The Town of Acton reserves the right to cancel any permission, whenever, in its discretion, such cancellation seems advisable.

Chuck Adams  
(Representative's Signature)

5/1/06  
(Date)

Section III  
for office  
use only

REQUIRED SERVICES ASSIGNED:

- Fire – permit required for all cook-outs (Obtained at the Fire Department-separate fee through FD)
- Police
- Health Department Permit (Obtained at the Board of Health-separate fee with BOH)
- Swimming  Portable Toilets Required  Liquor License (see Section II)

ESTIMATED RENTAL FEES:

Bldg. Rental \$ \_\_\_\_\_ Field Rental \$ 60 Swimming Fee \$ \_\_\_\_\_ Electrical Fee \$ \_\_\_\_\_  
Security Deposit (required) \$ 250 (upon permit obtaining)

PERMIT FOR USE OF RECREATION FACILITIES

- THIS APPLICATION IS APPROVED FOR USE OF FACILITIES AS SCHEDULED.
- THIS APPLICATION IS DENIED FOR THE FOLLOWING REASONS:

\_\_\_\_\_

Permit issued by Wanda J. Johnson 5/1/06  
Recreation Director Date

Special Instructions: \_\_\_\_\_

Copy to:

- Grounds (Dave Lee)  Police  Fire
- Health Department  Town Manager  Lifeguards
- Authorized Rep.

Office use only: Application Received on: 5/1/06 By: mt  
Application approved denied on: 5/1/06  
Applicant contacted on: \_\_\_\_\_ by: phone email mail  
Second contact on: \_\_\_\_\_ by: phone email mail  
Payment by: cash check money order Application withdrawn: \_\_\_\_\_  
Amount Paid \$ 70 Date Paid 5/1/06

## Maryjane Kenney

---

**From:** Frank Widmayer  
**Sent:** Monday, May 01, 2006 11:43 AM  
**To:** Maryjane Kenney  
**Subject:** RE: Scan from Acton Town Hall

I have no problem with the issuance of the permit.

Frank J. Widmayer III  
Chief of Police  
(978) 263-2911

-----Original Message-----

**From:** Maryjane Kenney  
**Sent:** Monday, May 01, 2006 11:33 AM  
**To:** Frank Widmayer; Robert Craig; Doug Halley  
**Subject:** FW: Scan from Acton Town Hall

Frank/Bob/Doug

Attached please find a request for a one-day Liquor License at NARA park. Please return with comments before Friday, May 5th. The request will be on consent at the May 8th Board of Selectmen's Meeting. Thanks Maryjane

-----Original Message-----

**From:** ath-mgr-wcp90@acton-ma.gov [mailto:ath-mgr-wcp90@acton-ma.gov]  
**Sent:** Monday, May 01, 2006 10:41 AM  
**To:** Maryjane Kenney  
**Subject:** Scan from Acton Town Hall

Please see the attached document.

Sent by: Guest [ath-mgr-wcp90@acton-ma.gov]  
Number of Images: 2  
Attachment File Type: TIFF

Device Name: ATH-MGR-WCP90

## Maryjane Kenney

---

**From:** Doug Halley  
**Sent:** Monday, May 01, 2006 11:44 AM  
**To:** Maryjane Kenney; Frank Widmayer; Robert Craig  
**Subject:** RE: Scan from Acton Town Hall

The Board of Health has no issues with the request for a one-day liquor license at NARA on August 3, 2006.

-----Original Message-----

**From:** Maryjane Kenney  
**Sent:** Monday, May 01, 2006 11:33 AM  
**To:** Frank Widmayer; Robert Craig; Doug Halley  
**Subject:** FW: Scan from Acton Town Hall

Frank/Bob/Doug

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Device Name: ATH-MGR-WCP90

## Maryjane Kenney

---

**From:** Robert Craig  
**Sent:** Monday, May 01, 2006 2:12 PM  
**To:** Maryjane Kenney  
**Subject:** RE: Scan from Acton Town Hall

**Importance:** High

I have no issues or objections to the issuance of a one-day liquor license. Bob

-----Original Message-----

**From:** Maryjane Kenney  
**Sent:** Monday, May 01, 2006 11:33 AM  
**To:** Frank Widmayer; Robert Craig; Doug Halley  
**Subject:** FW: Scan from Acton Town Hall

Frank/Bob/Doug

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