

040(4)

**TOWN OF ACTON**  
472 Main Street  
Acton, Massachusetts, 01720  
Telephone (978) 929-6611  
Fax (978) 264-9630

**Steven L. Ledoux**  
Town Manager

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June 28, 2013

The Acton Beacon:  
Atten: Legals

Please place the following Legal **Notice** in the Thursday July 11, 2013 edition of the Acton Beacon in the Legal Section. *Please send bill to:*

Jenifer & John Apazidis  
298 Main Street  
Wayland, MA 01778  
857-636-0530

Very truly yours,

Christine M. Joyce  
Town Manager's Office

**Please confirm receipt to: [Christine.cjoyce@acton-ma.gov](mailto:Christine.cjoyce@acton-ma.gov)**

**Town of Acton  
Notice of Hearing**

Notice is hereby given under Chapter 138 of the General Laws, that the Board of Selectmen will hold a hearing in the Francis Faulkner Room in the Acton Town Hall on July 22, 2013 at 8:00 p.m. on the application of John Apazidis, to transfer the All Alcoholic beverage license from Nagog Mall, LLC, 3 Nagog Park to John Apazidis, Manager, d/b/a The Red Raven, Inc.

Application is on file in the Selectmen's Office and may be viewed during normal working hours.

**ACTON BOARD OF SELECTMEN**

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## Christine Joyce

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**From:** Frank Widmayer  
**Sent:** Friday, July 12, 2013 2:38 PM  
**To:** Christine Joyce  
**Subject:** RE: Red Raven Transfer of Liquor License from Nagog Development to The Red Raven,inc.

I have reviewed the documentation submitted by Jenifer & John Apazidis.

I recommend that the Board of Selectmen approve the transfer of the liquor license for Red Raven, Inc.

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

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

**From:** Christine Joyce  
**Sent:** Friday, July 12, 2013 10:15 AM  
**To:** Frank Widmayer; Patrick Futterer; Health Department; Collector Department  
**Subject:** Red Raven Transfer of Liquor License from Nagog Development to The Red Raven,inc.

Staff, please review the documents attached and comment for the July 22 BOS MTG before next Wednesday at noon. They have already been granted a Common Victuller and Entertainment license by the BOS

## Christine Joyce

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**From:** Christine Joyce  
**Sent:** Friday, July 12, 2013 10:15 AM  
**To:** Frank Widmayer; Patrick Futterer; Health Department; Collector Department  
**Subject:** Red Raven Transfer of Liquor License from Nagog Development to The Red Raven,inc.  
**Attachments:** Scanned from a Xerox multifunction device.pdf

Staff, please review the documents attached and comment for the July 22 BOS MTG before next Wednesday at noon. They have already been granted a Common Victuller and Entertainment license by the BOS

Chief Frank, the number you are looking for is: 46-2444836

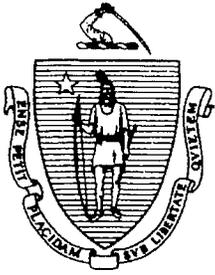
-----Original Message-----

**From:** [ATH-MGR-COPIER@acton-ma.gov](mailto:ATH-MGR-COPIER@acton-ma.gov) [<mailto:ATH-MGR-COPIER@acton-ma.gov>]  
**Sent:** Friday, July 12, 2013 10:09 AM  
**To:** Christine Joyce  
**Subject:** Scanned from a Xerox multifunction device

Please open the attached document. It was scanned and sent to you using a Xerox multifunction device.

Attachment File Type: pdf

multifunction device Location: Town Hall, 1st Floor  
Device Name: ATH-MGR-COPIER



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

For Reconsideration

FORM 43  
 MUST BE SIGNED BY LOCAL LICENSING AUTHORITY

600002

ABCC License Number

Acton

City/Town

July 22, 2013

Local Approval Date

TRANSACTION TYPE (Please check all relevant transactions):

- New License
- Transfer of License
- Change of Manager
- Cordials/Liqueurs Permit
- 6-Day to 7-Day License
- New Officer/Director
- Change of Location
- Alteration of Licensed Premises
- Issuance of Stock
- Management/Operating Agreement
- Pledge of License
- Pledge of Stock
- Transfer of Stock
- New Stockholder
- Wine & Malt to All Alcohol
- Change Corporate Name
- Seasonal to Annual
- Change of License Type
- Other

Name of Licensee: John Apazidis

EIN of Licensee: [REDACTED]

D/B/A: The Red Raven Inc.

Manager: John Apazidis

ADDRESS: 3 Nagog Park

CITY/TOWN: Acton

STATE: MA

ZIP CODE: 01720

Annual

Annual or Seasonal

All Alcohol

Category: (All Alcohol- Wine & Malt Wine, Malt & Cordials)

Restaurant

Type: (Restaurant, Club, Package Store, General On Premises, Etc.)

Complete Description of Licensed Premises:

2 story building consisting of 9,360 sq. ft. at Nagog Park

Application Filed: 7.1.13  
 Date & Time

Advertised: July 11, 2013  
 Date & Attach Publication

Abutters Notified: Yes  No

Licensee Contact Person for Transaction: Patricia Farnsworth - Lawson & Weitzen, LLP

Phone: 617-439 4990

ADDRESS: 88 Black Falcon Ave, Suite 345

CITY/TOWN: Boston

STATE: MA

ZIP CODE: 02210

Remarks: Transfer from Nagog Mall LLC. to The Red Raven, Inc. & Pledge of License

The Local Licensing Authorities By:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Alcoholic Beverages Control Commission  
 Ralph Sacramone  
 Executive Director

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

ABCC Remarks:

APPLICATION FOR RETAIL ALCOHOLIC BEVERAGE LICENSE

City/Town

**1. LICENSEE INFORMATION:**

A. Legal Name/Entity of Applicant:(Corporation, LLC or Individual)

B. Business Name (if different) :  C. Manager of Record:

D. ABCC License Number (for existing licenses only) :

E. Address of Licensed Premises:  City/Town:  State:  Zip:

F. Business Phone:  G. Cell Phone:

H. Email:  I. Website:

J. Mailing address (if different from E.):  City/Town:  State:  Zip:

**2. TRANSACTION:**

New License     New Officer/Director     Transfer of Stock     Issuance of Stock     Pledge of Stock  
 Transfer of License     New Stockholder     Management/Operating Agreement     Pledge of License

The following transactions must be processed as new licenses:  
 Seasonal to Annual     (6) Day to (7)-Day License     Wine & Malt to All Alcohol

IMPORTANT ATTACHMENTS (1): The applicant must attach a vote of the entity authorizing all requested transactions, including the appointment of a Manager of Record or principal representative.

**3. TYPE OF LICENSE:**

§12 Restaurant     §12 Hotel     §12 Club     §12 Veterans Club  
 §12 General On-Premises     §12 Tavern (No Sundays)     §15 Package Store

**4. LICENSE CATEGORY:**

All Alcoholic Beverages     Wine & Malt Beverages Only     Wine or Malt Only  
 Wine & Malt Beverages with Cordials/Liqueurs Permit

**5. LICENSE CLASS:**

Annual     Seasonal

**6. CONTACT PERSON CONCERNING THIS APPLICATION (ATTORNEY IF APPLICABLE)**

NAME: Patricia Farnsworth, Esq.  
ADDRESS: Lawson & Weitzen LLP 88 Black Falcon Avenue Suite 345  
CITY/TOWN: Boston STATE: MA ZIP CODE: 02210  
CONTACT PHONE NUMBER: (617) 439-4990 FAX NUMBER: (617) 439-3987  
EMAIL: tfarnsworth@lawson-weitzen.com

**7. DESCRIPTION OF PREMISES:**

Please provide a complete description of the premises to be licensed. Please note that this must be identical to the description on the Form 43.

A two story building consisting of approximately 9,360 sq. ft., Nagog Park

Total Square Footage: 9360 Number of Entrances: 1 Number of Exits: 4  
Occupancy Number: 345 Seating Capacity: 325

IMPORTANT ATTACHMENTS (2): The applicant must attach a floor plan with dimensions and square footage for each floor & room.

**8. OCCUPANCY OF PREMISES:**

By what right does the applicant have possession and/or legal occupancy of the premises? Final Lease

IMPORTANT ATTACHMENTS (3): The applicant must submit a copy of the final lease or documents evidencing a legal right to occupy the premises. Other:

Landlord is a(n): LLC Other:

Name: KVA Nagog LLC & Alevizos Nagog LLC Phone: 617-877-5895

Address: 396 Washington St. #325 City/Town: Wellesley State: MA Zip: 02481

Initial Lease Term: Beginning Date 5/16/2013 Ending Date 8/31/2020

Renewal Term: 1 Options/Extensions at: 5 Years Each

Rent: \$163,626.00 Per Year Rent: \$13,635.50 Per Month

Do the terms of the lease or other arrangement require payments to the Landlord based on a percentage of the alcohol sales?  
Yes  No

**IMPORTANT ATTACHMENTS( 4):**

1. If yes, the Landlord is deemed a person or entity with a financial or beneficial interest in this license. Each individual with an ownership interest with the Landlord must be disclosed in §10 and must submit a completed Personal Information Form attached to this application.
2. Entity formation documents for the Landlord entity must accompany the application to confirm the individuals disclosed.
3. If the principals of the applicant corporation or LLC have created a separate corporation or LLC to hold the real estate, the applicant must still provide a lease between the two entities.

**9. LICENSE STRUCTURE:**

The Applicant is a(n):  Other :

If the applicant is a Corporation or LLC, complete the following: Date of Incorporation/Organization:

State of Incorporation/Organization:

Is the Corporation publicly traded? Yes  No

**10. INTERESTS IN THIS LICENSE:**

List all individuals involved in the entity (e.g. corporate stockholders, directors, officers and LLC members and managers) and any person or entity with a direct or indirect, beneficial or financial interest in this license (e.g. landlord with a percentage rent based on alcohol sales).

**IMPORTANT ATTACHMENTS (5):**

A. All individuals or entities listed below are required to complete a Personal Information Form.

B. All shareholders, LLC members or other individuals with any ownership in this license must complete a CORI Release Form.

Name	All Titles and Positions	Specific # of Stock or % Owned	Other Beneficial Interest
John Apazidis	President	100% Stock Owned	
Peter Alevizos	Landlord	N/A	Percentage Rent To be Paid

\*If additional space is needed, please use last page.

**11. EXISTING INTEREST IN OTHER LICENSES:**

Does any individual listed in §10 have any direct or indirect, beneficial or financial interest in any other license to sell alcoholic beverages? Yes  No  If yes, list said interest below:

Name	License Type	Licensee Name & Address
	<input type="text" value="Please Select"/>	

\*If additional space is needed, please use last page.

**12. PREVIOUSLY HELD INTERESTS IN OTHER LICENSES:**

Has any individual listed in §10 who has a direct or indirect beneficial interest in this license ever held a direct or indirect, beneficial or financial interest in a license to sell alcoholic beverages, which is not presently held? Yes  No  If yes, list said interest below:

Name	Licensee Name & Address	Date	Reason Terminated
			Please Select
			Please Select
			Please Select

**13. DISCLOSURE OF LICENSE DISCIPLINARY ACTION:**

Have any of the disclosed licenses to sell alcoholic beverages listed in §11 and/or §12 ever been suspended, revoked or cancelled? Yes  No  If yes, list said interest below:

Date	License	Reason of Suspension, Revocation or Cancellation

**14. CITIZENSHIP AND RESIDENCY REQUIREMENTS FOR A (§15) PACKAGE STORE LICENSE ONLY :****A.) For Individual(s):**

1. Are you a U.S. Citizen? Yes  No
2. Are you a Massachusetts Residents? Yes  No

**B.) For Corporation(s) and LLC(s) :**

1. Are all Directors/LLC Managers U.S. Citizens? Yes  No
2. Are a majority of Directors/LLC Managers Massachusetts Residents? Yes  No
3. Is the License Manager or Principal Representative a U.S. Citizen?

**C.) Shareholder(s), Member(s), Director(s) and Officer(s):**

- 1.. Are all Shareholders, Members, Directors, LLC Managers and Officers involved at least twenty-one (21) years old? Yes  No

**15. CITIZENSHIP AND RESIDENCY REQUIREMENTS FOR (§12) RESTAURANT, HOTEL, CLUB, GENERAL ON PREMISE, TAVERN, VETERANS CLUB LICENSE ONLY:****A.) For Individual(s):**

1. Are you a U.S. Citizen? Yes  No

**B.) For Corporation(s) and LLC(s) :**

1. Are a majority of Directors/LLC Managers **NOT** U.S. Citizen(s)? Yes  No
2. Is the License Manager or Principal Representative a U.S. Citizen? Yes  No

**C.) Shareholder(s), Member(s), Director(s) and Officer(s):**

- 1.. Are all Shareholders, Members, Directors, LLC Managers and Officers involved at least twenty-one (21) years old? Yes  No

**16. COSTS ASSOCIATED WITH LICENSE TRANSACTION:**

A. Purchase Price for Real Property:	\$0.00
B. Purchase Price for Business Assets:	\$0.00
C. Costs of Renovations/Construction:	\$25,000.00
D. Initial Start-Up Costs:	\$100,000.00
E. Purchase Price for Inventory:	\$0.00
F. Other: (Specify) FFE	\$50,000.00
<b>G: TOTAL COST</b>	<b>\$175,000.00</b>
<b>H. TOTAL CASH</b>	<b>\$100,000.00</b>
<b>I. TOTAL AMOUNT FINANCED</b>	<b>\$75,000.00</b>

**IMPORTANT ATTACHMENTS (6):** Submit any and all records, documents and affidavits including loan agreements that explain the source(s) of money for this transaction. Sources of cash must include a minimum of three (3) months of bank statements.

The amounts listed in subsections (H) and (I) must total the amount reflected in (G).

**17. PROVIDE A DETAILED EXPLANATION OF THE FORM(S) AND SOURCE(S) OF FUNDING FOR THE COSTS IDENTIFIED ABOVE (INCLUDE LOANS, MORTGAGES, LINES OF CREDIT, NOTES, PERSONAL FUNDS, GIFTS):**

The landlord is contributing most of the build-out as part of the lease agreement and also loaning to Tenant 25,000. The remaining \$100,000.00 +/- will come from a direct family member. Note that all build out labor is being done at no cost by the owner (John Apazidis, Licensed Contractor (Unrestricted CSL) and his father, George Apazidis.

\*If additional space is needed, please use last page.

**18. LIST EACH LENDER AND LOAN AMOUNT(S) FROM WHICH "TOTAL AMOUNT FINANCED" NOTED IN SUB-SECTIONS 16(I) WILL DERIVE:**

A.

Name	Dollar Amount	Type of Financing
George Apazidis	\$100,000.00	Loan

\*If additional space is needed, please use last page.

B. Does any individual or entity listed in §19 as a source of financing have a direct or indirect, beneficial or financial interest in this license or any other license(s) granted under Chapter 138? Yes  No

If yes, please describe:

**19. PLEDGE: (i.e. COLLATERAL FOR A LOAN)**

A.) Is the applicant seeking approval to pledge the license?  Yes  No

1. If yes, to whom: Peter Alevizos

2. Amount of Loan: 25000 3. Interest Rate: none 4. Length of Note: 7 years

5. Terms of Loan : see promissory note

B.) If a corporation, is the applicant seeking approval to pledge any of the corporate stock?  Yes  No

1. If yes, to whom:

2. Number of Shares:

C.) Is the applicant pledging the inventory?  Yes  No

If yes, to whom:

**IMPORTANT ATTACHMENTS (7):** If you are applying for a pledge, submit the pledge agreement, the promissory note and a vote of the Corporation/LLC approving the pledge.

**20. CONSTRUCTION OF PREMISES:**

Are the premises being remodeled, redecored or constructed in any way? If YES, please provide a description of the work being performed on the premises:  Yes  No

The premises are being remodeled to create a newer, cleaner space. We are adding a bar to the first story of the building (currently there is a bar only on second floor) and will be updating the entrance, all bathrooms (adding one), to meet ADA Guidelines. We will be refinishing existing furniture and purchasing some new furniture. The existing kitchen and bars will be cleaned, maintained and items repaired as necessary. We will be working with the local building, health and fire departments to ensure that the premises meet or exceed code and expectations for the renovations. We are also landscaping, painting and updating exterior.

21. ANTICIPATED OPENING DATE: September 1, 2013

IF ALL OF THE INFORMATION AND ATTACHMENTS ARE NOT COMPLETE THE APPLICATION WILL BE RETURNED

The Commonwealth of Massachusetts  
Alcoholic Beverages Control Commission  
239 Causeway Street  
Boston, MA 02114  
[www.mass.gov/abcc](http://www.mass.gov/abcc)

PETITION FOR CHANGE OF LICENSE

60002  
ABCC License Number

Acton, MA  
City/Town

The licensee The Red Raven, Inc. respectfully petitions the Licensing Authorities to approve the following transactions:

- |   |  |
|---|--|
| <input type="checkbox"/> Change of Manager                  | <input type="checkbox"/> Alteration of Premises  |
| <input checked="" type="checkbox"/> Pledge of License/Stock | <input type="checkbox"/> Cordial & Liqueurs  |
| <input type="checkbox"/> Change of Corporate Name           | <input type="checkbox"/> Change of Location  |
| <input type="checkbox"/> Change of DBA                      | <input type="checkbox"/> Change of License Type (\$12 ONLY, e.g. "club" to "restaurant") |

Change of Manager

Last-Approved Manager:

Requested New Manager:

Pledge of License /Stock

Loan Principal Amount: \$  Interest Rate:

Payment Term:  Lender:

Change of Corporate Name/DBA

Last-Approved Corporate Name/DBA:

Requested New Corporate Name/DBA:

Change of License Type

Last-Approved License Type:

Requested New License Type:

Alteration of Premises: (must fill out attached financial information form)

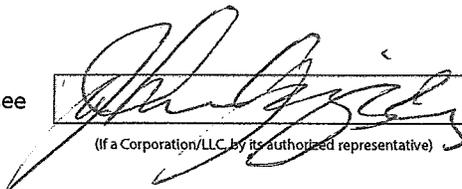
Description of Alteration:

Change of Location: (must fill out attached financial information form)

Last-Approved Location:

Requested New Location:

Signature of Licensee

  
(If a Corporation/LLC, by its authorized representative)

Date Signed

06/26/2013 7/1/13

Corporate Vote  
June 27, 2013

At a meeting of the Board of Directors of The Red Raven, Inc., held at 298 Main Street Wayland MA 01778 on June 27, 2013 it was duly voted that the Corporation apply to the Licensing Board for the Town of Acton, MA for a Retail Liquor License to be transferred from Nagog Mall LLC for the year 2013 to be exercised on the premises known as The Red Raven located at 3 Nagog Park, Acton MA 01720.

“VOTED: To authorize John Apazidis to sign the application for the license as the President of the Corporation in the name of The Red Raven, Inc. and to execute in its behalf any necessary papers, and to do all things required relative to the granting of the license.”

“VOTED: To appoint John Apazidis of 298 Main Street, Wayland MA 01778 as its manager and principal representative, with full authority and control of the premises described in the license of the Corporation and of the conduct of all business therein relative to alcoholic beverages as the licensee itself could in any way have and exercise if it were a natural person resident in the Commonwealth of Massachusetts and that a copy of this vote duly certified by the Clerk of the Corporation and delivered to said manager or principal representative shall constitute written authority required by Sec. 26, Chap. 138, G.L.”

“VOTED: To file the application to Pledge the license to KVA Nagog LLC and Alevizos LLC under the terms of the Promissory Note dated June 27, 2013.”

This is to certify that all the directors of The Red Raven, Inc. a Corporation duly organized under the laws of the Commonwealth of Massachusetts, are citizens of the United States and a majority are residents of the Commonwealth.

  
Jennifer Apazidis, Secretary (Clerk) 6/27/13



The Commonwealth of Massachusetts  
 Alcoholic Beverages Control Commission  
 239 Causeway Street  
 Boston, MA 02114  
[www.mass.gov/abcc](http://www.mass.gov/abcc)

**PERSONAL INFORMATION FORM**

Each individual listed in Section 10 of this application must complete this form.

**1. LICENSEE INFORMATION:**

A. Legal Name of Licensee  B. Business Name (dba)

C. Address  D. ABCC License Number (if existing licensee)

E. City/Town  State  Zip Code

F. Phone Number of Premise  G. EIN of License

**2. PERSONAL INFORMATION:**

A. Individual Name  B. Home Phone Number

C. Address

D. City/Town  State  Zip Code

E. Social Security Number  F. Date of Birth

G. Place of Employment

**3. BACKGROUND INFORMATION:**

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

If yes, as part of the application process, the individual must attach an affidavit as to any and all convictions. The affidavit must include the city and state where the charges occurred as well as the disposition of the convictions.

**4. FINANCIAL INTEREST:**

Provide a detailed description of your direct or indirect, beneficial or financial interest in this license.

**IMPORTANT ATTACHMENTS (8):** For all cash contributions, attach last (3) months of bank statements for the source(s) of this cash.  
 \*If additional space is needed, please use the last page

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

Signature  Date

Title  (If Corporation/LLC Representative)



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

**MANAGER APPLICATION**

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

**1. LICENSEE INFORMATION:**

Legal Name of Licensee:  Business Name (dba):

Address:

City/Town:  State:  Zip Code:

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

**2. MANAGER INFORMATION:**

A. Name:  B. Cell Phone Number:

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

**3. CITIZENSHIP INFORMATION:**

A. Are you a U.S. Citizen: Yes  No  B. Date of Naturalization:  C. Court of Naturalization:

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

**4. BACKGROUND INFORMATION:**

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

If yes, please describe:

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

If yes, please describe:

C. Have you ever been the Manager of Record of a license that was issued by this Commission? Yes  No

If yes, please describe:

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

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

Signature

Date



## Server Training Manual

Edition Date: September 2013

## SECTION XI ALCOHOL AWARENESS

The privilege of serving alcohol safely to our customers is one of the most important responsibilities you have as a server. This section will cover our Policies & Procedures and your responsibilities to our customers and this establishment.

All employees are required to have a valid TIPS certification on file during their time of employment. In addition all employees are required to adhere to the following policies. Failure to do so will result in immediate dismissal. Errors in the following policy, which result in accident, injury or material damage could result in loss of our liquor license and/or prosecution of you (the employee) and management.

### The Two Golden Rules

- I. Everyone benefits when alcohol is served safely.
- II. When in DOUBT, DO NOT SERVE.

### POLICIES & PROCEDURES

1. Any person who appears to be under the age of 30 must present a valid ID. The following are the only acceptable forms of identification:
  - i. Valid Massachusetts Drivers License
  - ii. Valid Liquor ID
  - iii. Valid Passport
  - iv. Valid Active Military ID
  
2. Determine validity of age by:
  - a. Asking customer to remove ID from wallet
  - b. Checking Birth Date
  - c. Checking Expiration Date
  - d. Compare Photo with Customer
  - e. Examine lamination, composition (refer to ID book), seals and holograms.
  - f. Review all type/photos to look for alterations and cuts/abrasions in ID
  - g. Communicate with customer by asking questions to test their knowledge such as:
    - i. What is your street address?
    - ii. What is your astrological sign?
    - iii. What year did you graduate high school?
    - iv. What is your SS or License Number?
    - v. May I see a second form of ID?

If you still have any doubts , DO NOT SERVE.

3. If an underage customer comes in with someone (of legal age) other than a family member, assume that the customer of legal age may be purchasing alcoholic beverages for the underage customer. If a new customer (of legal age) comes to the bar to order two drinks, you **MUST** review the ID's of both parties that the beverages are intended for. Do not let any underage persons handle alcohol or sit at the bar. Underage persons are allowed to sit in the Pub area and on the deck when accompanied by family members that are of age. Always monitor underage persons in the pub to ensure others are not serving them.
4. Never allow any customers to bring any containers of alcoholic beverages onto the restaurant premises. Any customer trying to bring in alcoholic beverages should not be granted admittance to our restaurant. If a guest is found to have concealed an alcoholic beverage and it is discovered inside the restaurant, confiscate the beverage, dispose of it in the sink and notify management so that they can close out the customer and request that they leave.
5. We are here to make sure our guests have a pleasurable and safe experience. This includes monitoring their consumption of alcoholic beverages and never selling alcohol to an intoxicated person. All customers should be treated with respect and by being friendly and offering alternatives you can often avoid most problems. However management should become involved if an incident escalates and needs to be documented. Below are some examples of Behavioral Cues that will help you identify a customer who may be intoxicated:
  - a. Loss of inhibitions, such as being over talkative, overly relaxed, overly friendly and/or loud behavior/mood swings.
  - b. Exhibiting poor judgment, inappropriate behavior, using foul language and telling off color jokes.
  - c. Glassy, unfocused eyes, moving very slowly, forgetting things, losing train of thought, slurred.
  - d. Stumbling, swaying dropping belongings or having trouble handling items.
6. If any of the above are occurring, the decision should be made to not serve this guest anymore. You can take some of the following steps to make the guest comfortable and safe:
  - a. Offer them a non-alcoholic beverage (Still or Sparkling Water) and bring them some bread, chips, etc. "On the house".
  - b. Offer to call them a cab, enlist their friends who are not intoxicated to help with getting the guest home safely.
7. **DOCUMENTATION:** The following should be documented in as much detail and as close to the time of the event as possible (to ensure accuracy). All of

the following should be reported to the manager on duty and they will assist in resolution (if necessary) and documentation.

- a. The Refusal of Service Report should be filled out whenever a guest is refused service for obvious intoxication or when exhibiting Behavioral Cues that lead you to believe the guest is intoxicated. This is for guests to who we have NOT served any alcohol, this is NOT a shut-off report.
- b. The Shut-off Report should be filled out when a customer has been denied any further service of alcoholic beverages by you.  
\*IMPORTANT NOTE\* Our goal as a team is to not allow our guests to get to this point in our establishment, it is YOUR JOB to make sure all guests are drinking responsibly and that their experience is safe and enjoyable.
- c. Management must sign off on all Incident Reports



