

**From:** [Frank Widmayer](#)  
**To:** [Lisa Tomyl](#)  
**Subject:** RE: One Day Alcoholic Beverage License, Mike Miller  
**Date:** Friday, June 05, 2015 11:34:27 AM

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Lisa,

I have reviewed the application and I recommend approval by the Board of Selectmen.

Regards,  
Frank

Frank J. Widmayer III  
Chief of Police

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**From:** Lisa Tomyl  
**Sent:** Friday, June 05, 2015 11:15 AM  
**To:** Frank Widmayer  
**Subject:** One Day Alcoholic Beverage License, Mike Miller

Please review and comment as needed.

Regards,

Lisa Tomyl  
Executive Assistant  
Office of the Town Manager  
472 Main Street  
Acton, MA 01720  
(p) 978.929.6611  
(f) 978.929.6350  
[ltomyl@acton-ma.gov](mailto:ltomyl@acton-ma.gov)



**ONE DAY ALCOHOLIC BEVERAGES LICENSE APPLICATION**

To the Licensing Authorities of Acton:

The undersigned hereby makes application for a one day liquor license, in accordance with the provisions of the General Laws, and amendments thereto.

It is strongly recommended that the application and fee be submitted to the Town Manager's Office no later than 3 weeks prior to the event date.

Wine/Malt Only: \$25.00, non-refundable only

Payable to: Town of Acton, check only

Name of Applicant/Organization: Mike Miller

Location of Event : NARA Park

Name of Owner on Premises: Town of Acton

1. Name and Description of Event:  
Family and Friends BBQ

2. Event Date: 7/18/15

3. Hours of Event (from/to): 12pm - 4pm

4. Expected number of people : 50-100  
(if over 50 guests, a TIPS or equivalent trained bartender is required)

5. Age range of attendees : 25-70

7. Do you intend to supply/hire a TIPS certified bartender (if so, must supply proof of course completion) (circle one) **YES** N O

Name of person making application: Mike Miller

Residential Address: 136 Central St, Acton MA 01720

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

Home Telephone: N/A Business/Cell:  
978 621 2518

Email: Michael@vanishingreality.com

Have you ever been convicted for any law violation? (circle one) YES NO

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

Where: \_\_\_\_\_

State briefly: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of Applicant: Michael M Miller

Digitally signed by Michael M Miller  
DN: cn=Michael M Miller, o, ou,  
email=Michael@vanishingreality.com, c=US  
Date: 2015.06.01 14:05:30 -0400

Date: \_\_\_\_\_

<b>For Town Use Only</b>	
Fire Department:	Approve / Deny
Police Department:	Approve / Deny
Board of Selectmen	Approve / Deny
Comments:	