



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 **Payable to:** Town of Acton, check only

Name of Applicant/Organization: Boston Events

Location of Event: NARA Park

Name of Owner on Premises: Douglas Gordon

1. Name and Description of Event: Concerts @ NARA Park

2. Event Date: July 10th, July 17th, July 24th

3. Hours of Event (from/to): 4-11 pm.

4. Expected number of people: 200
(if over 50 guests, a TIPS or equivalent trained bartender is required with proof of certification accompanying the application for file)

5. Age range of attendees: 21+

Name of person making application: Douglas Gordon

Residential Address: 21 Daniels Rd. Framingham MA 01701

Business Address: 1252 Boylston St Boston MA 02215

Home Telephone: 617-715 8034 Business/Cell: 617 719 8034

Email: Gordon.Doug4@gmail.com

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

If so, when: _____

Where: _____

State briefly: _____

Signature of Applicant: 

Date: 1/27/14

For Town Use Only	
Police Department:	Approve / Deny
Board of Selectmen	Approve / Deny
TIPS Certification Copy	YES/NO
Comments:	
Check #:	

This is your Official TIPS® Certification Card.

Carry it with you as evidence of your skills and knowledge in the responsible sale and consumption of alcohol.

Congratulations!

By successfully completing the TIPS (Training for Intervention ProcedureS) program, you have taken your place in the forefront of a nationwide movement to reduce the tragedies resulting from the misuse of alcohol. We value your participation in the TIPS program.

You will help to provide a safer environment for your patrons, peers and/or colleagues by using the techniques you have learned and taking a positive approach towards alcohol use.

If you have any information you think would enhance the TIPS program, or if we can assist you in any way, please contact us at 703-524-1200. Thank you for your dedication to the responsible sale and consumption of alcohol.

Sincerely,



Adam F. Chafetz
President, HCI

IMPORTANT: Keep a copy of this card for your records. Write down your certification number because you will need it when contacting TIPS. For assistance or additional information, contact Health Communications, Inc. by using the information provided on the reverse side of your certification card. There is a minimal charge for a replacement card if your original card becomes lost, damaged or stolen.

TIPS eTIPS On Premise 2.0	SSN:	XXX-XX-XXXX
Issued: 8/21/2015	Expires:	8/21/2018
ID#: 4063156	D.O.B.:	XX/XX/XXXX

Douglas Gordon
21 Daniels Rd
Framingham, MA 01701-2703

For service visit us online at www.gettips.com

Lisa Tomyl

From: Frank Widmayer
Sent: Monday, February 01, 2016 10:27 AM
To: Lisa Tomyl
Subject: RE: tip certification

Lisa,

In that case I am fine with the application and recommend that the Board of Selectmen approve the permit.

Regards,
Frank

Frank J. Widmayer III
Chief of Police

From: Lisa Tomyl
Sent: Monday, February 01, 2016 8:20 AM
To: Frank Widmayer
Subject: FW: tip certification

Here is a copy of the TIP certification for Douglas Condon for the events in July at NARA Park.

From: Douglas Gordon [<mailto:gordon.doug4@gmail.com>]
Sent: Sunday, January 31, 2016 5:19 PM
To: Lisa Tomyl
Subject: tip certification

as requested...DG