



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: Infant Toddler Children's Center

Location of Event: Village works - 525 Mass Ave Acton, MA 01720

Name of Owner on Premises: Mathias Rosenfield

1. Name and Description of Event: Annual Auction for ITC

2. Event Date: April 30, 2016

3. Hours of Event (from/to): 7-10

4. Expected number of people: 120
(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: 35-45

Name of person making application: Lydia Higgins

Residential Address: 174 Arlington St. Acton, MA 01720

Business Address: "

Home Telephone: 978-635-5313

Business/Cell: 978-758-3110

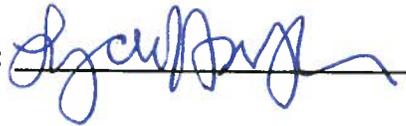
Email: lydia.higgins@gmail.com

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

If so, when: _____

Where: _____

State briefly: _____

Signature of Applicant: 

Date: 4-1-16

For Town Use Only	
Police Department:	Approve / Deny
Board of Selectmen	Approve / Deny
TIPS Certification Copy	YES/NO
Comments:	
Check #: 831	

Do not click Back-Space to leave this window

Certificate of Completion

This Certificate of Completion of

eTIPS On Premise 2.0

For coursework completed on February 2, 2016
provided by Health Communications, Inc.
is hereby granted to:

Meghan Majors

Certification to be sent to:

**True West Brewery
525 Massachusetts Ave
Acton MA, 01720-2959 USA**



HEALTH COMMUNICATIONS INC.



This document is not proof of TIPS certification. It signifies only that you have completed the course. Valid certification documents will be forwarded to you.

From: [Frank Widmayer](#)
To: [Lisa Tomyl](#)
Subject: RE: One Day Alcoholic Beverage License - Infant Toddler Children's Center
Date: Wednesday, April 06, 2016 4:08:01 PM

Lisa,

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

Regards,
Frank

Frank J. Widmayer III
Chief of Police

From: Lisa Tomyl
Sent: Monday, April 04, 2016 8:53 AM
To: Frank Widmayer
Subject: One Day Alcoholic Beverage License - Infant Toddler Children's Center

Please comment as needed.

Regards,

Lisa Tomyl

Executive Assistant
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