



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: Donna McGavick

Location of Event: NARA Park Amphitheatre

Name of Owner on Premises: _____

1. Name and Description of Event: Patrick McGavick Graduation Party

2. Event Date: 6/11/16

3. Hours of Event (from/to): 5-11 pm

4. Expected number of people: 150-175
(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: 7-79

Name of person making application: Donna McGavick

Residential Address: 7 Sawmill Rd Acton MA

Business Address: _____

Home Telephone: 978-264-0071

Business/Cell: 508-277-9934

Email: d.g.mcgarvick@comcast.net



Apr. 8. 2016 1:03PM

No. 0647 P. 1

CERTIFICATION NUMBER: 83374

ALCOHOL INTERVENTION METHODS

CERTIFIES:

Laura-Beth Chaput

CAMPBELL TRENT
508 756-8542

EXPIRES:
OCT 26 2018

From: [Frank Widmayer](#)
To: [Lisa Tomyl](#)
Cc: [PSF Police Command](#)
Subject: RE: One Day Alcoholic Beverage License, Donna McGavick
Date: Wednesday, May 04, 2016 2:54:17 PM

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

Frank J. Widmayer III
Chief of Police

From: Lisa Tomyl
Sent: Monday, May 02, 2016 8:36 AM
To: Frank Widmayer
Subject: One Day Alcoholic Beverage License, Donna McGavick

Please comment as needed.

Regards,

Lisa Tomyl

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