



**CITY OF SOMERVILLE**  
Commonwealth of Massachusetts  
93 Highland Avenue  
Somerville, MA 02143  
(617) 625-6600

## SPECIAL ALCOHOL APPLICATION - Special Alcohol License

File #: 26-013147  
License #: SAL26-000016  
Address: 337 SOMERVILLE AVE 2B  
Licensee: Groundwork Somerville, Inc.

|  |   |
|--|---|
| <b># of days</b>   | 1   |
| <b>Is your Special Alcohol License related to a separate Public Event License application?</b> | No  |
| <b>What is the name of your event?</b>   | Bar Stars   |
| <b>Where will your event take place?</b>   | Block 3 Garage Roof in Assembly Row   |
| <b>Describe your event in detail:</b>  | Bar Stars is Assembly Row's popular cocktail competition that takes place annually in July. Participating Assembly Row restaurants and bartenders provide food + cocktail samples to attendees, who then vote for their favorites throughout the course of the evening. Bar Stars takes place on Thursday, July 9, 2026 from 6-8:30pm on the roof of the Block 3 Garage at Assembly Row. Federal Realty partners with a local non-profit each year to donate partial proceeds to. This year, Groundwork Somerville is the non-profit partner. |
| <b>What is your name?</b>  | John Spangenberg  |
| <b>Organization name (if none, write None):</b>  | Groundwork Somerville Inc.  |
| <b>Are you the party applying for the Special Alcohol License?</b>                             | Yes   |
| <b>Have you received a Special Alcohol License</b>   |   |

|  |   |
|--|---|
| <b>in the past?</b>  | Yes   |
| <b>Please Describe:</b>  | Groundwork received a license for last year's Bar Stars event |
| <b>What is your contact phone number?</b>  |   |
| <b>What is your contact email address?</b>   |   |
| <b>Please re-enter your contact email address here to ensure accuracy:</b>   |   |
| <b>Alcohol Service Begins date:</b>  | 07/09/2026  |
| <b>Alcohol Service Begins time:</b>  | 06:00 PM  |
| <b>Alcohol Service Ends date:</b>  | 07/09/2026  |
| <b>Alcohol Service Ends time:</b>  | 08:30 PM  |
| <b>Would you like to request additional dates?</b>   | Yes   |
| <b>Please enter the dates and times: (maximum 10 separated by commas)</b>  | Rain date: July 10, 2026 from 6 PM - 8:30 PM.                 |
| <b>Are you requesting more than 10 dates?</b>  | No  |
| <b>Confirm that you are applying for a Special Alcohol License to serve or sell alcohol to the public</b>  | Yes   |
| <b>What type of alcohol will you be serving?</b>   | All Forms of Alcohol (Non-Profit Organizations Only)          |
| <b>In the last 5 years, have you been found guilty, liable, or responsible, in any judicial or administrative proceeding, for any violation of the City Wage Theft Ordinance or any State or Federal laws or regulations regulating the payment of wages?<a href="#">City Wage Theft Ordinance</a></b> | No  |
| <b>What is the budget for this event?</b>  | 10000.00  |
| <b>Will your event be indoors or outdoors?</b>   | Outdoors  |
| <b>Estimated number of people attending your event:</b>  | 500   |
| <b>Estimated maximum attendance at your event at one time:</b>   | 530   |
| <b>Will your event have food?</b>  | Yes   |
| <b>Please describe:</b>  | Local restaurants will serve individual food/snack plates     |

|  |  |
|--|--|
| <b>Will your event feature open grilling?</b>  | No   |
| <b>Will your event have any structures?<br/>Structures include, but are not limited to, tents and bouncy houses.</b>   | No   |
| <b>Will there be any amplified music of any kind at your event?</b>  | No   |
| <b>Small Bluetooth speaker</b>   | 0  |
| <b>Large powered speakers</b>  | 0  |
| <b>Live band with powered speakers</b>   | 0  |
| <b>Will your event have restrooms?</b>   | Yes  |
| <b>Please describe the restrooms being provided, and if you are providing portable toilets, state how they will be delivered and removed:</b>  | There are public restrooms located in the Block 4 garage. Federal Realty contracts Millennium to set up and remove two porta potties for Bar Stars â located on the event level. |
| <b>If granted, confirm that you will be purchasing the alcohol for your Special Alcohol License from an authorized distributor. The current list of authorized distributors can be found here: <a href="#">Authorized sources</a></b>  | Yes  |
| <b>If granted, further confirm that you understand that you <u>cannot</u> purchase the alcohol for your Special Alcohol License from a liquor or package store.</b>  | Yes  |
| <b>If granted, will your alcohol server(s) be TIPS certified (or similar)?</b>   | Yes  |
| <b>Confirm that you understand that a fire and/or police detail may be required as a condition of approval for this license, and that if it is, you will be contacted by a representative from the respective department and will be responsible for any associated costs.</b> | Yes  |

**Approved By:**

**Albert Bargoot, Approved**

**Maureen Lee, Approved with Conditions**

ISD Health has approved with the condition a Coordinators Checklist is submitted 30 days prior to the event. Please contact Arturo Vazquez, copied above, if assistance is needed.

**Andrea Torres, Approved**

**Francis Otting, Approved with Conditions**

Two Somerville Fire Detail members will be required due to the anticipated crowd size. Apply for a fire permit on CitizenServe (subtype "Fire Detail") and provide accurate billing information for the invoice.

**Mackenzie Richardson, Approved with Conditions**

Consider hiring police details with a large crowd expected - Detail Office 617-625-1600 x7266

# LICENSING COMMISSION LICENSE APPLICATION

City of Somerville, Commonwealth of Massachusetts

Application #: SFW26-000005

File #: 26-012404

**Business Name:** Aaronap Cellars

**Application Type:** Special Farmer Winery (agricultural events)

**Location:** 375 Assembly Row

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## APPLICANT

**Company Name:** Aaronap Cellars LLC

**Business Address:**

28 Carlisle Road  
Westford, MA 01886

**Manager of Establishment:** Noel Powell

**Manager Email:** noel@aaronapcellars.com

**Manager Phone Number:** 9786927510

## Approval Conditions

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## BUSINESS INFORMATION

**Legal Name of the Proposed Licenseholder (Name of Corporation, LLC, Partnership/LLP, Trust, Sole Proprietor, Other)**

Aaronap Cellars LLC

**DBA Name**

Aaronap Cellars

**In the last 3 years, have you admitted liability or been found liable under any state or federal law regulating the payment of wages to employees, or the collection of debt from employees?**

**In the last 5 years, have you been found guilty, liable, or responsible, in any judicial or administrative proceeding, for any violation of the City Wage Theft Ordinance or any State or Federal laws or regulations regulating the payment of wages?**

No

[City Wage Theft Ordinance](#)

**Explain**

**Manager of your establishment**

Noel Powell

**Manager email**

**Manager phone**

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## OPERATING INFORMATION

**Name of agricultural event (each event must be applied for separately)**

Assembly Row Farmers Market

**Location of agricultural event**

375 Assembly Row, Somerville, MA 02145

|   |  |
|---|--|
| <b>Date(s) and time(s)</b>  | Fridays, June 12-October 9, 2026 3:00-7:00pm   |
| <b>What are you selling and/or sampling?</b>  | Farm wine to be selected for current inventory (Stonewall White, Riesling, PINK! Pinot+Pinot, Summer Blush, Liberty White, Chace Hill Red, Pinotage, Carmenere, Petite Pearl, Marquette, Gracie's Red, Forest Gold Maple)  |
| <b>Estimated attendance at any one time</b>   | 4  |
| <b>Estimated total attendance</b>   | 50   |
| <b>Have you ever obtained a Special Farmer Winery License before?</b>                   | Yes  |
| <b>Describe</b>   | Waltham (2017-2026), Ashland (2015-2026), Stoneham (2019-2026), Wilmington (2021-2026), Winchester (2024-2026), Hudson (2024-2026), Acton-Boxborough (2015-2026), Belmont (2024-2026), Dedham (2025-2026), Maynard (2024-2026), MA Cheese Festival in Somerville (2016-2018) |
| <b>Have you ever had a Special Farmer Winery License denied, suspended, or revoked?</b> | No   |
| <b>Describe</b>   |  |
| <b>Have you ever received a Notice of Violation?</b>                                    | No   |
| <b>Describe</b>   |  |

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**TERMS AND CONDITIONS**

**ACKNOWLEDGEMENT, RELEASE AND INDEMNIFICATION, AND WAGE THEFT ORDINANCE RECEIPT**

By clicking submit below, I certify that I am the Applicant or that I am duly authorized to act as an agent for the Applicant

I certify that all information provided on this application is true and accurate, and I acknowledge that any information found to be false or misleading will result in the forfeiture of this license and may result in a one-year wait before a new application can be submitted, as well as criminal prosecution.

I certify that the Applicant will make no changes to any component of the business plan described in this application without written notification to, and the prior approval of, the City.

I certify that the Applicant will adhere to any and all City ordinances, regulations, and conditions pertaining to this license, and I acknowledge that any violation of City ordinances, regulations, and conditions pertaining to this license could subject the Applicant and anyone operating under this license to arrest, fine, and loss of this license.

I acknowledge that the so-called Wage Theft Ordinance, part of the Municipal Ordinances, has been made

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available to me as part of this application process.

[download ordinance](#)

I certify that the applicant, to my best knowledge and belief, has filed all State tax returns and paid all State taxes required under law.

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I release, discharge and hold harmless, the City of Somerville, a municipal corporation of the Commonwealth of Massachusetts, and its officers, employees, agents and servants from all actions, causes of action, claims, demands, damages, costs, loss of services, expenses and compensation associated with the issuance of this license, and the conduct of anyone operating under this license.

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You must read and accept the above stated terms & conditions

Yes

# LICENSING COMMISSION LICENSE APPLICATION

City of Somerville, Commonwealth of Massachusetts

Application #: SFW26-000006

File #: 25-009405

**Business Name:** Far From the Tree LLC

**Application Type:** Special Farmer Winery (agricultural events)

**Location:** 44 DAY ST

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## APPLICANT

**Company Name:** Far From The Tree LLC

**Business Address:**

102 Jackson St  
Salem, MA 01970

**Manager of Establishment:** Alex Goldman

**Manager Email:** agoldman@farfromthetreecidier.com

**Manager Phone Number:** 9548057793

## Approval Conditions

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## BUSINESS INFORMATION

**Legal Name of the Proposed Licenseholder (Name of Corporation, LLC, Partnership/LLP, Trust, Sole Proprietor, Other)**

Far From the Tree LLC

**DBA Name**

Far From the Tree

**In the last 3 years, have you admitted liability or been found liable under any state or federal law regulating the payment of wages to employees, or the collection of debt from employees?**

**In the last 5 years, have you been found guilty, liable, or responsible, in any judicial or administrative proceeding, for any violation of the City Wage Theft Ordinance or any State or Federal laws or regulations regulating the payment of wages?**

No

[City Wage Theft Ordinance](#)

**Explain**

**Manager of your establishment**

Alex Goldman

**Manager email**

**Manager phone**

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## OPERATING INFORMATION

**Name of agricultural event (each event must be applied for separately)**

Davis Sq Farmers Market

**Location of agricultural event**

44 Day St, Somerville, MA 02144

|   |  |
|---|--|
| <b>Date(s) and time(s)</b>  | Wednesdays 5/20/26 - 11/25/26 12pm-6pm   |
| <b>What are you selling and/or sampling?</b>  | We will be sampling and selling 4-packs of locally produced hard cider   |
| <b>Estimated attendance at any one time</b>   | 30   |
| <b>Estimated total attendance</b>   | 50   |
| <b>Have you ever obtained a Special Farmer Winery License before?</b>                   | Yes  |
| <b>Describe</b>   | - Kendall square (Cambridge) 2024 - Central (Cambridge) 2024 - Copley (Boston) 2024 - Davis (Somerville) 2024 - Union Sq (Somerville) 2024 |
| <b>Have you ever had a Special Farmer Winery License denied, suspended, or revoked?</b> | No   |
| <b>Describe</b>   |  |
| <b>Have you ever received a Notice of Violation?</b>                                    | No   |
| <b>Describe</b>   |  |

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**TERMS AND CONDITIONS**

**ACKNOWLEDGEMENT, RELEASE AND INDEMNIFICATION, AND WAGE THEFT ORDINANCE RECEIPT**

By clicking submit below, I certify that I am the Applicant or that I am duly authorized to act as an agent for the Applicant

I certify that all information provided on this application is true and accurate, and I acknowledge that any information found to be false or misleading will result in the forfeiture of this license and may result in a one-year wait before a new application can be submitted, as well as criminal prosecution.

I certify that the Applicant will make no changes to any component of the business plan described in this application without written notification to, and the prior approval of, the City.

I certify that the Applicant will adhere to any and all City ordinances, regulations, and conditions pertaining to this license, and I acknowledge that any violation of City ordinances, regulations, and conditions pertaining to this license could subject the Applicant and anyone operating under this license to arrest, fine, and loss of this license.

I acknowledge that the so-called Wage Theft Ordinance, part of the Municipal Ordinances, has been made available to me as part of this application process. [download ordinance](#)

I certify that the applicant, to my best knowledge and

**belief, has filed all State tax returns and paid all State taxes required under law.**

**I release, discharge and hold harmless, the City of Somerville, a municipal corporation of the Commonwealth of Massachusetts, and its officers, employees, agents and servants from all actions, causes of action, claims, demands, damages, costs, loss of services, expenses and compensation associated with the issuance of this license, and the conduct of anyone operating under this license.**

**You must read and accept the above stated terms & conditions**

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Yes

# LICENSING COMMISSION LICENSE APPLICATION

City of Somerville, Commonwealth of Massachusetts

Application #: ALM26-000009

File #: 18-003508

**Business Name:** Urban Axes Boston, LLC

**Amendment Type:** Pledging Stock or License, Changing Owners, Officers or Directors, Changing Manager

**Location:** 2 UNION SQ

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## APPLICANT

**Company Name:** Urban Axes

**Business Address:**

2 Union Sq  
Somerville, MA 02143

**Enter your current business license #** AL18-000006

**Do you currently serve alcohol?** Yes

**ARE YOU CHANGING THE NAME OF YOUR BUSINESS?** No

**ARE YOU CHANGING YOUR MANAGER?** Yes

**Name of old manager** Kenya Claytor

**Name of new manager** Dominique Reade

**ARE YOU TRANSFERRING/ISSUING/PLEDGING STOCK, OR ARE YOU CHANGING DIRECTORS/OFFICERS /PARTNERS/TRUSTEES?** Yes

**Are you transferring/issuing/pledging stock?** No

**Are you changing directors/officers/partners/trustees?** Yes

**List the current directors/officers/partners/trustees with their titles** Krista Paton - LLC Manager Matthew Paton - LLC Manager  
Shaun Hurley - LLC Manager Danielle Palmer - LLC Manager

**List the proposed directors/officers/partners/trustees with their titles** Dominique Reade - General Manager Jennifer Johansson - HR Director

**ARE YOU ALTERING YOUR EXISTING PREMISES OR OUTDOOR SEATING? SELECT YES TO INLCUDE OUTDOOR SEATING FOR LICENSE** No

**ARE YOU ADDING, OR ENDING, THE SERVICE OF CORDIALS AND LIQUEURS?** No

**ARE YOU CHANGING YOUR HOURS OF OPERATION?** No

**ARE YOU CHANGING YOUR ENTERTAINMENT?** No

**Total Devices indoors** 0

**Total Devices Outdoors** 0.0

**Are you changing the type of alcohol you serve?** No

Have you ever received a Notice of Violation? No

**In the last 5 years, have you been found guilty, liable, or responsible, in any judicial or administrative proceeding, for any violation of the City Wage Theft Ordinance or any State or Federal laws or regulations regulating the payment of wages?** No  
[City Wage Theft Ordinance](.. /Documents/149/WAGE%20THEFT%20ORDINANCE.pdf target=NEW)

You must read and accept the above stated terms & conditions Yes

You must read and accept the above stated terms & conditions Yes

**Approved By:**

Andrea Torres, Approved

Mackenzie Richardson, Approved

# LICENSING COMMISSION LICENSE APPLICATION

City of Somerville, Commonwealth of Massachusetts

Application #: ALM26-000012

File #: 17-013594

**Business Name:** Chipotle Mexican Grill #1036

**Amendment Type:** Changing Operating Hours

**Location:** 274-276 ELM ST

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## APPLICANT

**Company Name:** Chipotle Mexican Grill #1036

**Business Address:**

PO BOX 182566

Columbus, OH 43218

**Enter your current business license #** AL-000211

**Do you currently serve alcohol?** No

**ARE YOU CHANGING THE NAME OF YOUR BUSINESS?** No

**ARE YOU CHANGING YOUR MANAGER?** No

**ARE YOU TRANSFERRING/ISSUING/PLEDGING STOCK,  
OR ARE YOU CHANGING DIRECTORS/OFFICERS  
/PARTNERS/TRUSTEES?** No

**ARE YOU ALTERING YOUR EXISTING PREMISES OR  
OUTDOOR SEATING? SELECT YES TO INLCUDE  
OUTDOOR SEATING FOR LICENSE** No

**ARE YOU ADDING, OR ENDING, THE SERVICE OF  
CORDIALS AND LIQUEURS?** No

**ARE YOU CHANGING YOUR HOURS OF OPERATION?** Yes

**How many years have you operated at this location?** 9 years

**Do you offer seating for the consumption of food on  
premises? changinghours** Yes

**Do you serve, sell or distribute alcohol indoors?** No

**Proposed hours to serve food indoors** 11:00 am - 11:00pm

**Current hours to serve food indoors** 11:00am - 10:00pm

**Proposed hours to serve food outdoors on private  
property** 11:00am to 11:00pm

**Current hours to serve food outdoors on private property** 11:00am - 10:00pm

**Proposed hours to serve food outdoors on public  
property** N/A

**Current hours to serve food outdoors on public property** N/A

**ARE YOU CHANGING YOUR ENTERTAINMENT?** No

|   |     |
|---|-----|
| <b>Total Devices indoors</b>  | 0   |
| <b>Total Devices Outdoors</b>   | 0.0 |
| <b>Have you ever received a Notice of Violation?</b>  | No  |
| <b>&lt;b&gt;almln the last 5 years, have you been found guilty, liable, or responsible, in any judicial or administrative proceeding, for any violation of the City Wage Theft Ordinance or any State or Federal laws or regulations regulating the payment of wages?&lt;br&gt;&lt;a href=../Documents/149/WAGE%20THEFT%20ORDINANCE.pdf target=NEW&gt;City Wage Theft Ordinance&lt;/a&gt;</b> | No  |
| <b>You must read and accept the above stated terms &amp; conditions</b>   | Yes |
| <b>You must read and accept the above stated terms &amp; conditions</b>   | Yes |

**Approved By:**

# LICENSING COMMISSION LICENSE APPLICATION

City of Somerville, Commonwealth of Massachusetts

Application #: ALM26-000016

File #: 26-010448

**Business Name:** LLH LLC

**Amendment Type:** Pledging Stock or License, Changing Owners, Officers or Directors

**Location:** 145 Middlesex Avenue

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## APPLICANT

**Company Name:** N/A

**Business Address:**

112 Water Street Suite 201  
Boston, MA 02109

**Enter your current business license #** 89022-PK-1130

**Do you currently serve alcohol?** Yes

**ARE YOU CHANGING THE NAME OF YOUR BUSINESS?** No

**ARE YOU CHANGING YOUR MANAGER?** No

**ARE YOU TRANSFERRING/ISSUING/PLEDGING STOCK, OR ARE YOU CHANGING DIRECTORS/OFFICERS /PARTNERS/TRUSTEES?** Yes

**Are you transferring/issuing/pledging stock?** No

**Are you changing directors/officers/partners/trustees?** Yes

**List the current directors/officers/partners/trustees with their titles** Tracy Anderson Ingram Christopher Maguire Laurie Meade  
Matthew Sloan

**List the proposed directors/officers/partners/trustees with their titles** Tracy Anderson Ingram Christopher Maguire Isaac Chitica  
Matthew Sloan

**ARE YOU ALTERING YOUR EXISTING PREMISES OR OUTDOOR SEATING? SELECT YES TO INLCUDE OUTDOOR SEATING FOR LICENSE** No

**ARE YOU ADDING, OR ENDING, THE SERVICE OF CORDIALS AND LIQUEURS?** No

**ARE YOU CHANGING YOUR HOURS OF OPERATION?** No

**ARE YOU CHANGING YOUR ENTERTAINMENT?** Yes

**Are you changing your entertainment indoors?** No

**Total Devices indoors** 0

**Are you adding, removing, or changing your entertainment outdoors?** No

**Have you ever had any license denied, revoked, or suspended?** No

|   |     |
|---|-----|
| <b>Total Devices Outdoors</b>   | 0.0 |
| <b>Are you changing the type of alcohol you serve?</b>  | No  |
| <b>Have you ever received a Notice of Violation?</b>  | No  |
| <b>&lt;b&gt;almln the last 5 years, have you been found guilty, liable, or responsible, in any judicial or administrative proceeding, for any violation of the City Wage Theft Ordinance or any State or Federal laws or regulations regulating the payment of wages?&lt;br&gt;&lt;a href=../Documents/149/WAGE%20THEFT%20ORDINANCE.pdf target=NEW&gt;City Wage Theft Ordinance&lt;/a&gt;</b> | No  |
| <b>You must read and accept the above stated terms &amp; conditions</b>   | Yes |
| <b>You must read and accept the above stated terms &amp; conditions</b>   | Yes |

**Approved By:**

# LICENSING COMMISSION LICENSE APPLICATION

City of Somerville, Commonwealth of Massachusetts

Application #: ALM26-000018

File #: 18-001038

**Business Name:** New England Neapolitan Assembly Row  
LLC

**Amendment Type:** Changing Entertainment

**Location:** 463 ASSEMBLY ROW

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## APPLICANT

**Company Name:** NEW ENGLAND NEAPOLITAN ASSEMBLY  
ROW LLC D/B/A Salt & Stone

**Business Address:**  
463 ASSEMBLY ROW  
SOMERVILLE, MA 02145

|  |   |
|--|---|
| <b>Enter your current business license #</b>   | AL18-00001  |
| <b>Do you currently serve alcohol?</b>   | Yes   |
| <b>ARE YOU CHANGING THE NAME OF YOUR BUSINESS?</b>   | No  |
| <b>ARE YOU CHANGING YOUR MANAGER?</b>  | No  |
| <b>ARE YOU TRANSFERRING/ISSUING/PLEDGING STOCK,<br/>OR ARE YOU CHANGING DIRECTORS/OFFICERS<br/>/PARTNERS/TRUSTEES?</b>       | No  |
| <b>ARE YOU ALTERING YOUR EXISTING PREMISES OR<br/>OUTDOOR SEATING? SELECT YES TO INLCUDE<br/>OUTDOOR SEATING FOR LICENSE</b> | No  |
| <b>ARE YOU ADDING, OR ENDING, THE SERVICE OF<br/>CORDIALS AND LIQUEURS?</b>  | No  |
| <b>ARE YOU CHANGING YOUR HOURS OF OPERATION?</b>   | No  |
| <b>ARE YOU CHANGING YOUR ENTERTAINMENT?</b>  | Yes   |
| <b>Are you changing your entertainment indoors?</b>  | No  |
| <b>Total Devices indoors</b>   | 0   |
| <b>Are you adding, removing, or changing your<br/>entertainment outdoors?</b>  | On private property                                   |
| <b>Are you changing your outdoor seating layout in any<br/>way?</b>  | No  |
| <b>Describe the types of entertainment you will offer<br/>outdoors</b>   | would like to have either a 3 piece jazz band or a DJ |
| <b>Will the entertainment outdoors be accessible to all ages<br/>and all classes of the public?</b>                          | Yes   |
| <b>Will you be adding, removing, or changing your<br/>entertainment devices outdoors?</b>                                    | No  |

|   |                                   |
|---|-----------------------------------|
| Describe the entertainment devices you want to offer outdoors on private property   | 3piece jazz band or dj            |
| Proposed number of movie theater screens outdoors on private property   | 0                                 |
| Current number of movie theater screens outdoors on private property  | 0                                 |
| Proposed number of televisions outdoors on private property   | 0                                 |
| Current number of televisions outdoors on private property  | 0                                 |
| Proposed number of audio systems outdoors on private property   | 0                                 |
| Current number of audio systems outdoors on private property  | 0                                 |
| Proposed number of other devices outdoors on private property   | 0                                 |
| Describe the other devices outdoors on private property   | none                              |
| Current number of other devices outdoors on private property  | 0                                 |
| Will you be adding, removing, or changing your live performances outdoors? (musicians, comedians, actors, athletes, contests, DJs, etc.)  | On private property               |
| Describe the entertainment by performers you want to offer outdoors on private property   | either a 3piece jazz band or a DJ |
| Proposed number of stages or separate areas of entertainment outdoors on private property   | 1                                 |
| Current number of stages or separate areas of entertainment outdoors on private property  | 0                                 |
| Total Devices Outdoors  | 0.0                               |
| Are you changing the type of alcohol you serve?   | No                                |
| Have you ever received a Notice of Violation?   | No                                |
| <b>&lt;b&gt;almln the last 5 years, have you been found guilty, liable, or responsible, in any judicial or administrative proceeding, for any violation of the City Wage Theft Ordinance or any State or Federal laws or regulations regulating the payment of wages?&lt;br&gt;&lt;a href=../Documents/149/WAGE%20THEFT%20ORDINANCE.pdf target=NEW&gt;City Wage Theft Ordinance&lt;/a&gt;</b> | No                                |
| You must read and accept the above stated terms & conditions  | Yes                               |
| You must read and accept the above stated terms & conditions  | Yes                               |

**Approved By:**

**Albert Bargoot, Approved**

**Francis Otting, Approved**

**Mackenzie Richardson, Approved with Conditions**

Adhere to city noise ordinance

# LICENSING COMMISSION LICENSE APPLICATION

City of Somerville, Commonwealth of Massachusetts

Application #: AL26-000007

File #: 26-003857

**Business Name:** Sizzle n' Slurp

**Application Type:** Common Victualer (without alcohol)

**Location:** 514 Medford Street, C

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## APPLICANT

**Company Name:** Sizzle nâ Slurp

**Business Address:**

514C Medford St  
Somerville, MA 02145

**Business Ownership Type**

LLC

**Legal Name of the Proposed Licenseholder (Name of Corporation, LLC, Partnership/LLP, Trust, Sole Proprietor, Other)**

The Croff LLC

**Name**

Thitiphon Kunawongkrit

**Name**

Thitiphon Kunawongkrit

**Name**

Thitiphon Kunawongkrit

**Name**

Thitiphon Kunawongkrit

**DBA Name**

Sizzle n' Slurp

**In the last 5 years, have you been found guilty, liable, or responsible, in any judicial or administrative proceeding, for any violation of the City Wage Theft Ordinance or any State or Federal laws or regulations regulating the payment of wages?**

No

**Manager of your establishment**

Thitiphon Kunawongkirt

**Will you offer seating for the consumption of food on premises? (Food includes non-alcoholic beverages)**

Yes

**Number of floors on the premises**

2

**Name of floor (Basement, balcony, Main, 2nd floor, etc.)1**

Fisrt Floor

**Number of rooms1**

2

**Square footage1**

1000

**Number of seats (enter 0 if you are not serving food on premises)1**

10

**Name of floor (Basement, balcony, Main, 2nd floor, etc.)2**

Basement

**Number of rooms2**

1

**Square footage2**

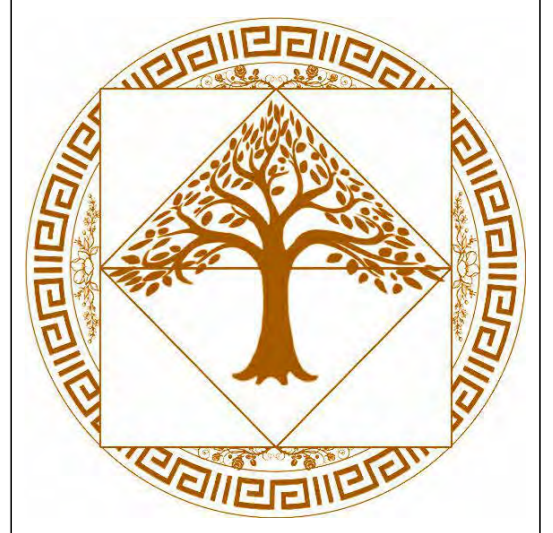
300

|  |  |
|--|--|
| <b>Number of seats (enter 0 if you are not serving food on premises)2</b>                          | 10   |
| <b>Number of entrances into the indoor premises</b>  | 1  |
| <b>Number of exits from the indoor premises</b>  | 1  |
| <b>Will you offer seating outdoors in season?</b>  | No   |
| <b>Number of rooms indoors</b>   | 3  |
| <b>Total square footage indoors</b>  | 1300   |
| <b>Total seating capacity indoors</b>  | 20   |
| <b>Total square footage outdoors</b>   | 0  |
| <b>Total seating capacity outdoors</b>   | 0  |
| <b>Total seating capacity</b>  | 20   |
| <b>Are you an Educational Institution?</b>   | No   |
| <b>Are you a Farmer Pouter?</b>  | No   |
| <b>Are you a Package Store?</b>  | No   |
| <b>Are you a Private Club?</b>   | No   |
| <b>Are you a Restaurant/Common Victualer?</b>  | Yes  |
| <b>Are you an Inn?</b>   | No   |
| <b>Days and hours of operation to serve food indoors</b>   | Monday-Sunday 11.00AM-10.00PM  |
| <b>Will you offer Entertainment indoors(recorded music, tvs, performers, djs, dancing, etc.)?</b>  | No   |
| <b>Total Devices indoors</b>   | 0  |
| <b>Will you offer Entertainment outdoors(recorded music, tvs, performers, djs, dancing, etc.)?</b> | No   |
| <b>Describe any other businesses serving alcohol on the premises</b>                               | N/A  |
| <b>Have you obtained an alcohol license before?</b>  | No   |
| <b>Have you ever had a license denied, revoked, or suspended?</b>                                  | No   |
| <b>Have you ever received a Notice of Violation?</b>   | No   |
| <b>Describe your outreach to the Ward of Alderman and the neighborhood</b>                         | We planning to introduce and outreach get it touch with a somerville community and all of neighborhood as a new business in Somerville town. |
| <b>Will you be paying by debit or credit card</b>  | Yes  |
| <b>You must read and accept the above stated terms &amp; conditions</b>                            | Yes  |

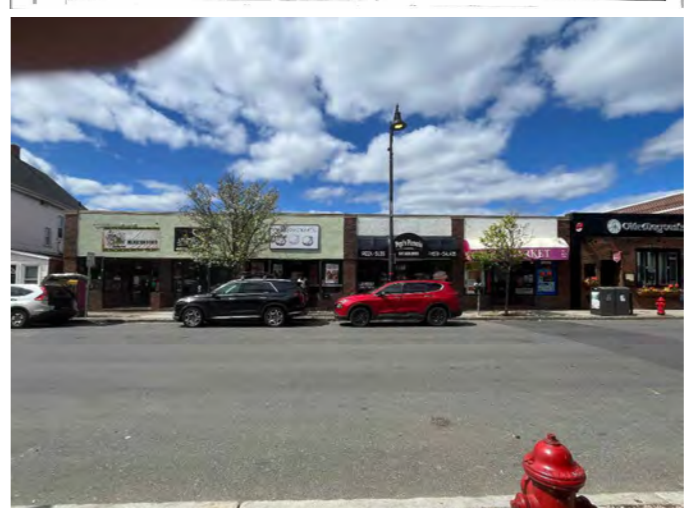
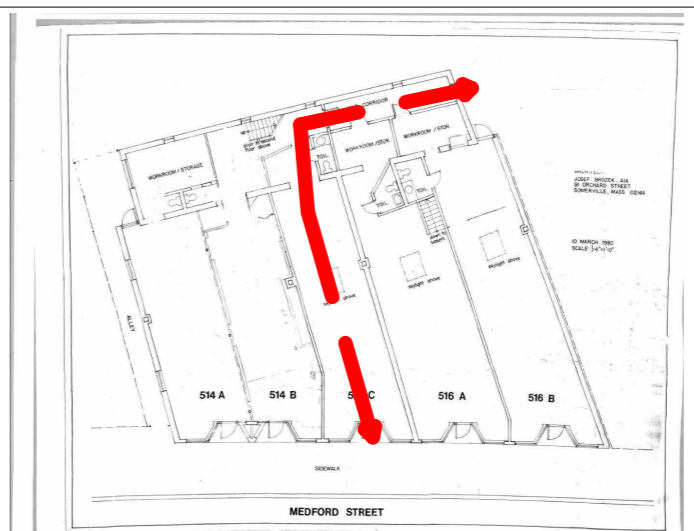
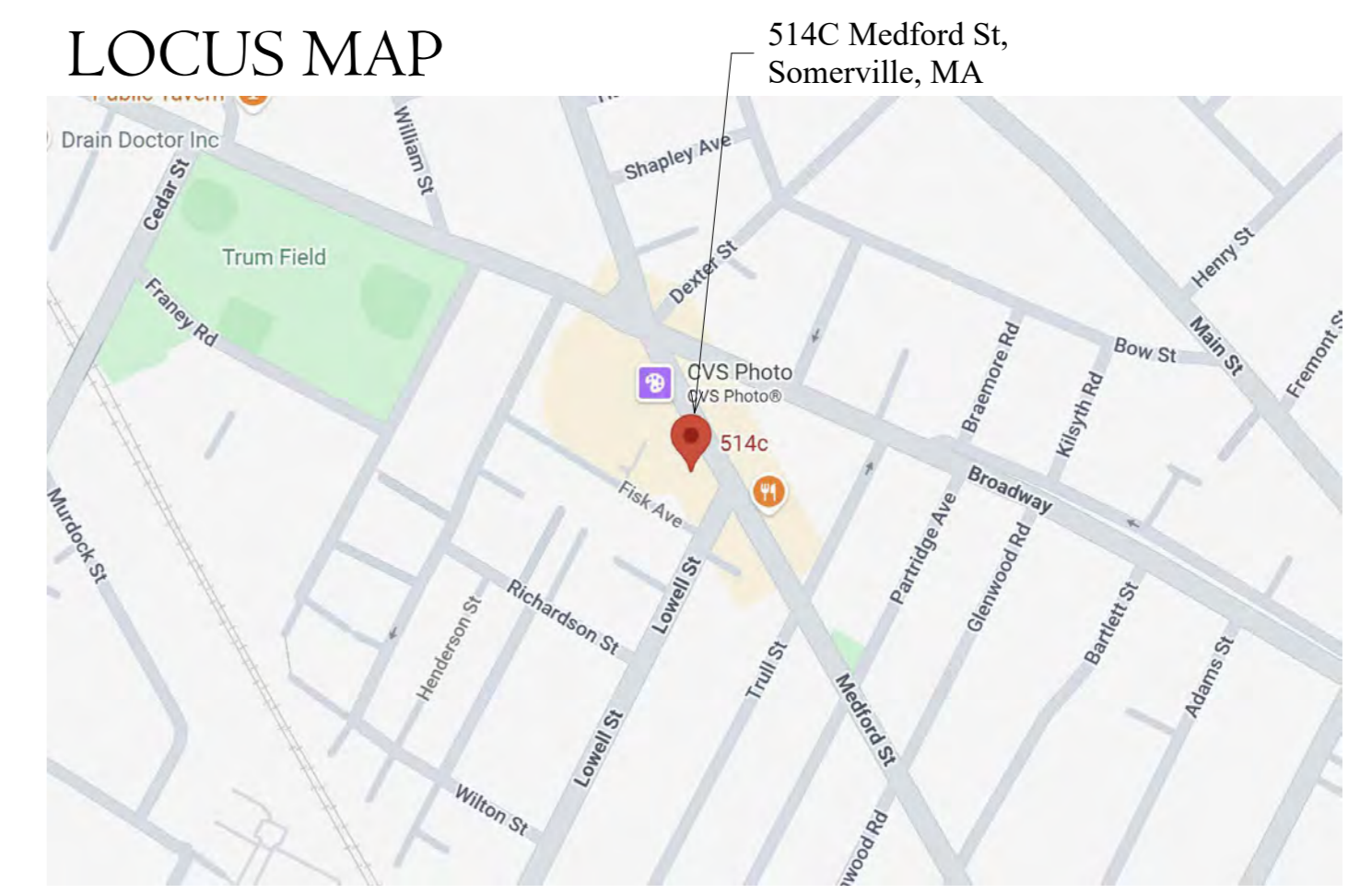
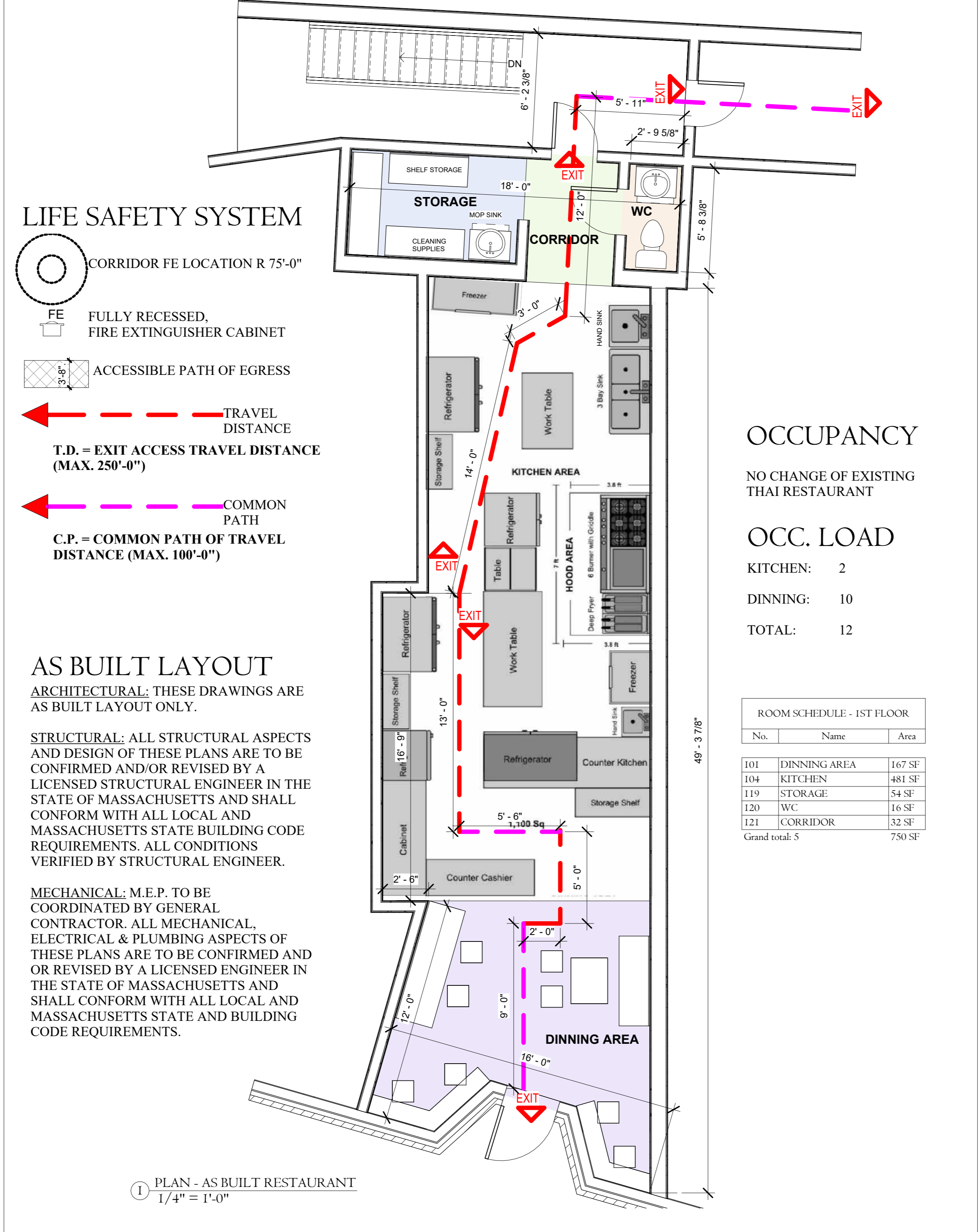
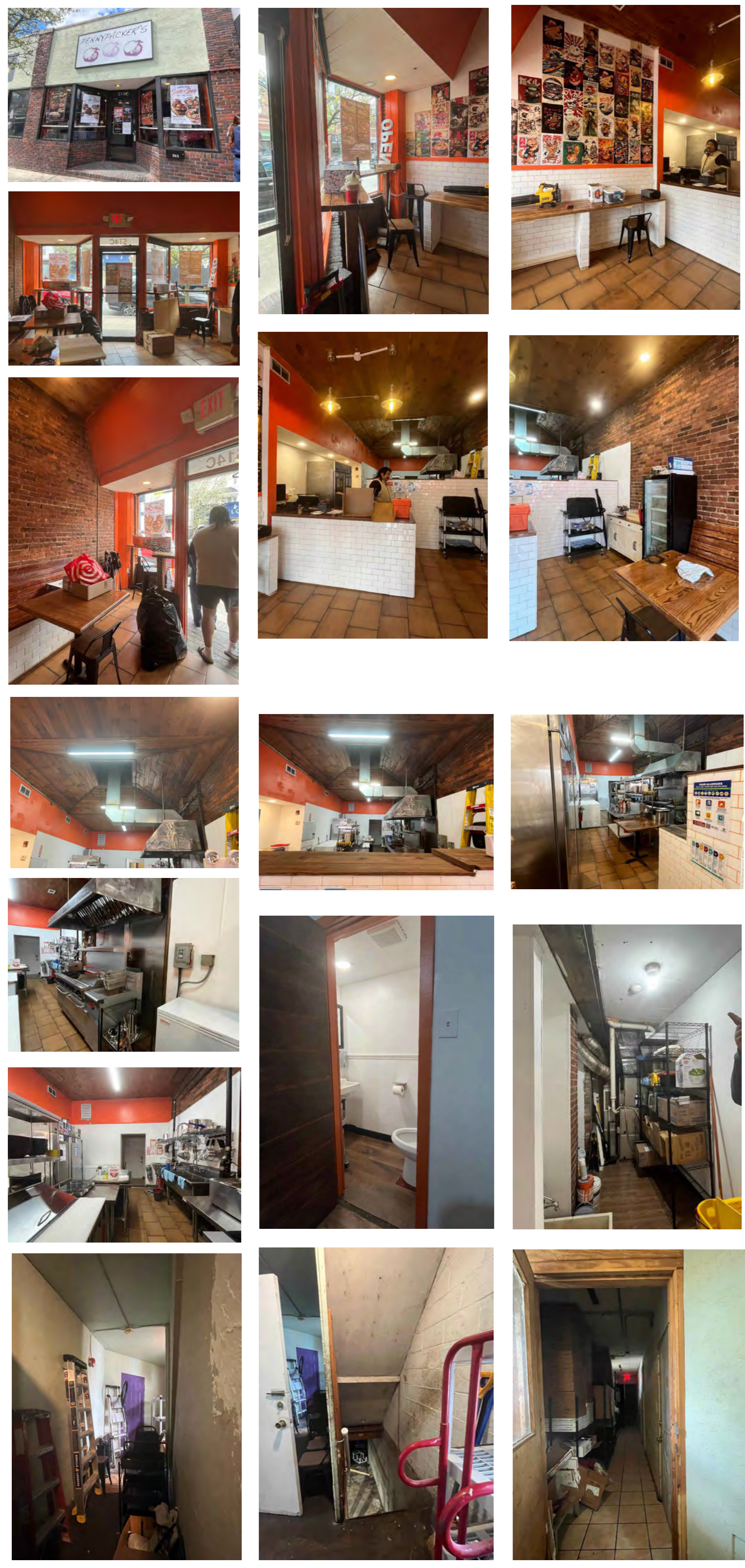
# SIZZLE N' SLURP

## 514C Medford St, Somerville, MA 02145

### RESTAURANT AS BUILT LAYOUT



Cantus Circaeus, Inc.  
www.cantuscircaeus.com  
Architecture  
44 Prince St.  
Boston, MA 02113  
6179531522  
viciniello@yahoo.com



**THE WORK**

ALL WORK SHALL BE PERFORMED IN COMPLIANCE WITH ALL APPLICABLE LOCAL, STATE AND NATIONAL BUILDING, LIFE SAFETY, ELECTRICAL AND PLUMBING CODES. THE DOCUMENTS SHALL NOT BE CONSTRUED TO CREATE A CONTRACTUAL RELATIONSHIP OF ANY KIND.

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- BETWEEN THE OWNER AND A SUBCONTRACTOR OR A SUB-SUBCONTRACTOR
- BETWEEN THE OWNER AND THE ARCHITECT OR THE ARCHITECT'S CONSULTANTS OR
- BETWEEN ANY PERSONS OR ENTITIES OTHER THAN THE OWNER AND THE CONTRACTOR.

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**ISSUANCES**

| No. | Description | Date       |
|-----|-------------|------------|
| 1   | AS BUILT    | 2026/05/02 |
|     |             |            |
|     |             |            |

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**TARITA CHAROENVES**  
-YANGKUL  
514C Medford St,  
Somerville, MA

AS BUILT SET

**PROJECT DIRECTORY**

**OWNER:** TARITA CHAROENVESYANGKUL

**PROJECT NAME:** SIZZLE N' SLURP THAI RESTAURANT AS

**CONTACT PERSON:** P.J. SAKCHAI

**ARCHITECT:** VINCENT SANTANIELLO  
44 PRINCE ST.  
BOSTON, MA 02113  
617.953.1522  
viciniello@yahoo.com  
www.cantuscircaeus.com

**CIVIL ENGINEER:** NA

**STRUCTURAL ENGINEER:** NA

**GENERAL CONTRACTOR:** NA



Vincent Santaniello MA 50826

AS BUILT PLAN - FIRST FLOOR

|                |         |
|----------------|---------|
| Project Number | 260502  |
| Date           | 260502  |
| Drawn By       | Author  |
| Checked By     | Checker |

A1.1

## Sizzle n' Slurp Menu

### Small Bites (Appetizers) (8 Items)

- 1. Chicken Kara-age \$9.95**
  - Japanese crispy fried chicken kara-age served with spicy mayo.
- 2. Gyoza (Pork or Veggie) (Steamed or Pan-Fried) (6Pcs) \$8.95**
  - Homemade gyoza served with spicy mayo.
- 3. Takoyaki (5Pcs) \$8.95**
  - Japanese fried octopus ball topped with takoyaki sauce, mayo, bonito flakes, and scallions
- 4. Veggie Spring Rolls (4Pcs) \$6.95**
  - Crispy veggie spring rolls served with sweet & sour sauce.
- 5. Scallion Pancake Rolls (Chicken or Avocado) \$9.95**
  - Crispy scallion pancake rolled up with your choice of protein served with spicy ginger sauce.
- 6. Edamame (Regular or Spicy) \$6.95**
  - Steamed green soybeans topped with lightly salt.
- 7. Shrimp Tempura \$10.95**
  - Fried shrimp tempura served with house sauce.
- 8. Agedashi Tofu \$8.95**
  - Japanese soft tofu coated and deep-fried topped with bonito flakes, and scallion served with house sauce.

## Salad (3 Items)

1. **Green Salad \$10.95**
  - Fresh mixed green salad with cucumber, carrot, and tomato served with house dressing.
2. **Seaweed Salad \$6.95**
  - Seasoned seaweed salad topped with sesame.
3. **Sizzle Salad \$14.95**  
**(Choice of protein: Grill Chicken / Crispy Chicken / Tofu Avocado)**
  - Fresh mixed green salad with fried tofu, avocado, cucumber, carrot, and tomato served with house dressing.

## Donburi (Rice Bowl) (4 Items)

1. **Chicken Teriyaki \$14.95**
  - Japanese Rice, Chicken Teriyaki, Carrot, Bokchoy, scallion and sesame seeds..
2. **Pork Chashu \$14.95**
  - Japanese Rice, Pork Chashu, Sliced Cabbage, scallion, and sesame seeds.
3. **Avocado Tofu \$14.95**
  - Japanese Rice, Fried tofu, carrot, tomato, avocado, scallion, and sesame seeds.
4. **Chicken Tonkatsu \$14.95**
  - Japanese Rice, Crispy Chicken, sliced cabbage, scallion, and sesame seeds.

## **Ramen (4 Items) (Spicy can be adjusted: “Mild / Medium / Hot” upon request)**

- 1. Shoyu Ramen \$15.95**
  - House-made soy sauce base with clear chicken broth. **Choice of Shoyu Chicken Thigh or Chashu Pork.** Served with ramen noodles, menma, kikurage, bokchoy, scallions, sweet corn, half ajitama, nori, narutomaki, and sesame seeds.
- 2. Miso Ramen \$15.95**
  - House-made soybean paste base with clear chicken broth. **Choice of Shoyu Chicken Thigh or Chashu Pork.** Served with ramen noodles, menma, kikurage, scallions, sweet corn, half ajitama, nori, narutomaki, and sesame seeds.
- 3. Tonkotsu Ramen \$15.95**
  - House-made Shio (Salt) base with creamy pork bone broth. **Choice of Shoyu Chicken Thigh or Chashu Pork.** Served with ramen noodles, menma, kikurage, scallions, bokchoy, half ajitama, nori, narutomaki, and sesame seeds.
- 4. Tori Paitan Ramen \$15.95**
  - House-made Shio (Salt) base with creamy chicken bone broth. **Choice of Shoyu Chicken Thigh or Chashu Pork.** Served with ramen noodles, menma, kikurage, scallions, half ajitama, nori, narutomaki, and sesame seeds.

## **Ramen Sided (10 Items)**

- 1. Ramen Noodle \$3.00**
- 2. Ajitama (Soft-Boiled Egg) \$3.00**
- 3. Shoyu Chicken Thigh \$5.00**
- 4. Chashu Pork \$5.00**
- 5. Menma (Bamboo) \$2.00**
- 6. Kikurage (Earwood Mushroom) \$2.00**
- 7. Sweet Corn \$2.00**
- 8. BokChoy \$2.00**
- 9. Nori (Seaweed Sheet) \$2.00**
- 10. Narutomaki (Fish Cake) \$2.00**

## **Burgers and Sandwiches (4 Items) (Served with French Fries)**

- 1. Sizzle Classic \$12.95**
  - Brioche bun, Angus beef patties, Cheese, lettuce, tomato, onion, and signature sizzle sauce.
- 2. Sizzle Smash \$12.95**
  - Brioche bun, Two Angus beef patties, Cheese, lettuce, tomato, onion, and signature sizzle sauce.
- 3. OMG Monster (Green Curry) \$12.95**
  - Brioche bun, fried crispy chicken, lettuce, onion, crispy basil, and signature Green Curry sauce.
- 4. BKK Sandwich (Tom Yum) \$12.95**
  - Brioche bun, fried crispy chicken, lettuce, tomato, onion, and signature Tom Yum sauce.

## **Desserts (5 Items)**

- 1. Mochi Ice-Cream \$8.95**
- 2. Tiramisu \$8.95**

## **Drinks (2 Items)**

- 1. Thai Iced Tea \$5.95**
- 2. Thai Iced Coffee \$5.95**
- 3. Canned Soda \$2.00**
  - **Coke / Diet Coke / Sprite / Fanta Orange / Gingle Ale / Sparkling**
- 4. Ito En Green Tea \$5.95**
- 5. Bottled Water \$2.00**

# LICENSING COMMISSION LICENSE APPLICATION

City of Somerville, Commonwealth of Massachusetts

Application #: AL26-000006

File #: 26-003017

**Business Name:** PARC Restaurant Group Som, LLC

**Application Type:** Restaurant (with alcohol)

**Location:** 16-20 Medford Street

---

## APPLICANT

**Company Name:** Capano & McGloin, LLP

**Business Address:**

101 N Common Street

Lynn, MA 01902

**Legal Name of the Proposed Licenseholder (Name of Corporation, LLC, Partnership/LLP, Trust, Sole Proprietor, Other)**

PARC RESTAURANT GROUP SOM, LLC

**DBA Name**

Post 1917

**In the last 5 years, have you been found guilty, liable, or responsible, in any judicial or administrative proceeding, for any violation of the City Wage Theft Ordinance or any State or Federal laws or regulations regulating the payment of wages?**

No

**Manager of your establishment**

Jason Carron

**Will you offer seating for the consumption of food on premises? (Food includes non-alcoholic beverages)**

Yes

**Number of floors on the premises**

1

**Name of floor (Basement, balcony, Main, 2nd floor, etc.)<sup>1</sup>**

Ground Floor

**Number of rooms<sup>1</sup>**

1

**Square footage<sup>1</sup>**

3368

**Number of seats (enter 0 if you are not serving food on premises)<sup>1</sup>**

91

**Square footage<sup>2</sup>**

0

**Number of entrances into the indoor premises**

3

**Number of exits from the indoor premises**

3

**Will you offer seating outdoors in season?**

No

**Number of rooms indoors**

1

**Total square footage indoors**

3368

**Total seating capacity indoors**

91

**Total square footage outdoors**

0

|   |   |
|---|---|
| <b>Total seating capacity outdoors</b>  | 0   |
| <b>Total seating capacity</b>   | 91  |
| <b>Are you an Educational Institution?</b>  | No  |
| <b>Are you a Farmer Pourer?</b>   | No  |
| <b>Are you a Package Store?</b>   | No  |
| <b>Are you a Private Club?</b>  | No  |
| <b>Are you a Restaurant/Common Victualer?</b>   | Yes   |
| <b>Are you an Inn?</b>  | No  |
| <b>Days and hours of operation to serve, sell or distribute alcohol indoors</b>                             | Tuesday + Wednesday 5 pm - 10 pm Thursday 5 pm - 11:30 pm Friday 4 pm - 11:30 pm Saturday 4 pm - 11:30 pm Sunday 12 pm - 9 pm |
| <b>Days and hours of operation to serve food indoors</b>  | Tuesday + Wednesday 5 pm - 9 pm Thursday 5 pm - 10 pm Friday 4 pm - 10 pm Saturday 4 pm - 10 pm Sunday 12 pm - 8 pm           |
| <b>Will you offer Entertainment indoors(recorded music, tvs, performers, djs, dancing, etc.)?</b>           | Yes   |
| <b>Describe the types of entertainment you will offer indoors</b>   | TVs, music, live acoustic music on occassion.   |
| <b>Will the entertainment indoors be accessible to all ages and all classes of the public?</b>              | Yes   |
| <b>Will you have entertainment devices indoors? (Stereos, TVs, movie screens, video games, etc.)</b>        | Yes   |
| <b>Describe the devices</b>   | TVs, standard speaker system.   |
| <b># of Movie Theater Screens indoors new</b>   | 0   |
| <b># of Televisions indoors new</b>   | 2   |
| <b># of Audio Systems indoors new</b>   | 1   |
| <b># of Other Devices indoors new</b>   | 0   |
| <b>Total Devices indoors</b>  | 3   |
| <b>Will you have live performers indoors? (Musicians, comedians, actors, athletes, contests, DJs, etc.)</b> | Yes   |
| <b>Describe the entertainment by performers indoors</b>   | Occasional live acoustic music. We will move a few tables and make an area within the restaurant.                             |
| <b># of stages or separate areas of entertainment indoors</b>   | 0   |
| <b>Will the patrons perform indoors? (dancing, darts, karaoke, etc.)</b>                                    | No  |
| <b>Will you offer Entertainment outdoors(recorded music, tvs, performers, djs, dancing, etc.)?</b>          | No  |
| <b>Describe any other businesses serving alcohol on the premises</b>  | None.   |
| <b>Have you obtained an alcohol license before?</b>   | Yes   |
| <b>List each license with the city, state, and year first</b>   | Reading, MA 2024 Lexington, MA 2025   |

**licensed**

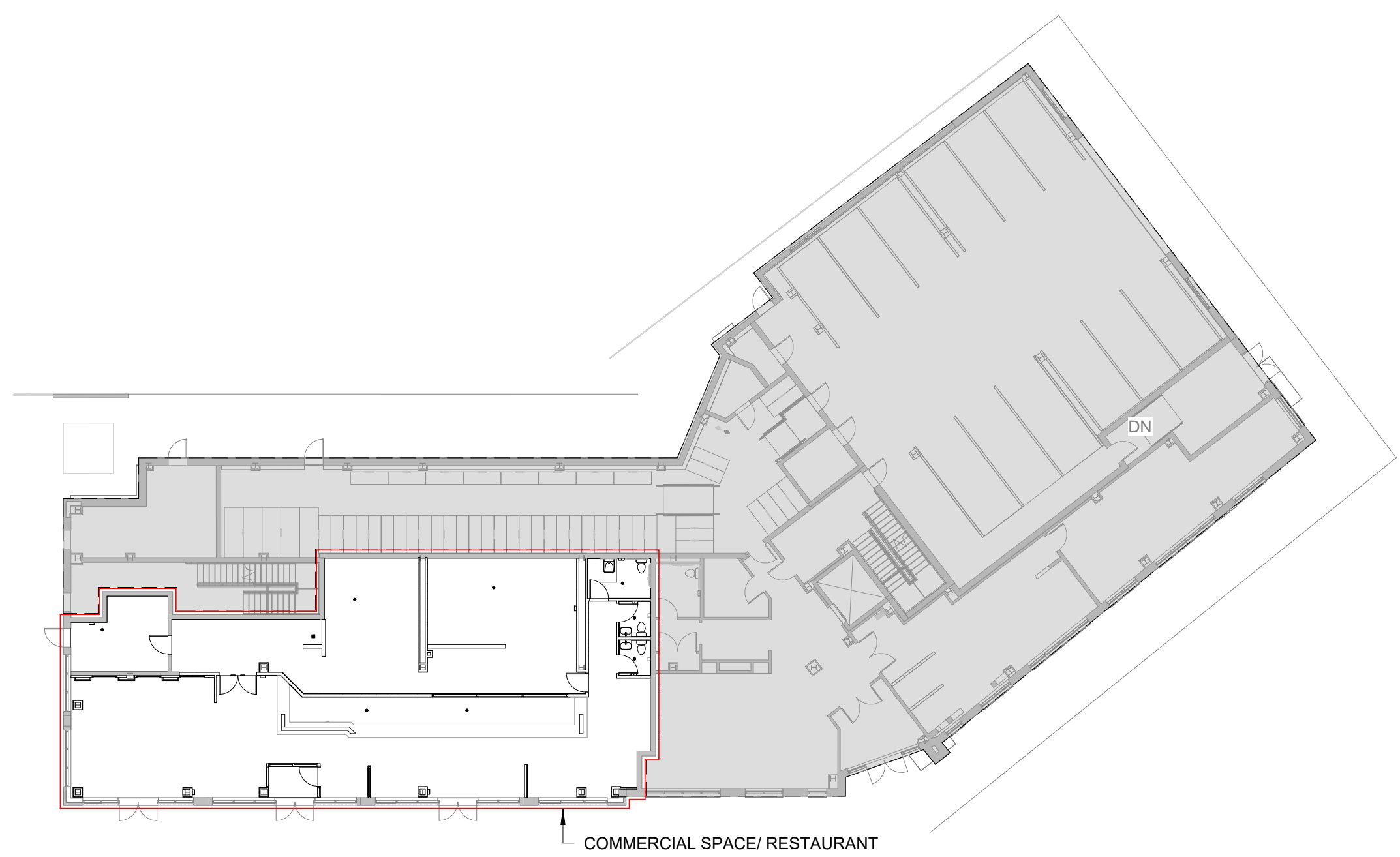
**Have you ever had a license denied, revoked, or suspended?** No

**Have you ever received a Notice of Violation?** No

**Describe your outreach to the Ward of Alderman and the neighborhood** None at this time.

**Will you be paying by debit or credit card** Yes

**You must read and accept the above stated terms & conditions** Yes

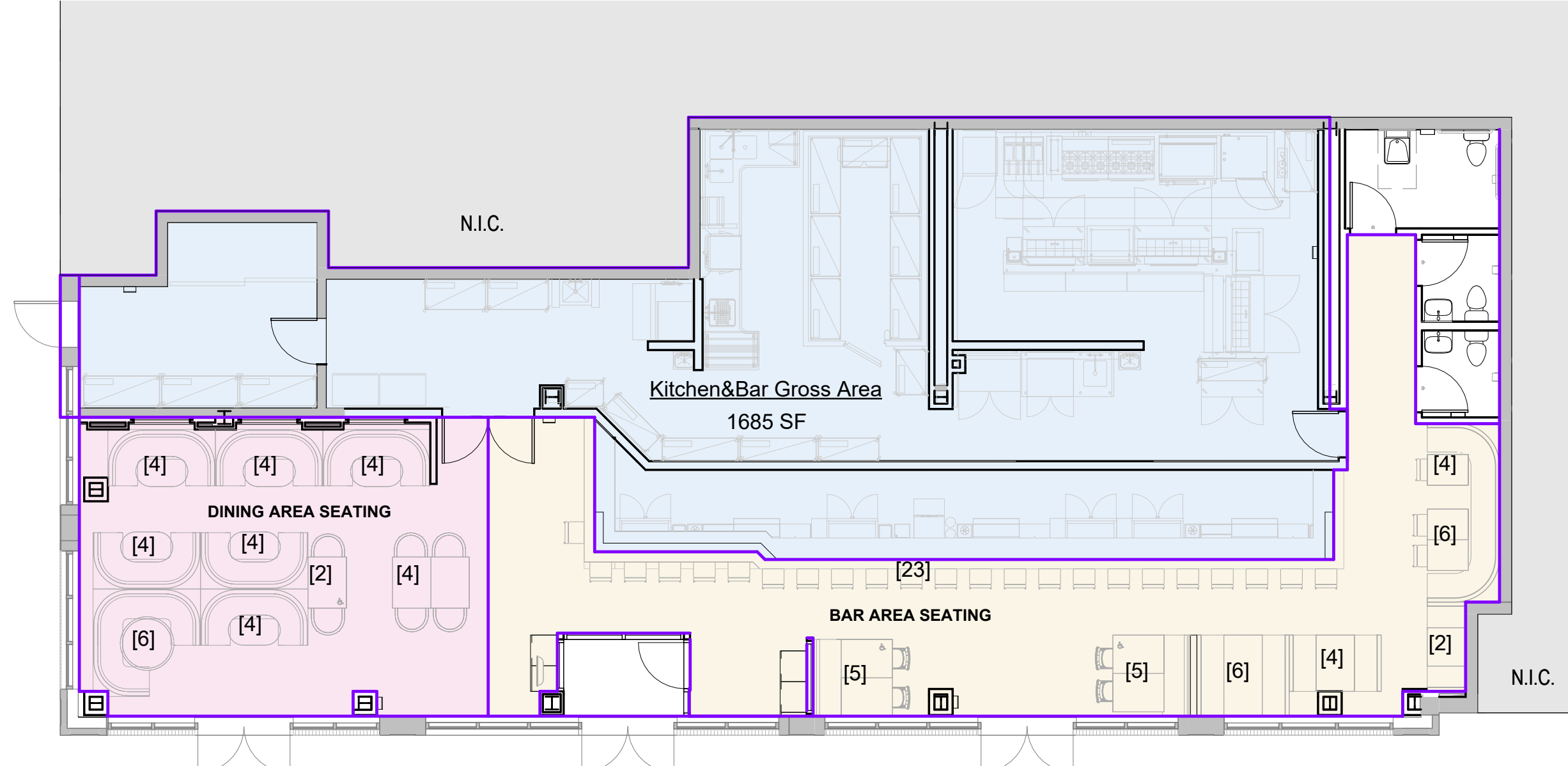


4 COMMERCIAL SPACE LOCUS PLAN  
1" = 20'-0"

| PROVIDED SEAT COUNT |           |
|---------------------|-----------|
| BAR STOOLS          | 23        |
| BAR AREA TABLES     | 32        |
| DINING AREA TABLES  | 36        |
| <b>TOTAL</b>        | <b>91</b> |

|                             | OCCUPANT LOAD FACTOR  | OCCUPANTS      |
|-----------------------------|-----------------------|----------------|
| KITCHEN/ BAR SERVICE        | 1,685 GSF / 200 GROSS | 9              |
| SEATING AREA (BAR + DINING) |                       | 91 FIXED SEATS |
| <b>TOTAL:</b>               |                       | <b>100</b>     |

| BUILDING CLARIFICATION | USE GROUP | TOILETS        |               | URINALS   | LAVATORIES         | MOP SINK    |
|------------------------|-----------|----------------|---------------|-----------|--------------------|-------------|
|                        |           | FEMALE         | MALE          |           |                    |             |
| RESTAURANTS            | A-2       | 1 PER 25 OCC.  | 1 PER 50 OCC. | UP TO 50% | 1 PER 50 OCCUPANTS | 1 PER FLOOR |
|                        |           | 50 OCCUPANTS   | 50 OCCUPANTS  |           |                    |             |
|                        |           | 2 TOILETS REQ. | 1 TOILET REQ. |           |                    |             |
| <b>TOTAL</b>           |           | 3 TOILETS REQ. |               |           |                    |             |

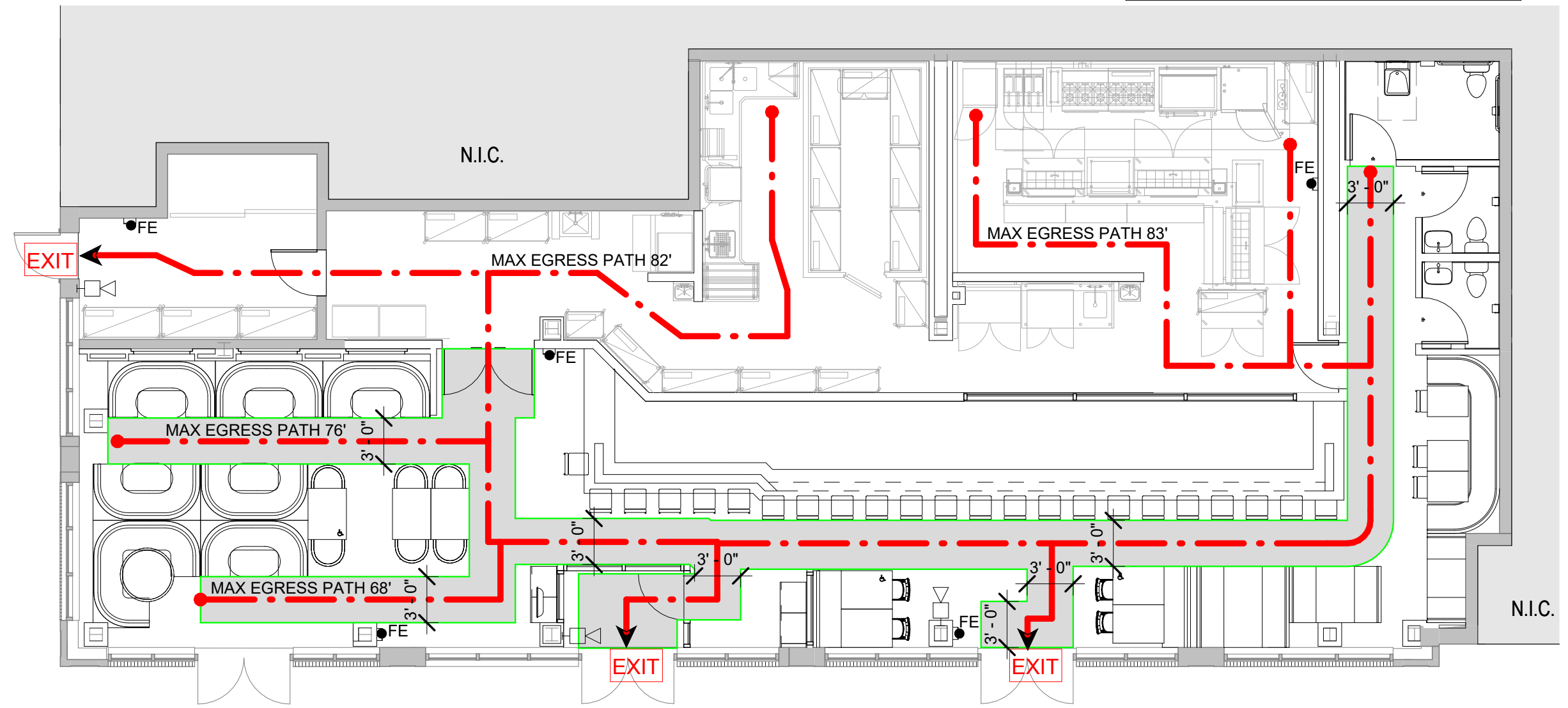


3 Occupant Area Calculations  
1/8" = 1'-0"

**LIFE SAFETY LEGEND**

| SYMBOL | DISTRIBUTION      |
|--------|-------------------|
|        | EGRESS PATH       |
|        | DESIGNATED EXIT   |
|        | EGRESS PATHWAY    |
|        | FIRE EXTINGUISHER |

NOTE: FIRE EXTINGUISHERS TO BE SELECTED AND INSTALLED PER NFPA (NATIONAL FIRE PROTECTION ASSOCIATION) CODE



1 - 1st Floor Level - Restaurant - LIFE SAFETY PLAN  
1/8" = 1'-0"

**PROJECT NAME**  
**RESTAURANT FITOUT**

**PROJECT ADDRESS**  
16 MEDFORD ST  
SOMERVILLE MA-  
COMMERCIAL SPACE

**CLIENT**  
**JASON CARRON**

**ARCHITECT**

Khalsa Design, Inc.  
17 IVALOO STREET SUITE 400  
SOMERVILLE, MA 02143  
TELEPHONE: 617-591-8682

**CONSULTANTS:**

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**REGISTRATION**

Project number: 24070  
Date: 07/15/2025  
Drawn by: AM  
Checked by: TC  
Scale: As indicated

**REVISIONS**

| No. | Description | Date |
|-----|-------------|------|
|     |             |      |
|     |             |      |
|     |             |      |

**LIFE SAFETY PLAN**

**FSP-1**

RESTAURANT FITOUT

PROJECT NAME

**RESTAURANT FITOUT**

PROJECT ADDRESS  
16 MEDFORD ST  
SOMERVILLE MA-  
COMMERCIAL SPACE

CLIENT

**JASON CARRON**

ARCHITECT

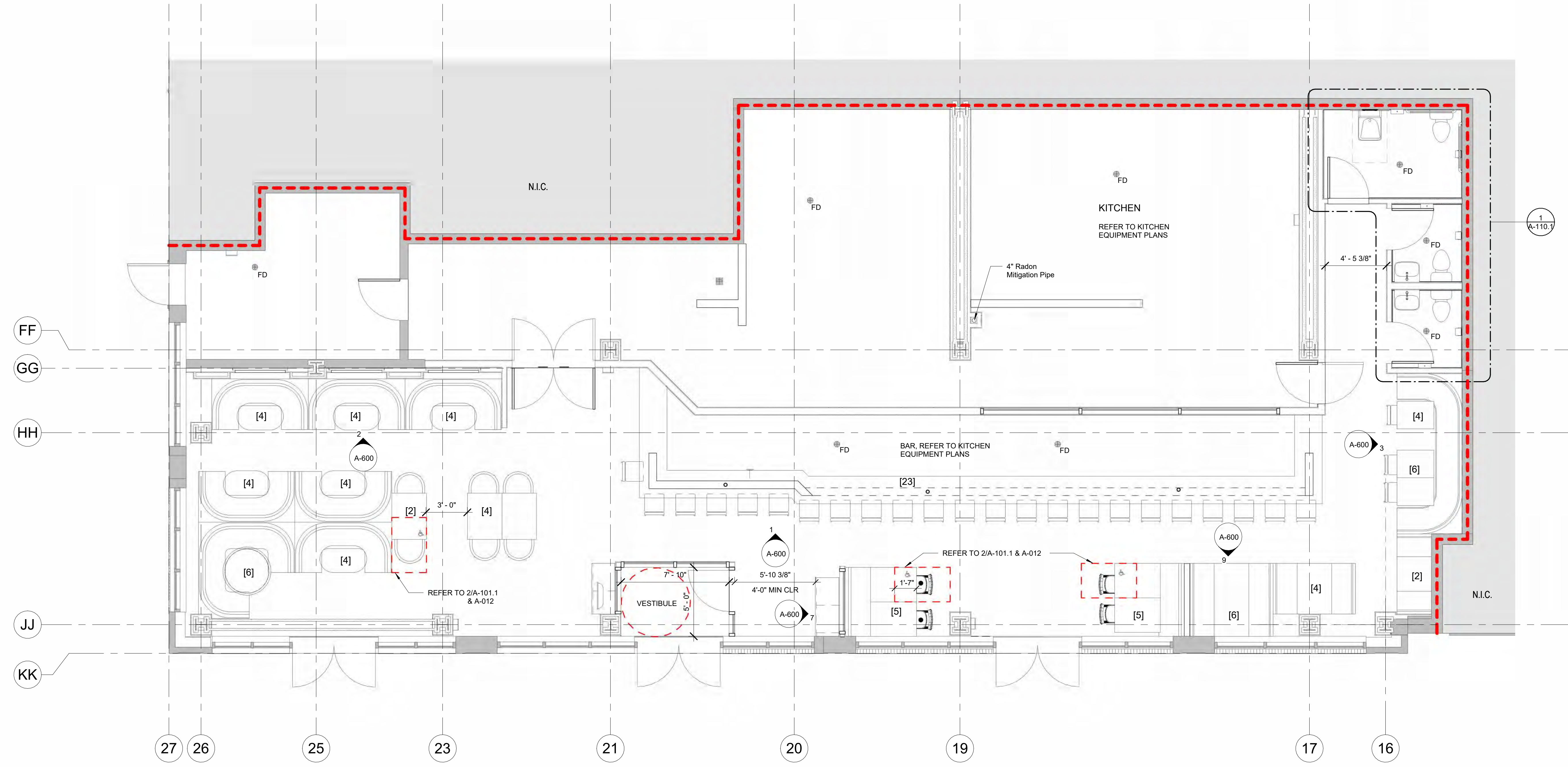


KHALSA DESIGN, INC.  
17 IVALOO STREET SUITE 400  
SOMERVILLE, MA 02143  
TELEPHONE: 617-591-8682

CONSULTANTS:

**CLEAR FLOOR SPACE:** THE MINIMUM UNOBSTRUCTED FLOOR OR GROUND SPACE REQUIRED TO ACCOMMODATE A SINGLE, STATIONARY WHEELCHAIR AND OCCUPANT. UNLESS OTHERWISE STATED, THE DIMENSIONS OF CLEAR FLOOR SPACE SHALL BE 30" BY 48" AND SHALL BE LEVELED.

② CLEAR FLOOR SPACE  
1/2" = 1'-0"



1 - 1st Floor Level - Restaurant - Furniture  
Layout  
1/4" = 1'-0"

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**REGISTRATION**



Project number 24070  
Date 07/15/2025  
Drawn by AM  
Checked by TC  
Scale As indicated

**REVISIONS**

| No. | Description | Date |
|-----|-------------|------|
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**FURNITURE  
PLAN**

**A-101.1**  
RESTAURANT FITOUT

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Our Lexington location now open!

×

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[Menus](#)

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# DINNER



## Mains

- Chilean Sea Bass**  
Scalloped Herbed Beets, Heirloom Carrots, Fig & Apricot Chutney  
53
- Halibut**  
Mozzarella Risotto, Fingering Potatoes  
49
- Chicken Parmesan**  
Pari Fried, House Made Marinara  
32
- Seared Scallops**  
Mushroom Risotto, Truffle Foam  
65
- Tuscan Shrimp**  
Toscano Cream Sauce, Linguini, Sundried Tomato, Arugula & Basil  
35
- Cioppino**  
Mussels, Scallops, White Fish, Shrimp, Clams, Brodello Broth, Cressini  
64
- Kona Tofu**  
Kona Grilled Tofu, Mushroom Risotto, Coffee Jus  
36
- Heritags Chicken**  
Crisp Puree, Cherry Jus, Cream Beans, Corn  
Fingering Potatoes  
44

## Steaks

- Filet 10oz**  
Brandt  
66
- New York Strip 16oz**  
Brandt Prime  
73
- Ribeye 16oz**  
Brandt Prime  
83
- Bone In Ribeye 22oz**  
Brandt Prime  
91
- Long Bone 32oz**  
Brandt  
125
- Steak Frites**  
10oz Sliced Brandt Flank Steak,  
Chimichurri, Truffle Fries  
49
- Enhancements:**  
Au Piedro 6 | Oscar 15 | Kona Crust 8 | Riesling  
Marrow Butter 5 | Blue Cheese Butter 6 | Sauce  
Béarnaise 4 | Peas Demi 4  
Sauce Fright 19
- Loosier Tail 32 | Scallops 25 | Shrimp 50cmpl 15

## Sides

- Mashed Potato 12
- Tater Tots 14
- Baked Ziti 16
- Japanese Twice Baked 16
- Roasted Heirloom Carrots 14
- Glazed Brussels Sprouts 16  
With Bacon
- Truffle Fries 15
- Street Corn 16  
With Bacon
- Exotic Mushrooms 16
- Green Beans 14

\*Consuming raw or undercooked food may give you a foodborne illness. please inform us if anyone in your party has an allergy



- |  |   |
|--|---|
| <p><b>Shareables</b></p> <ul style="list-style-type: none"> <li>Beef Carpaccio<br/>Crispy Potato, Heirloom Carrots, Fig &amp; Apricot Chutney<br/>25</li> <li>Tuna Tartare &amp; Mignon<br/>Japanese Hot, Lemon Dressing, Sashimi Sauce<br/>26</li> <li>Black Truffle Lobster Appetizer<br/>Creamy Parsi Potatoes<br/>28</li> <li>Wagon Dondolija<br/>Hot Bacon, Maple Glazed Sweet Potato<br/>28</li> <li>Lamb Lollipops<br/>Roasted Potato, Red Wine<br/>28</li> <li>Truffle Cauliflower<br/>Peanut Butter, Cauliflower Sauce<br/>28</li> <li>Lobster Tacos<br/>Pasta Lobster, Cream Sauce, Corn Tortillas<br/>28</li> <li>Cheesecake<br/>Bacon Mignon, Sweet Potatoes<br/>28</li> <li>Bacon<br/>Orange Apples, Caramelized Onions, Sweet<br/>28</li> <li>Cook Cake<br/>Caramelized Onion, Lobster Sauce<br/>28</li> </ul> | <p><b>Soups &amp; Salads</b></p> <ul style="list-style-type: none"> <li>Chopped Salad<br/>Roasted Potato, Heirloom Carrots, Fig &amp; Apricot Chutney<br/>12</li> <li>Blue Cheese Lobster Wedge<br/>Apple Slices, Bacon, Sashimi Sauce, Red Wine<br/>17</li> <li>Cheese<br/>House Made Marinara, Sashimi Sauce, Sashimi<br/>18</li> <li>1917 Salad<br/>Hot Honey, Potato, French<br/>28</li> <li>French<br/>Onion<br/>14</li> <li><b>Shellfish</b></li> <li>Oysters<br/>Crispy Onion<br/>\$140</li> <li>Shrimp Cocktail<br/>Tartar Sauce<br/>28</li> <li>King Crab Legs<br/>\$140</li> <li>Roasted Tuna<br/>Crispy Potato, Heirloom Carrots, Fig &amp; Apricot Chutney, Sashimi Sauce, Sashimi<br/>\$140</li> </ul> |
|--|---|

\*Consuming raw or undercooked food may give you a foodborne illness. please inform us if anyone in your party has an allergy

POST  
— STEAKHOUSE —  
1917

READING

136 Haven Street  
Reading, MA 01867

(781) 942-0001

HOURS

***Kitchen Hours:***

Tuesday + Wednesday 5 pm - 9 pm

Thursday 5 pm - 10 pm

Friday 4 pm - 10 pm

Saturday 4 pm - 10 pm

Sunday 12 pm - 8 pm

***Bar Hours:***

Tuesday + Wednesday 5 pm - 10 pm

Thursday 5 pm - 12 am

Friday 4 pm - 12 am

Saturday 4 pm - 12 am

Sunday 12 pm - 9 pm

**Make a Reservation**

LEXINGTON

27 Waltham Street  
Lexington, MA 02421

(781) 377-1917

HOURS

***Kitchen Hours:***

Tuesday + Wednesday 5 pm - 9 pm

Thursday 5 pm - 10 pm

Friday 4 pm - 10 pm

Saturday 4 pm - 10 pm

Sunday 12 pm - 8 pm

**Bar Hours:**

Tuesday + Wednesday 5 pm - 10 pm

Thursday 5 pm - 11:30 pm

Friday 4 pm - 11:30 pm

Saturday 4 pm - 11:30 pm

Sunday 12 pm - 9 pm

16-20 Medford Street

Somerville, MA 02144

[Make a Reservation](#)

**coming Spring 2026**

**FAQS**

*powered by blender • photos by Illume by MC*



***Come in, stay awhile.***

# LICENSING COMMISSION LICENSE APPLICATION

City of Somerville, Commonwealth of Massachusetts

Application #: AL26-000016

File #: 26-011431

**Business Name:** Free Run Wine LLC

**Application Type:** Restaurant (with alcohol)

**Location:** 259 Washington ST

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## APPLICANT

**Company Name:** Free Run Wine LLC

**Business Address:**

42 Allen Street  
Somerville, MA 02143

**Legal Name of the Proposed Licenseholder (Name of Corporation, LLC, Partnership/LLP, Trust, Sole Proprietor, Other)** Free Run Wine LLC

**DBA Name** First Crush

**In the last 5 years, have you been found guilty, liable, or responsible, in any judicial or administrative proceeding, for any violation of the City Wage Theft Ordinance or any State or Federal laws or regulations regulating the payment of wages?** No

**Manager of your establishment** Gabrielle Malina

**Will you offer seating for the consumption of food on premises? (Food includes non-alcoholic beverages)** Yes

**Number of floors on the premises** 2

**Name of floor (Basement, balcony, Main, 2nd floor, etc.)1** Main

**Number of rooms1** 3

**Square footage1** 1000

**Number of seats (enter 0 if you are not serving food on premises)1** 19

**Name of floor (Basement, balcony, Main, 2nd floor, etc.)2** Basement

**Number of rooms2** 2

**Square footage2** 490

**Number of seats (enter 0 if you are not serving food on premises)2** 0

**Number of entrances into the indoor premises** 1

**Number of exits from the indoor premises** 1

**Will you offer seating outdoors in season?** On public property

**Square footage outdoors on public property** 116

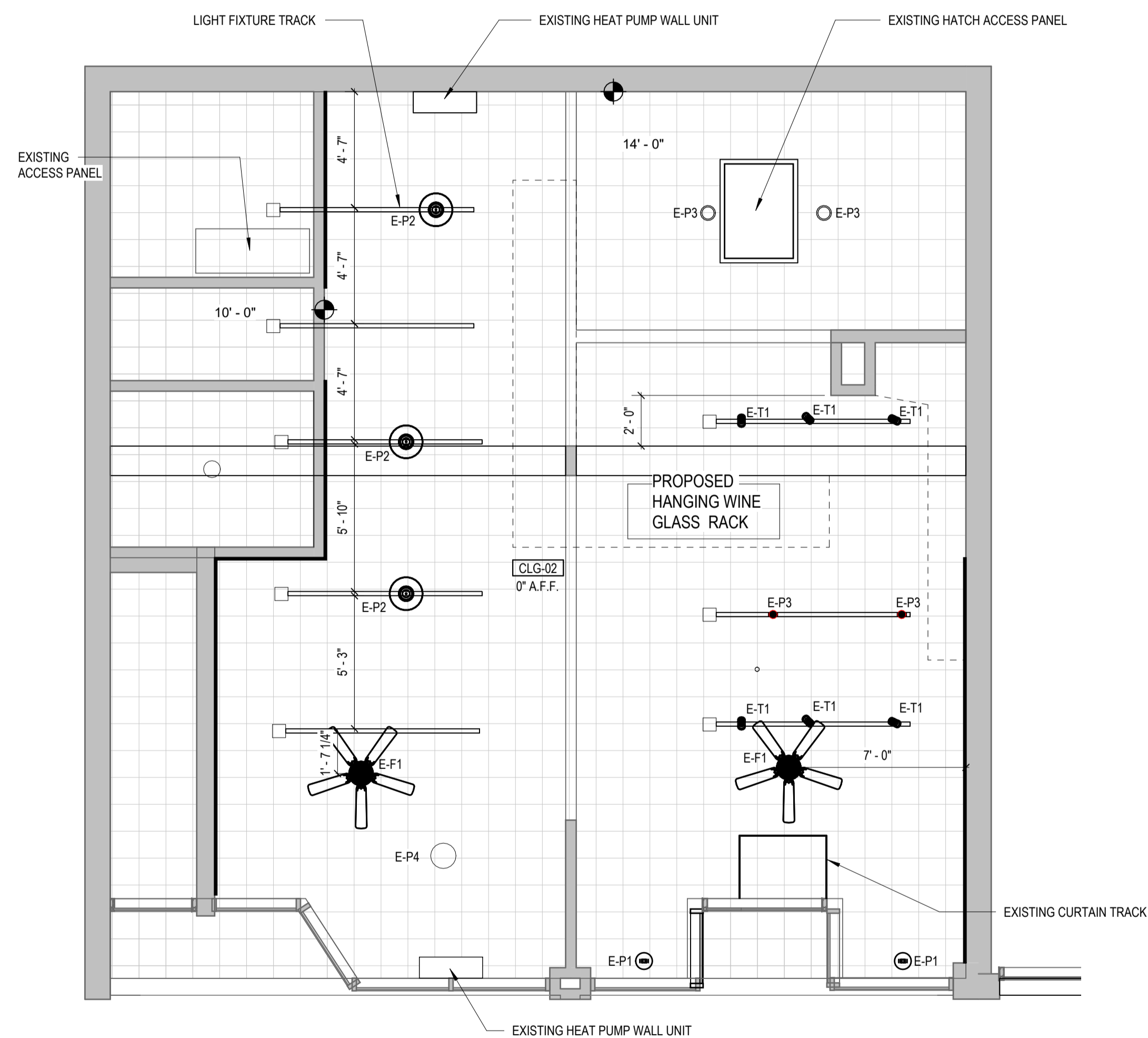
|  |  |
|--|--|
| <b>Are you installing any large tents (larger than 10' X 12')</b>                                    | No   |
| <b>Are you installing any domes or dome-like structures</b>  | No   |
| <b>Are you installing any barriers or perimeters around the outdoor seating</b>                      | No   |
| <b>Are you installing any heating elements</b>   | No   |
| <b>Number of rooms indoors</b>   | 5  |
| <b>Total square footage indoors</b>  | 1490   |
| <b>Total seating capacity indoors</b>  | 19   |
| <b>Total square footage outdoors</b>   | 116  |
| <b>Total seating capacity outdoors</b>   | 0  |
| <b>Total seating capacity</b>  | 19   |
| <b>Are you an Educational Institution?</b>   | No   |
| <b>Are you a Farmer Purer?</b>   | No   |
| <b>Are you a Package Store?</b>  | No   |
| <b>Are you a Private Club?</b>   | No   |
| <b>Are you a Restaurant/Common Victualer?</b>  | Yes  |
| <b>Are you an Inn?</b>   | No   |
| <b>Days and hours of operation to serve, sell or distribute alcohol indoors</b>                      | Monday-Sunday, 2pm-11pm  |
| <b>Days and hours of operation to serve food indoors</b>   | Monday-Sunday 2pm-10pm   |
| <b>Days and hours of operation to serve food outdoors on public property</b>                         | Monday-Sunday, 2pm-11pm  |
| <b>Days and hours of operation to serve alcohol outdoors on public property</b>                      | Monday-Sunday, 2pm-11pm  |
| <b>Will you offer Entertainment indoors(recorded music, tvs, performers, djs, dancing, etc.)?</b>    | Yes  |
| <b>Describe the types of entertainment you will offer indoors</b>                                    | vinyl and digital DJ sets, recorded music  |
| <b>Will the entertainment indoors be accessible to all ages and all classes of the public?</b>       | No   |
| <b>Explain</b>   | entertainment will coincide with bar operating hours so we will not admit people under 21 to for these entertainment events. |
| <b>Will you have entertainment devices indoors? (Stereos, TVs, movie screens, video games, etc.)</b> | Yes  |
| <b>Describe the devices</b>  | basic stereo system for recorded music   |
| <b># of Movie Theater Screens indoors new</b>  | 0  |
| <b># of Televisions indoors new</b>  | 0  |
| <b># of Audio Systems indoors new</b>  | 1  |

|   |  |
|---|--|
| <b># of Other Devices indoors new</b>   | 0  |
| <b>Total Devices indoors</b>  | 1  |
| <b>Will you have live performers indoors? (Musicians, comedians, actors, athletes, contests, DJs, etc.)</b> | Yes  |
| <b>Describe the entertainment by performers indoors</b>   | DJs will set up and play a music indoors. The music will be ambient and played as part of our regular service. |
| <b># of stages or separate areas of entertainment indoors</b>   | 0  |
| <b>Will the patrons perform indoors? (dancing, darts, karaoke, etc.)</b>                                    | No   |
| <b>Will you offer Entertainment outdoors(recorded music, tvs, performers, djs, dancing, etc.)?</b>          | No   |
| <b>Describe any other businesses serving alcohol on the premises</b>  | none   |
| <b>Have you obtained an alcohol license before?</b>   | No   |
| <b>Have you ever had a license denied, revoked, or suspended?</b>   | No   |
| <b>Have you ever received a Notice of Violation?</b>  | No   |
| <b>Describe your outreach to the Ward of Alderman and the neighborhood</b>                                  | I met with JT Scott in person upon signing my lease to inform him of my plans to open a wine bar.              |
| <b>Will you be paying by debit or credit card</b>   | Yes  |
| <b>You must read and accept the above stated terms &amp; conditions</b>                                     | Yes  |

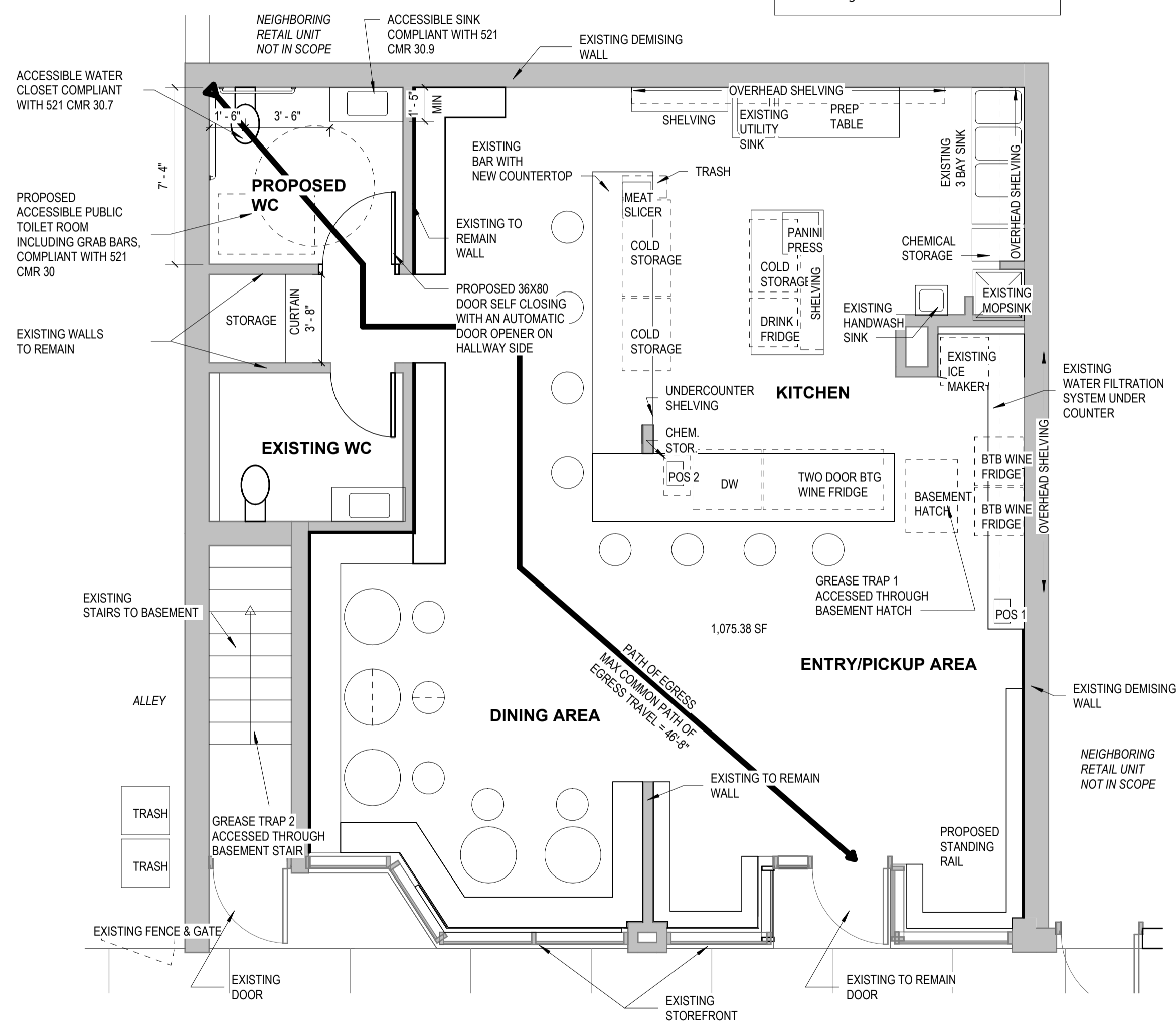


SCOPE OF WORK:  
IN EXISTING COMMERCIAL SPACE, ADD NEW ACCESSIBLE TOILET ROOM WITHIN EXISTING STORAGE CLOSET. PROVIDE BUILT IN SEATING AND FURNISHINGS FOR PATRON SEATING. PROVIDE NEW BAR AND EQUIPMENT THROUGHOUT KITCHEN. ALL EXISTING WALLS, STOREFRONT, AND EXTERIOR DOORS TO REMAIN UNLESS OTHERWISE NOTED.

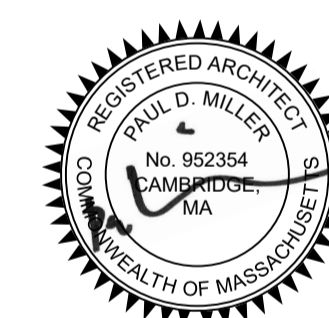
| Assembly Group A-2        |             |
|---------------------------|-------------|
| <b>Gross Area</b>         | 1,075.38 SF |
| <b>Plumbing Fixtures:</b> |             |
| Toilets:                  | 2           |
| Lavatories:               | 2           |
| <b>Occupant Load:</b>     |             |
| Posted Occupancy:         | Max 49      |
| Means of Egress:          | 1           |



**3** L1 RCP  
1/4" = 1'-0"



**1** GROUND FLOOR PLAN  
1/4" = 1'-0"



1 4.10.2026 PERMIT SET  
NO. DATE DESCRIPTION

SCALE NEIGHBOR PROJECT NUMBER  
1/4" = 1'-0" 0000

FLOOR PLAN - FIRST FLOOR

**A1.01**



**First Crush draft food menu  
March 2026**

**Marinated olives - \$6**

- Olives, olive oil, lemon peel, red pepper flakes

**Lupini beans - \$5**

- Jarred in brine, ready to eat

**Potato chips - \$5**

- TBD which brand

**Jamón serrano - \$12**

- sliced on meat slicer to order

**Gilda skewers - \$5/each**

- Anchovy, pickled piparra pepper, olive skewers drizzled with aioli (likely skewered to order)
- sub artichoke heart for veg option

**Conservas - \$16**

- Tinned mussels/clams/calamari with chips, aioli, lemon

**Anchovies matrimonio - \$17**

- White & brown anchovies served with whipped butter, bread & piparra relish

**Cheese plate with accoutrement - \$15 (add cured ham +\$10)**

- Spanish or french semi-firm cheese served with bread & pickles

**Spicy tuna salad served with ritz/potato chips - \$15**

- Tinned bonito tuna, mayo, hot sauce, diced piparra peppers, salt

**Chistorra sandwich - \$15**

- chistorra + cheese + piparra relish on baguette, warmed in convection oven before serving

**First Crush draft beverage menu  
March 2026**

**Wine by the glass - \$13**

- At least one sparkling, white, orange/rosé & red option

**Wine by the bottle - varies**

- ~60 wines available by the bottle

**Vermouth (on the rocks or spritz) - \$10/\$15**

- TBD which brands

**Sherry - \$12**

- Fino/Manzanilla & Amontillado, TBD which brands

**Canned local lager & IPA - varies**

- Canned beer from local breweries

**Unified Ferments N/A fermented tea beverage - \$10**

- Rotating options

**Ghia N/A spritz - \$12**

- Rotating Ghia aperitifs + soda water

**Canned soda - \$6**

- Rotating local sodas

# LICENSING COMMISSION LICENSE APPLICATION

City of Somerville, Commonwealth of Massachusetts

Application #: ALM26-000017

File #: 17-013187

**Business Name:** TBD BREWING LLC

**Amendment Type:** Altering Premises or Outdoor Seating

**Location:** 14 TYLER ST

---

## APPLICANT

**Company Name:** Aeronaut Brewing Company

**Business Address:**

14 Tyler Street

Somerville, MA 02143

**Enter your current business license #** AL17-000122

**Do you currently serve alcohol?** Yes

**ARE YOU CHANGING THE NAME OF YOUR BUSINESS?** No

**ARE YOU CHANGING YOUR MANAGER?** No

**ARE YOU TRANSFERRING/ISSUING/PLEDGING STOCK,  
OR ARE YOU CHANGING DIRECTORS/OFFICERS  
/PARTNERS/TRUSTEES?** No

**ARE YOU ALTERING YOUR EXISTING PREMISES OR  
OUTDOOR SEATING? SELECT YES TO INLCUDE  
OUTDOOR SEATING FOR LICENSE** Yes

**Are you changing your indoor premises?** Yes

**Do you offer seating for the consumption of food on  
premises? (Food includes non-alcoholic beverages)** Yes

**Proposed number of floors on the premises** 1

**Proposed name of floor (Basement, balcony, Main, 2nd  
floor, etc.)<sup>1</sup>** Street Level

**Proposed number of rooms<sup>1</sup>** 5

**Proposed square footage<sup>1</sup>** 2042

**Number of seats (enter 0 if you do not serve food on  
premises)<sup>1</sup>** 218

**Current Number of Floors Indoors** 1

**Current number of rooms indoors** 5

**Current number of seats indoors (enter 0 if you do not  
serve food on premises)** 0

**Proposed total occupancy indoors** 240

**Current total occupancy indoors** 240

|   |   |
|---|---|
| Proposed number of entrances into the indoor premises   | 1   |
| Current number of entrances into the indoor premises  | 1   |
| Proposed number of exits from the indoor premises   | 4   |
| Current number of exits from the indoor premises  | 4   |
| Are you changing your outdoor premises?   | No  |
| Describe any changes in your proposed food services (i.e. table service, counter service, cafeteria, packaged foods only, etc.)   | N/A   |
| Do you operate an inn?  | No  |
| Describe your outreach to the Ward Alderman and neighborhood  | None  |
| ARE YOU ADDING, OR ENDING, THE SERVICE OF CORDIALS AND LIQUEURS?  | No  |
| ARE YOU CHANGING YOUR HOURS OF OPERATION?   | No  |
| ARE YOU CHANGING YOUR ENTERTAINMENT?  | No  |
| Total Devices indoors   | 0   |
| Total Devices Outdoors  | 0.0   |
| Are you changing the type of alcohol you serve?   | Yes   |
| Please tell us which category change you're making.   | Adding Farmer Winery Pouring to the existing Farmer Brewery Pouring license |
| Have you ever received a Notice of Violation?   | No  |
| <b>In the last 5 years, have you been found guilty, liable, or responsible, in any judicial or administrative proceeding, for any violation of the City Wage Theft Ordinance or any State or Federal laws or regulations regulating the payment of wages?</b> | No  |
| <b><a href=".. /Documents/149/WAGE%20THEFT%20ORDINANCE.pdf target=NEW">City Wage Theft Ordinance</a></b>  |   |
| You must read and accept the above stated terms & conditions  | Yes   |
| You must read and accept the above stated terms & conditions  | Yes   |

**Approved By:**

Albert Bargoot, Approved

Andrea Torres, Approved

Francis Otting, Approved

Mackenzie Richardson, Approved

# LICENSING COMMISSION LICENSE APPLICATION

City of Somerville, Commonwealth of Massachusetts

Application #: AL26-000014

File #: 26-010930

**Business Name:** TBD BREWING LLC

**Application Type:** Farmer Pourer (with alcohol)

**Location:** 14 Tyler St.

---

## APPLICANT

**Company Name:** Upton Connell & Devlin, LLP

**Business Address:**

112 Water Street  
Boston, MA 02109

**Legal Name of the Proposed Licenseholder (Name of Corporation, LLC, Partnership/LLP, Trust, Sole Proprietor, Other)** TBD Brewing, LLC

**DBA Name** Aeronaut Brewing

**In the last 5 years, have you been found guilty, liable, or responsible, in any judicial or administrative proceeding, for any violation of the City Wage Theft Ordinance or any State or Federal laws or regulations regulating the payment of wages?** No

**Manager of your establishment** Daniel Rassi

**Will you offer seating for the consumption of food on premises? (Food includes non-alcoholic beverages)** No

**Number of floors on the premises** 1

**Name of floor (Basement, balcony, Main, 2nd floor, etc.)<sup>1</sup>** 1st Floor

**Number of rooms<sup>1</sup>** 5

**Square footage<sup>1</sup>** 42

**Number of seats (enter 0 if you are not serving food on premises)<sup>1</sup>** 0

**Square footage<sup>2</sup>** 0

**Number of entrances into the indoor premises** 1

**Number of exits from the indoor premises** 4

**Number of rooms indoors** 5

**Total square footage indoors** 42

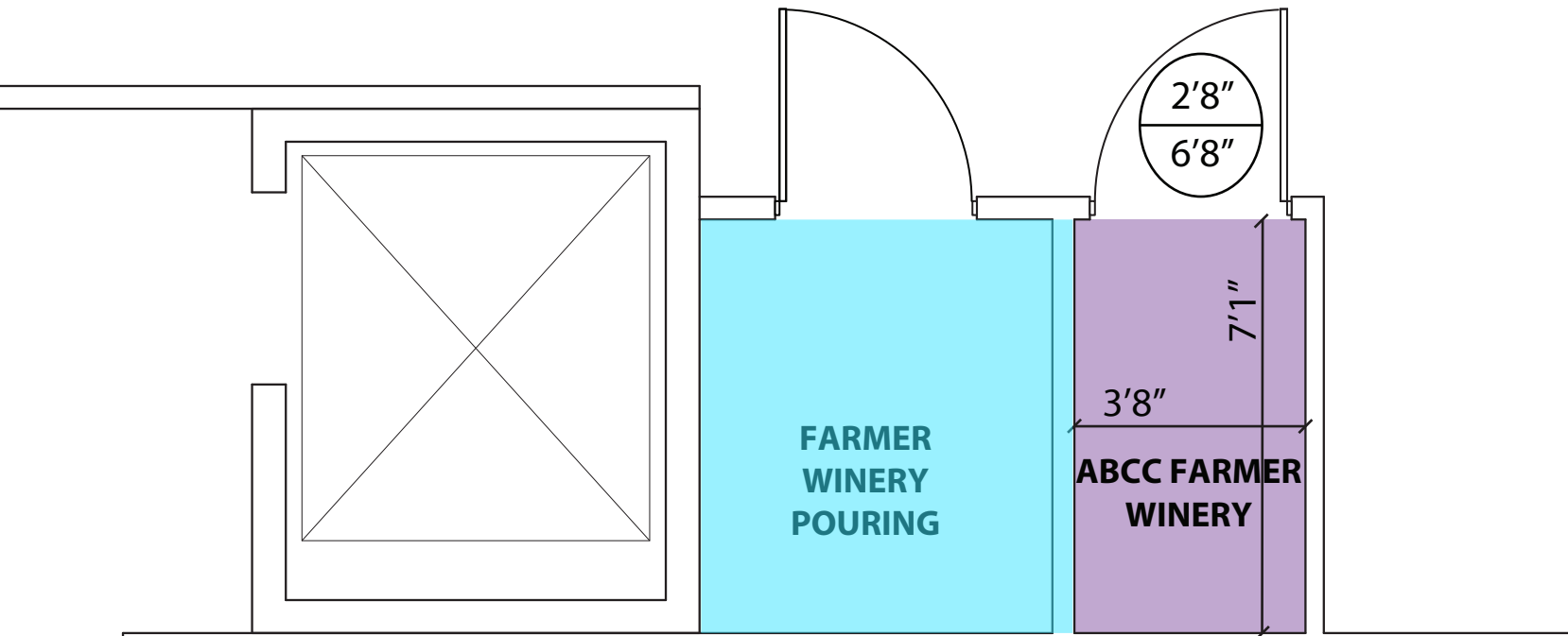
**Total seating capacity indoors** 0

**Total square footage outdoors** 0

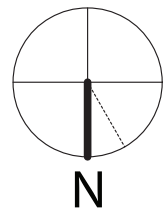
**Total seating capacity outdoors** 0

|  |  |
|--|--|
| <b>Total seating capacity</b>  | 0  |
| <b>Are you an Educational Institution?</b>   | No   |
| <b>Are you a Farmer Pourer?</b>  | Farmer Winery  |
| <b>Are you a Package Store?</b>  | No   |
| <b>Are you a Private Club?</b>   | No   |
| <b>Are you a Restaurant/Common Victualer?</b>  | No   |
| <b>Are you an Inn?</b>   | No   |
| <b>Days and hours of operation to serve, sell or distribute alcohol indoors</b>                    | Mon:6pm-11pm Tues-Thurs:5pm-12am Fri:5pm-12:30am<br>Sat: 10am-12:30:am Sun:10am-12am                 |
| <b>Will you offer Entertainment indoors(recorded music, tvs, performers, djs, dancing, etc.)?</b>  | No   |
| <b>Total Devices indoors</b>   | 0  |
| <b>Will you offer Entertainment outdoors(recorded music, tvs, performers, djs, dancing, etc.)?</b> | No   |
| <b>Describe any other businesses serving alcohol on the premises</b>                               | Farmer Brewery License held by TBD Brewing LLC which is contiguous to this New Farmer Winery License |
| <b>Have you obtained an alcohol license before?</b>  | Yes  |
| <b>List each license with the city, state, and year first licensed</b>                             | Somerville, MA 2013-2014   |
| <b>Have you ever had a license denied, revoked, or suspended?</b>                                  | No   |
| <b>Have you ever received a Notice of Violation?</b>   | No   |
| <b>Describe your outreach to the Ward of Alderman and the neighborhood</b>                         | None.  |
| <b>Will you be paying by debit or credit card</b>  | Yes  |
| <b>You must read and accept the above stated terms &amp; conditions</b>                            | Yes  |





DN →



# LICENSING COMMISSION LICENSE APPLICATION

City of Somerville, Commonwealth of Massachusetts

Application #: MEA26-000002

File #: 21-006120

**Business Name:** Advesa MA Inc

**Application Type:** Amending a Marijuana Establishment License

**Location:** 692 BROADWAY

---

## APPLICANT

**Company Name:** Fresh Connection

**Business Address:**

690 Broadway  
Somerville, MA 02144

**Enter your current business license #** MR281454

**Are you applying to move to a new location?** No

**Are you amending an existing license?** Yes

**ARE YOU CHANGING OWNERSHIP?** Yes

**List Current Owners** Jessica Pelletier, 51% Tony Veruza, 39%

**List All Current and New Owners** Fresh Connection Retail Partners LLC (100%)

**ARE YOU CHANGING OFFICERS OR DIRECTORS?** No

**ARE YOU CHANGING CONTROL PERCENTAGES?** Yes

**Current Control Percentage (Breakdown List with each owner)** Jessica Pelletier, 46% Tony Verzura, 25% Michael Latulippe, 18% Shanel Lindsay, 11%

**Proposed New Control Percentage (Breakdown List with each owner)** Samantha Seagaard, 51% Frais Cannexion Inc., 49% Indirect Control via Frais Cannexion Inc.: William Seagaard, 8.6% Zachary Swanson, 8.6% Fresh Holdings LLC, 16.1% Shawn Liu, 14.4% Patrick Filler, 1.3%

**ARE YOU CHANGING THE NAME OF YOUR BUSINESS?** Yes

**Proposed Corporate name** Advesa MA Inc

**Current corporate name** Advesa MA Inc

**Proposed DBA name** Fresh Connection

**Current DBA name** Blue River Terps

**ARE YOU CHANGING YOUR HOURS?** No



May 5, 2026

Advesa MA, Inc.  
MR284113 and MR281454  
[will@freshconnectionboston.com](mailto:will@freshconnectionboston.com)

## NOTICE: CHANGE OF NAME APPROVAL

### WHY ARE YOU RECEIVING THIS NOTICE?

This letter provides notice that the Marijuana Establishment (“ME”) and/or Medical Marijuana Treatment Center (“MTC”) has been approved by the Commission to officially change its d/b/a name from Blue River Terps to Fresh Connection.

### WHAT ARE YOUR NEXT STEPS?

The ME/MTC may now change its business name with the Massachusetts Secretary of the Commonwealth. Within 30 days from the date of this notice, the ME/MTC shall submit to the Commission a certificate of good standing from the Massachusetts Secretary of the Commonwealth, Articles of Organization, and Bylaws reflecting the new name of the ME/MTC. This information shall be sent to [licensing@cccmass.com](mailto:licensing@cccmass.com). Once the Commission has received and processed this information, a new license certificate will be issued to the licensee. Please note, license certificates will only contain the business name of the licensee and will not include the d/b/a name.

If your change of name involves only a d/b/a name, please note that your license record has been amended and no further action is required from the licensee.

Please be advised that the ME/MTC, within 30 days, should be in full compliance with Commission regulations pertaining to disclosing or displaying the business name on buildings and products. The ME/MTC is subject to inspection, at any time without prior notice, to ensure full compliance with 935 CMR 500.000 and 935 CMR 501.000. *935 CMR 500.301; 935 CMR 501.301.*



If you should have questions regarding this notice, please contact Licensing Specialist Sarah S. via email at [licensing@cccmass.com](mailto:licensing@cccmass.com).

Sincerely,

*Olivia Koval*

Olivia Koval  
Director of Licensing



**IMPORTANT!** This document(s) contains important information that could impact your license application or license. It is critical that you understand the information in this document. Please have it translated immediately.

Spanish:

¡ATENCIÓN! Este documento incluye información importante que podría afectar su licencia o solicitud de licencia. Es fundamental que entienda la información en este documento. Por favor, traducir de inmediato.

Traditional Chinese:

**重要信息！** 本文檔包含可能影響您的執照申請或執照的重要信息。您理解本文檔中的信息這一點至關重要。請立即找人翻譯此文件。

Haitian Creole:

**ENPÒTAN!** Dokiman sa a genyen enfòmasyon enpòtan ladan li ki te ka afekte demann ou pou lisans oswa lisans ou. Li kritik ou konprann enfòmasyon ki nan dokiman sa a. Tanpri fè yon moun tradwi li imedyatman.

Portuguese:

**IMPORTANTE!** Este(s) documento(s) contém informações importantes que podem afetar seu requerimento de licença ou licença. É fundamental que você compreenda as informações contidas nele(s). Obtenha a tradução imediatamente.

CV Creole:

**É IMPORTANT!** Es dukumentu(s) ten informasonn importantis ki podi afeta bu pididu di lisensa ou lisensa. É fundamental ki bu kompriendi informasonn nes dukumentu. Pur favor, traduzi imidiatamenti.

Vietnamese:

**QUAN TRỌNG!** (Các) tài liệu này có chứa thông tin quan trọng có thể ảnh hưởng đến đơn xin cấp giấy phép hoặc giấy phép của quý vị. Điều quan trọng là quý vị phải hiểu thông tin có trong tài liệu này. Hãy dịch nó ngay lập tức.

Yoruba:



**Ó ŞE PÀTÀKÌ!** Ìfitónilétí pàtàkì wà nínú (àwọn) ìwé yìí tí ó lè ní ipa lóri ibéèrè fún ìwé àşẹ tàbí ìwé àşẹ rẹ. Ó şe kókó kí ifitónilétí inú ìwé yìí yé ọ. Jòwó tùmò rẹ lójúkan náà.

French:

**"IMPORTANT !** Ce(s) document(s) contient des informations importantes qui pourraient avoir un impact sur votre demande de licence ou votre licence. Il est essentiel que vous compreniez les informations contenues dans ce document. Veuillez le faire traduire immédiatement."

Greek:

**ΣΗΜΑΝΤΙΚΟ!** Αυτό το έγγραφο περιέχει σημαντικές πληροφορίες που μπορεί να επηρεάσει την αίτηση έκδοσης άδειας ή την ίδια την άδεια. Είναι πολύ σημαντική η κατανόηση των πληροφοριών αυτού του εγγράφου. Παρακαλώ μεταφράστε το άμεσα!

Italian:

**IMPORTANTE!** Questo(i) documento(i) contiene informazioni importanti che potrebbero influenzare la tua richiesta di candidatura o licenza. È fondamentale che tu comprenda le informazioni contenute in



# LICENSING COMMISSION LICENSE APPLICATION

City of Somerville, Commonwealth of Massachusetts

Application #: AL26-000020

File #: 26-013212

**Business Name:** KoKo Cofee- Boynton Yards

**Application Type:** Common Victualer (without alcohol)

**Location:** 101 South Street

---

## APPLICANT

**Company Name:** Koko Coffee South Station LLC

**Business Address:**

745 Atlantic Ave  
Boston, MA 02111

**Business Ownership Type**

LLC

**Legal Name of the Proposed Licenseholder (Name of Corporation, LLC, Partnership/LLP, Trust, Sole Proprietor, Other)**

KoKo Coffee South Station LLC

**Name**

Daud Kyarizov

**Name**

N/A

**Name**

N/A

**Name**

N/A

**DBA Name**

KoKo Coffee

**In the last 5 years, have you been found guilty, liable, or responsible, in any judicial or administrative proceeding, for any violation of the City Wage Theft Ordinance or any State or Federal laws or regulations regulating the payment of wages?**

No

**Manager of your establishment**

Daud Kyarizov

**Will you offer seating for the consumption of food on premises? (Food includes non-alcoholic beverages)**

Yes

**Number of floors on the premises**

1

**Name of floor (Basement, balcony, Main, 2nd floor, etc.)<sup>1</sup>**

1st floor cafe

**Number of rooms<sup>1</sup>**

1

**Square footage<sup>1</sup>**

1620

**Number of seats (enter 0 if you are not serving food on premises)<sup>1</sup>**

44

**Square footage<sup>2</sup>**

0

**Number of entrances into the indoor premises**

3

**Number of exits from the indoor premises**

3

|  |                       |
|--|-----------------------|
| <b>Will you offer seating outdoors in season?</b>  | No                    |
| <b>Number of rooms indoors</b>   | 1                     |
| <b>Total square footage indoors</b>  | 1620                  |
| <b>Total seating capacity indoors</b>  | 44                    |
| <b>Total square footage outdoors</b>   | 0                     |
| <b>Total seating capacity outdoors</b>   | 0                     |
| <b>Total seating capacity</b>  | 44                    |
| <b>Are you an Educational Institution?</b>   | No                    |
| <b>Are you a Farmer Purer?</b>   | No                    |
| <b>Are you a Package Store?</b>  | No                    |
| <b>Are you a Private Club?</b>   | No                    |
| <b>Are you a Restaurant/Common Victualer?</b>  | Yes                   |
| <b>Are you an Inn?</b>   | No                    |
| <b>Days and hours of operation to serve food indoors</b>   | Mon-Fri 7:30am-2:00PM |
| <b>Will you offer Entertainment indoors(recorded music, tvs, performers, djs, dancing, etc.)?</b>  | No                    |
| <b>Total Devices indoors</b>   | 0                     |
| <b>Will you offer Entertainment outdoors(recorded music, tvs, performers, djs, dancing, etc.)?</b> | No                    |
| <b>Describe any other businesses serving alcohol on the premises</b>                               | N/A                   |
| <b>Have you obtained an alcohol license before?</b>  | No                    |
| <b>Have you ever had a license denied, revoked, or suspended?</b>                                  | No                    |
| <b>Have you ever received a Notice of Violation?</b>   | No                    |
| <b>Describe your outreach to the Ward of Alderman and the neighborhood</b>                         | N/A                   |
| <b>Will you be paying by debit or credit card</b>  | No                    |
| <b>You must read and accept the above stated terms &amp; conditions</b>                            | Yes                   |



# BREAKFAST

## BREAKFAST SANDWICH

\$7.75

Apple smoked wood bacon, sausage or black forest ham, egg and cheddar cheese on an english muffin.



## BAGELS

\$5.45

Plain, wheat, everything, sesame, asiago, onion or jalapeno.  
SIDES: butter, cream cheese, jam, or chocolate spread



## CROISSANT BREAKFAST

\$9.85

Black forest ham, cheese, tomatoes, and mixed greens tossed in olive oil dressing on a croissant.



## ORGANIC STEEL CUT OATMEAL

\$8.50

Mixed berries, granola, and brown sugar.



## BREAKFAST BURRITO

\$9.75

Apple smoked wood bacon, sausage or black forest ham, egg, cheddar cheese, guacamole, black beans, salsa, on a flour tortilla.



## SALMON LOX

\$11.00

Smoked salmon, tomato, cream cheese, red onion, capers, on a choice of toasted bagel.



# TARTINES

## SMOKED SALMON TARTINE

\$14.75

Smoked salmon, sliced avocado, tomato, microgreens, feta cheese, capers, olive oil dressing, pesto spread, multigrain bread.

## AVOCADO TARTINE

\$14.00

Sliced avocado, tomato, microgreens, feta cheese, sesame seeds, olive oil dressing, pesto spread, toasted multigrain bread



## CAPRESE SANDWICH

\$12.85

Fresh mozzarella, tomato, fresh basil, pesto spread, olive oil dressing, pressed focaccia bread



# SANDWICHES

## BALT

\$14.00

Apple smoked wood bacon, avocado, lettuce, tomato, house-made aioli on toasted sourdough bread.



## CHICKEN PITA

\$14.50

Roasted chicken, tomato, red cabbage carrot mix, mixed greens, house made labneh dressing, pita bread



## CLUB CHICKEN

\$14.50

Roasted chicken, cheese, tomato, house-made chipotle sauce, lettuce, on toasted sourdough bread.



# SANDWICHES

## GRILLED CHEESE

\$10

Choice of bread: multigrain, focaccia, croissant or french white.  
Choice of cheese: New School American cheddar, mozzarella, or white cheddar.

Add protein: roasted chicken, smoked applewood bacon, roasted turkey, avocado, or ham. +\$2

Add veggies: arugula, basil, lettuce, or tomato. +\$1

Add sauce: chipotle mayo or garlic aioli.



## CHICKEN QUESADILLA

\$12.75

Tortilla filled with roasted chicken, chopped tomatoes, avocado, melted cheese, and garlic aioli, with a side of salsa.

# SALAD & BOWLS

## HALLOUMI SALAD

\$14.75

Grilled halloumi, avocado, cherry tomatoes, romaine, arugula, pomegranate, honey vinaigrette.

Add Protein:  
Roasted Chicken or Bacon



## MEDITERANEAN BOWL

\$14.75

Mixed greens, 7 grains, roasted eggplant, cherry tomatoes, cucumbers, red cabbage & carrot mix, kalamata olives, feta cheese - Choice of olive oil or yogurt-based dressing

Add Protein:  
Roasted Chicken or Bacon



kokocoffeeusa





**KOKO COFFEE**

| Coffee            |                | Flavors           |            |
|-------------------|----------------|-------------------|------------|
| DRIP COFFEE       | 3.50/3.85      | VANILLA           | CARAMEL    |
| COLD BREW         | 4.50/4.95      | BLONDIE BATTER    | PISTACHIO  |
| ESPRESSO          | 4.50           | GINGER BREAD      | MOCHA      |
| MACCHIATO         | 4.75           | HONEY CINNAMON    | UBE        |
| CORTADO           | 4.95           | PUMPKIN SPICE     | NUTELLA    |
| CAPPUCCINO        | 5.50           | HAZELNUT          | MAPLE      |
| LATTE /ICED LATTE | 5.50/5.95/6.10 | LAVENDER          | SUGAR FREE |
| AMERICANO         | 4.95           |                   | VANILLA    |
|                   |                |                   |            |
| Tea               |                | Alternative Milks |            |
| CHAI TEA          | 5.50/5.95/6.10 | ORGANIC MILK      |            |
| MATCHA TEA LATTE  | 5.50/5.95/6.10 | OAT               |            |
| HOT / ICED TEA    | 4.50/5.00/5.50 | ALMOND            |            |

# LICENSING COMMISSION LICENSE APPLICATION

City of Somerville, Commonwealth of Massachusetts

Application #: AL26-000021

File #: 26-013306

**Business Name:** SODEXO AT MASS GENERAL  
BRIGHAM

**Application Type:** Common Victualer (without alcohol)

**Location:** 399 REVOLUTION DR

---

## APPLICANT

**Company Name:** Sodexo

**Business Address:**

400 Airborne Parkway  
Cheektowaga, NY 14225

**Business Ownership Type**

LLC

**Legal Name of the Proposed Licenseholder (Name of Corporation, LLC, Partnership/LLP, Trust, Sole Proprietor, Other)**

SODEXO OPERATIONS LLC

**Name**

N/A

**Name**

N/A

**Name**

N/A

**Name**

N/A

**DBA Name**

N/A

**In the last 5 years, have you been found guilty, liable, or responsible, in any judicial or administrative proceeding, for any violation of the City Wage Theft Ordinance or any State or Federal laws or regulations regulating the payment of wages?**

No

**Manager of your establishment**

Dhilla, Zulfikar

**Will you offer seating for the consumption of food on premises? (Food includes non-alcoholic beverages)**

Yes

**Number of floors on the premises**

1

**Name of floor (Basement, balcony, Main, 2nd floor, etc.)<sup>1</sup>**

1ST FLOOR

**Number of rooms<sup>1</sup>**

3

**Square footage<sup>1</sup>**

11435

**Number of seats (enter 0 if you are not serving food on premises)<sup>1</sup>**

250

**Square footage<sup>2</sup>**

0

**Use of Public Space Square Footage 150sqft or less**

0

**Use of Public Space Square Footage over 150sqft**

0

|  |   |
|--|---|
| <b>Number of entrances into the indoor premises</b>  | 2   |
| <b>Number of exits from the indoor premises</b>  | 2   |
| <b>Will you offer seating outdoors in season?</b>  | No  |
| <b>Number of rooms indoors</b>   | 3   |
| <b>Total square footage indoors</b>  | 11435   |
| <b>Total seating capacity indoors</b>  | 250   |
| <b>Total square footage outdoors</b>   | 0   |
| <b>Total seating capacity outdoors</b>   | 0   |
| <b>Total seating capacity</b>  | 250   |
| <b>Are you an Educational Institution?</b>   | No  |
| <b>Are you a Farmer Pourer?</b>  | No  |
| <b>Are you a Package Store?</b>  | No  |
| <b>Are you a Private Club?</b>   | No  |
| <b>Are you a Restaurant/Common Victualer?</b>  | No  |
| <b>Are you an Inn?</b>   | No  |
| <b>Days and hours of operation to serve food indoors</b>   | M-F 7AM-3PM   |
| <b>Will you offer Entertainment indoors(recorded music, tvs, performers, djs, dancing, etc.)?</b>  | No  |
| <b>Total Devices indoors</b>   | 0   |
| <b>Will you offer Entertainment outdoors(recorded music, tvs, performers, djs, dancing, etc.)?</b> | No  |
| <b>Describe any other businesses serving alcohol on the premises</b>                               | N/A   |
| <b>Have you obtained an alcohol license before?</b>  | No  |
| <b>Have you ever had a license denied, revoked, or suspended?</b>                                  | No  |
| <b>Have you ever received a Notice of Violation?</b>   | No  |
| <b>Describe your outreach to the Ward of Alderman and the neighborhood</b>                         | Very limited outreach as we are contracted to provide the food services specifically at the Mass General HQ location. |
| <b>Will you be paying by debit or credit card</b>  | Yes   |
| <b>You must read and accept the above stated terms &amp; conditions</b>                            | Yes   |



Core Breakfast

|        |                          |
|--------|--------------------------|
| 216211 | Breakfast Handheld MTO   |
| 98607  | Texas French Toast       |
| 92211  | One Cafe Free Fried Egg  |
| 59289  | Two Cage Free Fried Eggs |
| 65561  | Seasoned Scrambled Eggs  |
| 80368  | Bacon Slices             |
| 65570  | Sausage Links            |
| 33793  | Turkey Bacon             |
| 59520  | Home Fries               |
| 58675  | Shredded Hash Browns     |



**CITY OF SOMERVILLE**  
Commonwealth of Massachusetts  
93 Highland Avenue  
Somerville, MA 02143  
(617) 625-6600

## SPECIAL ALCOHOL APPLICATION - Special Alcohol License

File #: 26-012635  
License #: SAL26-000015  
Address: 1 WESTWOOD RD  
Licensee: Anna Carr Somerville Museum

|  |   |
|--|---|
| <b># of days</b>   | 1   |
| <b>Is your Special Alcohol License related to a separate Public Event License application?</b> | No  |
| <b>What is the name of your event?</b>   | Art Stays Here Opening Reception  |
| <b>Where will your event take place?</b>   | Somerville Museum   |
| <b>Describe your event in detail:</b>  | This event is to celebrate the opening of our new exhibition Art Stays Here. We will serve grocery store snacks and a TIPS certified bartender serving white wine and Prosecco. |
| <b>What is your name?</b>  | Anusha Tandon   |
| <b>Organization name (if none, write None):</b>  | Somerville Museum   |
| <b>Are you the party applying for the Special Alcohol License?</b>                             | Yes   |
| <b>Have you received a Special Alcohol License in the past?</b>                                | Yes   |
| <b>Please Describe:</b>  | Other opening and closing receptions  |
| <b>What is your contact phone number?</b>  |   |
| <b>What is your contact email address?</b>   |   |
| <b>Please re-enter your contact email address</b>  |   |

here to ensure accuracy:

|  |                      |
|--|----------------------|
| <b>Alcohol Service Begins date:</b>  | 06/05/2026           |
| <b>Alcohol Service Begins time:</b>  | 05:00 PM             |
| <b>Alcohol Service Ends date:</b>  | 06/05/2026           |
| <b>Alcohol Service Ends time:</b>  | 07:00 PM             |
| <b>Would you like to request additional dates?</b>   | No                   |
| <b>Confirm that you are applying for a Special Alcohol License to serve or sell alcohol to the public</b>  | Yes                  |
| <b>What type of alcohol will you be serving?</b>   | Wine Only            |
| <b>In the last 5 years, have you been found guilty, liable, or responsible, in any judicial or administrative proceeding, for any violation of the City Wage Theft Ordinance or any State or Federal laws or regulations regulating the payment of wages?<a href="#">City Wage Theft Ordinance</a></b> | No                   |
| <b>What is the budget for this event?</b>  | 500.00               |
| <b>Will your event be indoors or outdoors?</b>   | Indoors              |
| <b>What is the maximum capacity for your indoor event?</b>   | 100                  |
| <b>Estimated number of people attending your event:</b>  | 50                   |
| <b>Estimated maximum attendance at your event at one time:</b>   | 50                   |
| <b>Will your event have food?</b>  | Yes                  |
| <b>Please describe:</b>  | Grocery store snacks |
| <b>Will your event feature open grilling?</b>  | No                   |
| <b>Will your event have any structures?<br/>Structures include, but are not limited to, tents and bouncy houses.</b>   | No                   |
| <b>Will there be any amplified music of any kind at your event?</b>  | No                   |
| <b>Small Bluetooth speaker</b>   | 0                    |
| <b>Large powered speakers</b>  | 0                    |

|  |   |
|--|---|
| <b>Live band with powered speakers</b>   | 0   |
| <b>Will your event have restrooms?</b>   | Yes   |
| <b>Please describe the restrooms being provided, and if you are providing portable toilets, state how they will be delivered and removed:</b>  | 2 accessible gender neutral bathrooms are located in our building |
| <b>If granted, confirm that you will be purchasing the alcohol for your Special Alcohol License from an authorized distributor. The current list of authorized distributors can be found here: <a href="#">Authorized sources</a></b>  | Yes   |
| <b>If granted, further confirm that you understand that you <u>cannot</u> purchase the alcohol for your Special Alcohol License from a liquor or package store.</b>  | Yes   |
| <b>If granted, will your alcohol server(s) be TIPS certified (or similar)?</b>   | Yes   |
| <b>Confirm that you understand that a fire and/or police detail may be required as a condition of approval for this license, and that if it is, you will be contacted by a representative from the respective department and will be responsible for any associated costs.</b> | Yes   |

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**Approved By:**

**Albert Bargoot, Approved**

**Francis Otting, Approved**

**Mackenzie Richardson, Approved**



**CITY OF SOMERVILLE**  
Commonwealth of Massachusetts  
93 Highland Avenue  
Somerville, MA 02143  
(617) 625-6600

## SPECIAL ALCOHOL APPLICATION - Special Alcohol License

File #: 26-013469  
License #: SAL26-000017  
Address: 255 WASHINGTON ST  
Licensee: Carrie Dahl Warehouse XI

|  |                          |
|--|--------------------------|
| <b># of days</b>   | 19                       |
| <b>Is your Special Alcohol License related to a separate Public Event License application?</b> | No                       |
| <b>What is the name of your event?</b>   | Live Music Series        |
| <b>Where will your event take place?</b>   | 11 Sanborn Court         |
| <b>Describe your event in detail:</b>  | Live music events        |
| <b>What is your name?</b>  | Margaret Morrisey        |
| <b>Organization name (if none, write None):</b>  | Warehouse XI             |
| <b>Are you the party applying for the Special Alcohol License?</b>                             | Yes                      |
| <b>Have you received a Special Alcohol License in the past?</b>                                | Yes                      |
| <b>Please Describe:</b>  | Same events past months. |
| <b>What is your contact phone number?</b>  |                          |
| <b>What is your contact email address?</b>   |                          |
| <b>Please re-enter your contact email address here to ensure accuracy:</b>                     |                          |
| <b>Alcohol Service Begins date:</b>  | 05/21/2026               |

|  |   |
|--|---|
| <b>Alcohol Service Begins time:</b>  | 05:00 PM  |
| <b>Alcohol Service Ends date:</b>  | 05/21/2026  |
| <b>Alcohol Service Ends time:</b>  | 11:30 PM  |
| <b>Would you like to request additional dates?</b>   | Yes   |
| <b>Please enter the dates and times: (maximum 10 separated by commas)</b>  | 5/22, 23, 26, 27, 28, 29, 30, 31 6/3, 4, 6, 7, 8, 9, 10, 11, 12, 16 |
| <b>Are you requesting more than 10 dates?</b>  | Yes   |
| <b>Please describe:</b>  | Music shows   |
| <b>Confirm that you are applying for a Special Alcohol License to serve or sell alcohol to the public</b>  | Yes   |
| <b>What type of alcohol will you be serving?</b>   | Wine & Beer/Malt  |
| <b>In the last 5 years, have you been found guilty, liable, or responsible, in any judicial or administrative proceeding, for any violation of the City Wage Theft Ordinance or any State or Federal laws or regulations regulating the payment of wages?<a href="#">City Wage Theft Ordinance</a></b> | No  |
| <b>What is the budget for this event?</b>  | 500.00  |
| <b>Will your event be indoors or outdoors?</b>   | Indoors   |
| <b>What is the maximum capacity for your indoor event?</b>   | 150   |
| <b>Estimated number of people attending your event:</b>  | 100   |
| <b>Estimated maximum attendance at your event at one time:</b>   | 150   |
| <b>Will your event have food?</b>  | No  |
| <b>Will your event feature open grilling?</b>  | No  |
| <b>Will your event have any structures? Structures include, but are not limited to, tents and bouncy houses.</b>   | No  |
| <b>Will there be any amplified music of any kind at your event?</b>  | Yes   |
| <b>Small Bluetooth speaker</b>   | 0   |

|   |                  |
|---|------------------|
| Large powered speakers  | 0                |
| Live band with powered speakers   | 1                |
| Confirm that you have read and understand the city's Noise Control Ordinance, located at: <a href="#">Code of ordinances</a>  | Yes              |
| Will your event have restrooms?   | Yes              |
| Please describe the restrooms being provided, and if you are providing portable toilets, state how they will be delivered and removed:  | 3 indoor toilets |
| If granted, confirm that you will be purchasing the alcohol for your Special Alcohol License from an authorized distributor. The current list of authorized distributors can be found here: <a href="#">Authorized sources</a>  | Yes              |
| If granted, further confirm that you understand that you <u>cannot</u> purchase the alcohol for your Special Alcohol License from a liquor or package store.  | Yes              |
| If granted, will your alcohol server(s) be TIPS certified (or similar)?   | Yes              |
| Confirm that you understand that a fire and/or police detail may be required as a condition of approval for this license, and that if it is, you will be contacted by a representative from the respective department and will be responsible for any associated costs. | Yes              |

**Approved By:**

**Albert Bargoot, Approved**

**Francis Otting, Approved with Conditions**

Continue to maintain the fire alarm system and sprinkler system and schedule maintenance every 12 months. The EXIT signs and emergency lighting must be tested in 2026 with a test report provided to Somerville Fire Department.

**Mackenzie Richardson, Approved**



**CITY OF SOMERVILLE**  
Commonwealth of Massachusetts  
93 Highland Avenue  
Somerville, MA 02143  
(617) 625-6600

## SPECIAL ALCOHOL APPLICATION - Special Alcohol License

File #: 26-013627  
License #: SAL26-000018  
Address: 197 ELM ST  
Licensee: Johanna Loughran Revival Davis, LLC

|  |   |
|--|---|
| <b># of days</b>   | 1   |
| <b>Is your Special Alcohol License related to a separate Public Event License application?</b> | No  |
| <b>What is the name of your event?</b>   | Christopher Street Project Gathering  |
| <b>Where will your event take place?</b>   | Revival Cafe and Kitchen - 197 Elm St   |
| <b>Describe your event in detail:</b>  | This is a private event for guests of the Christopher Street Project. All food + beverage is supplied by Revival Cafe and Kitchen. Alcoholic beverages are served onsite by a TIPS certified bartender. |
| <b>What is your name?</b>  | Kelly O'Donnell   |
| <b>Organization name (if none, write None):</b>  | Christopher Street Project  |
| <b>Are you the party applying for the Special Alcohol License?</b>                             | Yes   |
| <b>Have you received a Special Alcohol License in the past?</b>                                | Yes   |
| <b>Please Describe:</b>  | Private events hosted onsite at Revival Cafe and Kitchen  |
| <b>What is your contact phone number?</b>  |   |
| <b>What is your contact email address?</b>   |   |

---

Please re-enter your contact email address here to ensure accuracy:

---

Alcohol Service Begins date: 06/16/2026

---

Alcohol Service Begins time: 06:30 PM

---

Alcohol Service Ends date: 06/16/2026

---

Alcohol Service Ends time: 08:30 PM

---

Would you like to request additional dates? No

---

Confirm that you are applying for a Special Alcohol License to serve or sell alcohol to the public Yes

---

What type of alcohol will you be serving? Wine & Beer/Malt

---

In the last 5 years, have you been found guilty, liable, or responsible, in any judicial or administrative proceeding, for any violation of the City Wage Theft Ordinance or any State or Federal laws or regulations regulating the payment of wages?[City Wage Theft Ordinance](#) No

---

What is the budget for this event? 1200.00

---

Will your event be indoors or outdoors? Both Indoors and Outdoors

---

What is the maximum capacity for your indoor event? 40

---

Estimated number of people attending your event: 30

---

Estimated maximum attendance at your event at one time: 30

---

Will your event have food? Yes

---

Please describe: Appetizers

---

Will your event feature open grilling? No

---

Will your event have any structures? Structures include, but are not limited to, tents and bouncy houses. No

---

Will there be any amplified music of any kind at your event? No

---

Small Bluetooth speaker 0

---

|  |   |
|--|---|
| <b>Large powered speakers</b>  | 0   |
| <b>Live band with powered speakers</b>   | 0   |
| <b>Will your event have restrooms?</b>   | Yes   |
| <b>Please describe the restrooms being provided, and if you are providing portable toilets, state how they will be delivered and removed:</b>  | Restrooms located in Revival Cafe and Kitchen |
| <b>If granted, confirm that you will be purchasing the alcohol for your Special Alcohol License from an authorized distributor. The current list of authorized distributors can be found here: <a href="#">Authorized sources</a></b>  | Yes   |
| <b>If granted, further confirm that you understand that you <u>cannot</u> purchase the alcohol for your Special Alcohol License from a liquor or package store.</b>  | Yes   |
| <b>If granted, will your alcohol server(s) be TIPS certified (or similar)?</b>   | Yes   |
| <b>Confirm that you understand that a fire and/or police detail may be required as a condition of approval for this license, and that if it is, you will be contacted by a representative from the respective department and will be responsible for any associated costs.</b> | Yes   |

---

**Approved By:**  
**Albert Bargoot, Approved**  
**Francis Otting, Approved**  
**Mackenzie Richardson, Approved**



**CITY OF SOMERVILLE**  
Commonwealth of Massachusetts  
93 Highland Avenue  
Somerville, MA 02143  
(617) 625-6600

## SPECIAL ALCOHOL APPLICATION - Special Alcohol License

File #: 26-011846  
License #: SAL26-000013  
Address: 14 Tyler St  
Licensee: Daniel Rassi Aeronaut Brewing Company

|  |  |
|--|--|
| <b># of days</b>   | 1  |
| <b>Is your Special Alcohol License related to a separate Public Event License application?</b> | Yes  |
| <b>What is the name of your event?</b>   | Aeronaut Patio-Palooza   |
| <b>Where will your event take place?</b>   | Aeronaut Brewing Co. Patio   |
| <b>Describe your event in detail:</b>  | Nine local musical artists and groups will be performing on our patio to the general public, free of charge, over three event dates. We will feature Aeronaut beer and food from our subtenants and neighbors. |
| <b>What is your name?</b>  | Ronn Friedlander   |
| <b>Organization name (if none, write None):</b>  | TBD Brewing LLC d/b/a Aeronaut Brewing Company   |
| <b>Are you the party applying for the Special Alcohol License?</b>                             | Yes  |
| <b>Have you received a Special Alcohol License in the past?</b>                                | Yes  |
| <b>Please Describe:</b>  | We have hosted several special events on our patio in the past.  |
| <b>What is your contact phone number?</b>  |  |

**What is your contact email address?**

**Please re-enter your contact email address here to ensure accuracy:**

**Alcohol Service Begins date:** 07/11/2026

**Alcohol Service Begins time:** 02:00 PM

**Alcohol Service Ends date:** 07/11/2026

**Alcohol Service Ends time:** 07:30 PM

**Would you like to request additional dates?** Yes

**Please enter the dates and times: (maximum 10 separated by commas)** 7/18/2026, 7/25/2026. Rain date of 8/1/2026.

**Are you requesting more than 10 dates?** No

**Confirm that you are applying for a Special Alcohol License to serve or sell alcohol to the public** Yes

**What type of alcohol will you be serving?** Wine & Beer/Malt

**In the last 5 years, have you been found guilty, liable, or responsible, in any judicial or administrative proceeding, for any violation of the City Wage Theft Ordinance or any State or Federal laws or regulations regulating the payment of wages?** [City Wage Theft Ordinance](#) No

**What is the budget for this event?** 12000.00

**Will your event be indoors or outdoors?** Outdoors

**Estimated number of people attending your event:** 600

**Estimated maximum attendance at your event at one time:** 300

**Will your event have food?** Yes

**Please describe:** Our existing vendors and neighbors will serve food.

**Will your event feature open grilling?** No

**Will your event have any structures? Structures include, but are not limited to, tents and bouncy houses.** No

**Will there be any amplified music of any kind**

|   |   |
|---|---|
| at your event?  | Yes   |
| Small Bluetooth speaker   | 0   |
| Large powered speakers  | 0   |
| Live band with powered speakers   | 1   |
| Confirm that you have read and understand the city's Noise Control Ordinance, located at: <a href="#">Code of ordinances</a>  | Yes   |
| Will your event have restrooms?   | Yes   |
| Please describe the restrooms being provided, and if you are providing portable toilets, state how they will be delivered and removed:  | In addition to our existing indoor restrooms, we will provide additional restrooms directly accessible to the patio in the Somernova common area. |
| If granted, confirm that you will be purchasing the alcohol for your Special Alcohol License from an authorized distributor. The current list of authorized distributors can be found here: <a href="#">Authorized sources</a>  | Yes   |
| If granted, further confirm that you understand that you <u>cannot</u> purchase the alcohol for your Special Alcohol License from a liquor or package store.  | Yes   |
| If granted, will your alcohol server(s) be TIPS certified (or similar)?   | Yes   |
| Confirm that you understand that a fire and/or police detail may be required as a condition of approval for this license, and that if it is, you will be contacted by a representative from the respective department and will be responsible for any associated costs. | Yes   |

Approved By:  
Francis Otting, Approved  
Mackenzie Richardson, Approved