

2016 LIQUOR LICENSE RENEWAL APPLICATION
FIRST CLASS RESTAURANT/BAR LICENSE TO SELL MALT AND VINOUS BEVERAGES

4805-001-1RST-001

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License Year Beginning May 1, 2016 ending April 30, 2017

Fee: \$230.00 of which
\$115.00 is paid to town/city
\$115.00 is paid to DLC
Town: 04030 - HINESBURG

MISREPRESENTATION OF A MATERIAL FACT ON ANY LICENSE APPLICATION SHALL BE GROUNDS
FOR SUSPENSION OR REVOCATION OF THE LICENSE, AFTER NOTICE AND HEARING

Applicant: Review all of the information presented on this form, indicating any changes in the spaces provided.

Applicant: Ayer Golf, Incorporated
Doing Business As:

Licensee # 4805- 1

Cedar Knoll Country Club
13020 Route 116
Hinesburg VT 05461
Telephone: (802) 482-3186

Mailing Address:
13020 Route 116
Hinesburg VT 05461

PLEASE INCLUDE EMAIL ADDRESS: CKCCsupport@aol.com

Description of Premises:

A restaurant located in a one story wood frame building being approximately 2400 square feet in size and designated as the Clubhouse for Cedar Knoll Country Club located adjacent to RR 1 on Route 116 in the Town of Hinesburg, Vermont.

Lessor:

Ruth and Raymond Ayer
Hinesburg Vt

Last Enforcement Seminar: 04/12/2014

Fed. ID Number: 26-0016517 Incorporation Date: 01/08/2002 Valid Charter?: Yes State of Charter: Vermont

Majority of Directors are US Citizens: Yes

ATTACH AN ADDITIONAL SHEET TO THIS APPLICATION NOTING ANY NECESSARY CORRECTIONS OR CHANGES AND UPDATES THAT HAVE OCCURRED DURING THE PAST YEAR.

Corporation	Name	Address	Town/City	State	Zip Code
		13020			
Director	1. Ayer, Ruth B	Rt. 116	Hinesburg	VT	05461
Director	2. Ayer, Thomas	80 Bissonette Lane	Hinesburg	VT	05461
Director	3. Ayer, Timothy	795 Gilman Road	Hinesburg	VT	05461
		13020			
Stockholder	4. Ayer, Ruth B	Rt. 116	Hinesburg	VT	05461
Stockholder	5. Ayer, Thomas	80 Bissonette Lane	Hinesburg	VT	05461
Stockholder	6. Ayer, Timothy	795 Gilman Road	Hinesburg	VT	05461

Has any director or stockholder been convicted or pleaded guilty to any criminal or motor vehicle offense in any court of law (including traffic tickets by mail) during the last year? Yes No
If yes, please attach the following information: Individual's name, court/traffic bureau, offense and date

In the past year has any director or stockholder of the corporation held any elective or appointive state, county, city, village or town office in Vermont (See VSA, T.7, Ch.9, Sec. 223)? Yes No
If yes, please attach the following information: Individual's name, office and jurisdiction

Vt. Dept. of Health Food License No.: 10539

Vt. Dept. of Health Lodging No.:

Vt. Tax Dept. Meals & Rooms Cert./Acct. No.: 260016517F MRT10044251

Disclosure of Non-profit Organization?: Yes No

ALL APPLICANTS MUST COMPLETE AND SIGN

The applicant understands and agrees that the Liquor Control Board may obtain criminal history record information from State and Federal record repositories.

I/We hereby certify, under the pains and penalties of perjury, that I/We are in good standing with respect to or in full compliance with a plan approved by the Commissioner of Taxes to pay any and all taxes due the State of Vermont as of the date of this application. (VSA, Title 32, Section 3113)

I/We hereby certify that I/We are not under an obligation to pay child support or that I/We are in good standing with respect to child support or are in full compliance with a plan to pay any and all child support payable under a support order. (VSA, Title 15, Section 795)

In accordance with 21 VSA, Section 1378(b), I/We certify, under pains and penalties of perjury, that I/We are in good standing with respect to or in full compliance with a plan to pay any and all contributions or payments in lieu of contributions due to the Department of Employment and Training.

I/We have registered the trade name of these premises with the Secretary of State.

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2016 LIQUOR LICENSE RENEWAL APPLICATION
FIRST CLASS RESTAURANT/BAR LICENSE TO SELL MALT AND VINOUS BEVERAGES

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I/We hereby certify that the information in this application is true and complete.

Dated this 29th day of February, 2016

Signature of authorized agent
of corporation, company, club or association

Signature of individual or partners

Luther O'Connell
President
(Title)

Are you making this application for the benefit of any other party? Yes No

Upon being satisfied that the conditions precedent to the granting of this license as provided in Title 7 of the Vermont Statutes Annotated, as amended, have been fully met by the applicant, the commissioners will endorse their recommendation on the back of the application and transmit it to the Liquor Control Board for suitable action thereon, before any license may be granted. For the information of the Liquor Control Board, all applications shall carry the signature of each individual commissioner registering either approval or disapproval. Lease or title must be recorded in town or city before issuance of license.

APPROVED

DISAPPROVED

Approved by Board of Control Commissioners of the City or Town of _____.

Total Membership _____, _____ members present

Attest, _____, Town Clerk

TOWN OR CITY CLERK SHALL MAIL APPROVED RENEWAL DIRECTLY TO:
DEPARTMENT OF LIQUOR CONTROL
13 GREEN MOUNTAIN DRIVE
MONTPELIER, VT 05602

If application is disapproved, local control commissioners shall notify the applicant by letter.

No formal action taken by any agency or authority of any town board of selectmen or city board of aldermen on a first or second class license application shall be considered binding except as taken or made at an open public meeting. VSA T-1, Sec.312

2016 LIQUOR LICENSE RENEWAL APPLICATION
OUTSIDE CONSUMPTION PERMIT

4805-001-OUTC-001

Page 1
Fee: \$20.00
Paid to DLC

License Year Beginning May 1, 2016 ending April 30, 2017

MISREPRESENTATION OF A MATERIAL FACT ON ANY LICENSE APPLICATION SHALL BE GROUNDS
FOR SUSPENSION OR REVOCATION OF THE LICENSE, AFTER NOTICE AND HEARING

Applicant: Review all of the information presented on this form, indicating any changes in the spaces provided.

Applicant: Ayer Golf, Incorporated
Doing Business As:

Licensee # 4805- 1

Cedar Knoll Country Club
13020 Route 116
Hinesburg VT 05461
Telephone: (802) 482-3186

Mailing Address:
13020 Route 116
Hinesburg VT 05461

PLEASE INCLUDE EMAIL ADDRESS: ckccsupport@ad.com

Description of the delineated area is as follows:

Golf Course area with proper supervision. 9:00 a.m. to 4:00 p.m.
April through October.

I/We hereby certify, under the pains and penalties of perjury, that I/We are in good standing with respect to or in full compliance with a plan approved by the Commissioner of Taxes to pay any and all taxes due the State of Vermont as of the date of this application. (VSA, Title 32, Section 3113)

I/We hereby certify that I/We are not under an obligation to pay child support or that I/We are in good standing with respect to child support or are in full compliance with a plan to pay any and all child support payable under a support order. (VSA, Title 15, Section 795)

In accordance with 21 VSA, Section 1378(b), I/We certify, under pains and penalties of perjury, that I/We are in good standing with respect to or in full compliance with a plan to pay any and all contributions or payments in lieu of contributions due to the Department of Employment and Training.

I/We hereby certify that the information in this application is true and complete.

Dated this 29th day of February, 2016

Signature of authorized agent
of corporation, company, club or association

Signature of individual or partners

Ruth O'Leary
President
(Title)

Are you making this application for the benefit of any other party? Yes No

MAKE CHECKS PAYABLE TO AND MAIL TO: VERMONT DEPARTMENT OF LIQUOR CONTROL
13 GREEN MOUNTAIN DRIVE
MONTPELIER, VT 05602

Upon being satisfied that the conditions precedent to the granting of this license as provided in Title 7 of the Vermont Statutes Annotated, as amended, have been fully met by the applicant, the commissioners will endorse their recommendation on the back of the application and transmit it to the Liquor Control Board for suitable action thereon, before any license may be granted. For the information of the Liquor Control Board, all applications shall carry the signature of each individual commissioner registering either approval or disapproval. Lease or title must be recorded in town or city before issuance of license.

APPROVED

DISAPPROVED

Approved by Board of Control Commissioners of the City or Town of _____.

Total Membership _____, _____ members present

Attest, _____, Town Clerk

2016 LIQUOR LICENSE RENEWAL APPLICATION
FIRST CLASS RESTAURANT/BAR LICENSE TO SELL MALI' AND VINOUS BEVERAGES

1200-001-1RST-001

Page 1

License Year Beginning May 1, 2016 ending April 30, 2017

Fee: \$230.00 of which
\$115.00 is paid to town/city
\$115.00 is paid to DLC
Town: 04030 - HINESBURG

MISREPRESENTATION OF A MATERIAL FACT ON ANY LICENSE APPLICATION SHALL BE GROUNDS
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Applicant: Review all of the information presented on this form, indicating any changes in the spaces provided.

Applicant: Travia's Inc. Licensee # 1200- 1
Doing Business As:

Travia's Restaurant
Shelburne Falls Road
Hinesburg VT 05461
Telephone: (802) 482-3850

Mailing Address:
2436 South Road
Williston VT 05495

PLEASE INCLUDE EMAIL ADDRESS: JMellion@gmail.com

Description of Premises:

Restaurant located in a one-story wood frame building situated approximately one hundred yards west of the intersection of State Route #116 and the Shelburne Falls Road, in the Town of Hinesburg, Vermont.

Lessor:

Robert Mellion
2436 South Road
Williston VT 05495

Last Enforcement Seminar: 03/01/2015

Fed. ID Number: 03-0321232 Incorporation Date: 07/01/1989 Valid Charter?: Yes State of Charter: Vermont

Majority of Directors are US Citizens: Yes

ATTACH AN ADDITIONAL SHEET TO THIS APPLICATION NOTING ANY NECESSARY CORRECTIONS OR CHANGES AND UPDATES THAT HAVE OCCURRED DURING THE PAST YEAR.

Corporation	Name	Address	Town/City	State	Zip Code
Director	1. Mellion, Travia Jill	33 Harbor View Road	South Burlington	VT	05403
Director	2. Mellion, Robert M.	33 Harbor View Road	South Burlington	VT	05403
Stockholder	3. Mellion, Travia Jill	33 Harbor View Road	South Burlington	VT	05403
Stockholder	4. Mellion, Robert M.	33 Harbor View Road	South Burlington	VT	05403

Has any director or stockholder been convicted or pleaded guilty to any criminal or motor vehicle offense in any court of law (including traffic tickets by mail) during the last year? Yes No
If yes, please attach the following information: Individual's name, court/traffic bureau, offense and date

In the past year has any director or stockholder of the corporation held any elective or appointive state, county, city, village or town office in Vermont (See VSA, T.7, Ch.9, Sec. 223)? Yes No
If yes, please attach the following information: Individual's name, office and jurisdiction

Vt. Dept. of Health Food License No.: 271

Vt. Dept. of Health Lodging No.:

Vt. Tax Dept. Meals & Rooms Cert./Acct. No.: 88444

Disclosure of Non-profit Organization?: Yes No

ALL APPLICANTS MUST COMPLETE AND SIGN

The applicant understands and agrees that the Liquor Control Board may obtain criminal history record information from State and Federal record repositories.

I/We hereby certify, under the pains and penalties of perjury, that I/We are in good standing with respect to or in full compliance with a plan approved by the Commissioner of Taxes to pay any and all taxes due the State of Vermont as of the date of this application. (VSA, Title 32, Section 3113)

I/We hereby certify that I/We are not under an obligation to pay child support or that I/We are in good standing with respect to child support or are in full compliance with a plan to pay any and all child support payable under a support order. (VSA, Title 15, Section 795)

In accordance with 21 VSA, Section 1378(b), I/We certify, under pains and penalties of perjury, that I/We are in good standing with respect to or in full compliance with a plan to pay any and all contributions or payments in lieu of contributions due to the Department of Employment and Training.

I/We have registered the trade name of these premises with the Secretary of State.

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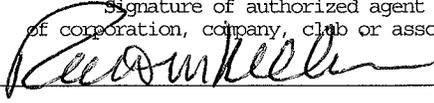
Page 2

I/We hereby certify that the information in this application is true and complete.

Dated this 16 day of FEB., 2016

Signature of authorized agent
of corporation, company, club or association

Signature of individual or partners



(Title)

Are you making this application for the benefit of any other party? Yes No

Upon being satisfied that the conditions precedent to the granting of this license as provided in Title 7 of the Vermont Statutes Annotated, as amended, have been fully met by the applicant, the commissioners will endorse their recommendation on the back of the application and transmit it to the Liquor Control Board for suitable action thereon, before any license may be granted. For the information of the Liquor Control Board, all applications shall carry the signature of each individual commissioner registering either approval or disapproval. Lease or title must be recorded in town or city before issuance of license.

APPROVED

DISAPPROVED

Approved by Board of Control Commissioners of the City or Town of _____.

Total Membership _____, _____ members present

Attest, _____, Town Clerk

TOWN OR CITY CLERK SHALL MAIL APPROVED RENEWAL DIRECTLY TO:
DEPARTMENT OF LIQUOR CONTROL
13 GREEN MOUNTAIN DRIVE
MONTPELIER, VT 05602

If application is disapproved, local control commissioners shall notify the applicant by letter.

No formal action taken by any agency or authority of any town board of selectmen or city board of aldermen on a first or second class license application shall be considered binding except as taken or made at an open public meeting. VSA T-1, Sec. 312

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Town: 04030 - HINESBURG

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Applicant: Review all of the information presented on this form, indicating any changes in the spaces provided.

Applicant: Two Z's, Inc.

Licensee # 1203- 1

Doing Business As:

Pappa Nick's Pizza & Restaurant
Route 116
Hinesburg VT 05461
Telephone: (802) 482-6050

Mailing Address:
P.O. Box 469
Hinesburg VT 05461

PLEASE INCLUDE EMAIL ADDRESS: _____

Description of Premises:

Premises: XX Owned Leased

Restaurant located in a one-story wood frame building on the east side of Main Street, Route #116, approximately 1/4 mile south of the intersection of Silver Street and Route #116, in the Town of Hinesburg, Vermont.

Last Enforcement Seminar: 02/04/2015

Fed. ID Number: 03-0327680 Incorporation Date: 06/27/1990 Valid Charter?: **Yes** State of Charter: Vermont

Majority of Directors are US Citizens: **Yes**

ATTACH AN ADDITIONAL SHEET TO THIS APPLICATION NOTING ANY NECESSARY CORRECTIONS OR CHANGES AND UPDATES THAT HAVE OCCURRED DURING THE PAST YEAR.

Corporation	Name	Address	Town/City	State	Zip Code
Director	1. Zontanos, Voula	3 Rosewood Lane	Essex Junction	VT	05452
Director	2. Zontanos, Panagiota (Paula)	155 Chesapeake Drive	Shelburne	VT	05482
Director	3. Zontanos, Dimitra	49 Waverly Road	Woburn	MA	01801
Stockholder	4. Zontanos, Voula	3 Rosewood Lane	Essex Junction	VT	05452

Has any director or stockholder been convicted or pleaded guilty to any criminal or motor vehicle offense in any court of law (including traffic tickets by mail) during the last year? Yes ✓ No

If yes, please attach the following information: Individual's name, court/traffic bureau, offense and date

In the past year has any director or stockholder of the corporation held any elective or appointive state, county, city, village or town office in Vermont (See VSA, T.7, Ch.9, Sec. 223)? Yes ✓ No

If yes, please attach the following information: Individual's name, office and jurisdiction

Vt. Dept. of Health Food License No.: 2308

Vt. Dept. of Health Lodging No.:

Vt. Tax Dept. Meals & Rooms Cert./Acct. No.: 67512

Disclosure of Non-profit Organization?: Yes XX No

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FIRST CLASS RESTAURANT/BAR LICENSE TO SELL MALT AND VINOUS BEVERAGES

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I/We hereby certify that the information in this application is true and complete.

Dated this 15th day of February, 2016

Signature of authorized agent
of corporation, company, club or association

Signature of individual or partners

[Signature]
[Signature]
[Signature]
(Title)

Are you making this application for the benefit of any other party? Yes No

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Approved by Board of Control Commissioners of the City or Town of _____.

Total Membership _____, _____ members present

Attest, _____, Town Clerk

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DEPARTMENT OF LIQUOR CONTROL
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MONTPELIER, VT 05602

If application is disapproved, local control commissioners shall notify the applicant by letter.

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State of Vermont
 Department of Liquor Control
 13 Green Mountain Drive
 Montpelier, VT 05602
 liquorcontrol.vermont.gov

Michael J. Hogan, Commissioner

[phone] 802-828-2339
 [fax] 802-828-1031

Please double check the following information on your renewal when received, for accuracy.

- 2/4/15 Seminar Date
- NO Corporation/ LLC/ Partnership Changes (corp. name change, director changes, etc.)
- NO Trade Name Info /Changes
- NO Lease Info / Changes
- NO Other Info / Changes (Federal ID Number, Outside Consumption Area, Payment of Fee, etc.)

SEMINARS:

Please check the seminar date on your renewal. If it has been 2 years since your last seminar, an owner, director or manager needs to attend a seminar.

CORPORATION / LLC / PARTNERSHIPS:

If you have had any changes to your Corporation, Partnership or LLC, please note on the renewal application and include documentation of the change (i.e. copies of changes filed with Secretary of State's office showing new information.) If you have added or removed a director, partner or member, please include minutes of the meeting where the change took place. We also will need info on any new directors (legal name, address, date of birth and place of birth)

TRADE NAME:

If you have changed your Trade name (d/b/a), we need a copy of the approved trade name from the Secretary of State's office, if you include a copy with your renewal application, this will speed up the renewal process.

LEASE:

If you have any changes in your lease, (either a new landlord or you purchased the property) we will need a copy of the new lease or title.

OTHER INFO:

Also just make sure to double check the renewal application for things like your Federal ID number, health number, outside consumption area, etc. and make any changes necessary, Also make sure your company check is attached for payment of your renewal fee.

If you double check the renewal applications and attach copies or documentation for any changes, this can help to expedite the renewal process.

Thank you.



Liquor Control Board:

Stephanie O'Brien, Chair; John P. Cassarino, Melissa Mazza-Paquette, Thomas Gallagher, Julian Sbardella, Members