

DEPARTMENT

LICENSE REQUEST

STATE STREET SEASONAL OUTDOOR EXPANSION <u>ALCOHOL SERVICE</u>

License Expires: Oct 31, 2022

PETITION TO THE TOWN COUNCIL

To the Honorable Town Council of the Town of Bristol: The undersigned hereby respectfully requests of your Honorable Body to be granted a

STATE STREET SEASONAL OUTDOOR EXPANSION -ALCOHOL SERVICE LICENSE

APPLICANT NAME:		FIGURE FIGURE									
*HOURS OF OPERATION: TUSORY — SUNDAY Am — 10 M *Hours of outdoor service of food and drink shall cease at 11:00 p.m. nightly. (Sec 25-16) Seasonal Outdoor Expansion Permit Certificate of Liability Insurance Sketch of area planned for use Please attend the Council Meeting on June 22, 2022. Petition must be returned by June 10, 2022. Petition must be returned by June 10, 2022. DATE OF BIRTH: BUSINESS TELEPHONE #: 40 33 3556 HOME TELEPHONE #: 40 57 30 4	NAME OF ESTABLISHMENT: \$15 16	of Gizzn									
*HOURS OF OPERATION: TURDAY — SUNDAY Am - 10 fm; *hours of outdoor service of food and drink shall cease at 11:00 p.m. nightly. (Sec 25-16) Seasonal Outdoor Expansion Permit 1: 20 p.m. nightly. (Sec 25-16) PR 2: 20 p.m. nightly. (Sec 25-16)	ADDRESS: SS State ST	Buskel At Oden									
*hours of Operation:	APPLICANT NAME: 58407	GAIGS E									
Certificate of Liability Insurance Sketch of area planned for use Please attend the Council Meeting on June 22, 2022. NAME: SIGNATURE: SIGNATURE: NAME: SIGNATURE: NAME: SIGNATURE: SIGNATURE: NAME: SIGNATURE: SIG	*hours of outdoor service of food and drink shall cease at 11:00 p.m. nightly. (Sec 25-16)										
Please attend the Council Meeting on June 22, 2022. Petition must be returned by June 10, 2022. Date Received: SIGNATURE: NAME: Graph Arts		_ =====================================									
Please attend the Council Meeting on June 22, 2022. NAME: Sequence of AICS ADDRESS: 55 State 5+ Petition must be returned by June 10, 2022. DATE OF BIRTH: BUSINESS TELEPHONE #: YOL-578-2024 EMAIL: 6(20017 Gard) bmax Com											
Petition must be returned by June 10, 2022. DATE OF BIRTH: BUSINESS TELEPHONE #: 40(353-3556 HOME TELEPHONE #: 40(-578-3034 EMAIL: 6(290)7 64704 6 6704	□ Sketch of area planned for use	,									
Date Received: TOWN: 131.56 TOWN: 131.56 DATE OF BIRTH: BUSINESS TELEPHONE #: 401-578-3636 HOME TELEPHONE #: 401-578-3034 EMAIL: 6(eq.017 6476) 6mA-1 (cm		To Vice									
DATE OF BIRTH: BUSINESS TELEPHONE #: 401-578-2536 HOME TELEPHONE #: 401-578-2024 EMAIL: 6(29017 6470) 6mA-1 (0m	Dottion wouth by and the	ADDRESS: 55 State St									
BUSINESS TELEPHONE #: 401 753-2556 HOME TELEPHONE #: 401-578-2024 Date Received: EMAIL: 6(29017 64704) 6mA-1 (Com		TOWN: 131,5/0/									
Date Received: HOME TELEPHONE #:		DATE OF BIRTH:									
Date Received: EMAIL: 6(equit 64rd) 6mail (Om		BUSINESS TELEPHONE #: 401753-2536									
- Cyologian Compiler		HOME TELEPHONE #: 401-578-2024									
TAYSTAMP	Date Received:	EMAIL: 6(Das 17 GATOS) 6mail, Com									
TAX STAINE	TAX STAMP										
*BY SIGNING THIS PETITION, I CONSENT TO EXAMINATION AND	*BY SIGN	ING THIS PETITION, I CONSENT TO EXAMINATION AND									
RELEASE OF RECORDS AND INFORMATION REGARDING MY	RELEAS	SE OF RECORDS AND INFORMATION REGARDING MY									
BACKGROUND, INCLUDING POLICE RECORDS, EDUCATIONAL	TO BE USED BY FINANCE INFORMAT	FION, RESIDENCE RECORDS, AND ANY COURT REGISTRY COUNCIL									
	TO BE USED BY FINANCE	TION, RESIDENCE RECORDS, AND ANY COURT REGORDS COUNCIL									

JUN 2 2 2022

MEETING

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 05/04/2022

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s)

this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).												
PRODUCER				CONTACT Pamela Pelletier, CRIS,CISR								
100000	n Andrade Insurance Agency, Inc.				DUGUE							
559 Hope Street					PHONE (401) 253-6542 FAX (A/C, No): (401) 253-5070 F-MAIL ADDRESS: ppelletier@johnandradeinsurance.com							
Bristol				INSURER(S) AFFORDING COVERAGE					NAIC #			
				RI 02809	INSURER A: Main Street America Assurance					29939		
BRISTOL HOUSE OF PIZZA INC					INSURER B: Progressive Casualty Ins Co					24260		
	55 STATE ST	C			INSURER C: Beacon Mutual					24017		
	35 511/112 51				INSURER D:							
	BRISTOL			RI 02809-1840	INSURER E:							
CO	/ERAGES CER	TIFIC	ATF	NUMBER: CL225428913	INSURER F:							
TI	IIS IS TO CERTIFY THAT THE POLICIES OF	NSUF	ANCE	LISTED BELOW HAVE BEEN	ICCLIED	TO THE INSU	DED NAMED A	REVISION NUMBER:				
	ERTIFICATE MAY BE ISSUED OR MAY PERTA CLUSIONS AND CONDITIONS OF SUCH PO							UBJECT TO ALL THE TERMS				
NSR LTR	TYPE OF INSURANCE	ADDL	SUBR		KEDOC	POLICY EFF	POLICY EXP (MM/DD/YYYY)					
	COMMERCIAL GENERAL LIABILITY	11430	WVD	POLICI NUMBER		(MM/DD/YYYY)	(MM/DD/YYYY)	LIMIT	1 000 000			
	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED	500,000	<u> </u>		
				· ·				PREMISES (Ea occurrence)	10,000			
Α				BPS66783		02/10/2022	02/10/2023	MED EXP (Any one person)	1 000 000	0		
	GEN'L AGGREGATE LIMIT APPLIES PER							PERSONAL & ADV INJURY	2 000 000			
	POLICY PRO- JECT LOC							GENERAL AGGREGATE	3 000 000			
	OTHER.							PRODUCTS - COMPIOP AGG GDAT	s 12,500			
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT	s			
_	ANY AUTO							(Ea accident) BODILY INJURY (Per person)	s			
В	OWNED SCHEDULED AUTOS			CRI00071687600		11/26/2021	11/26/2022	BODILY INJURY (Per accident)	s			
	HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$			
	<u> </u>							Non-owned	s 150,000			
	UMBRELLA LIAB OCCUR EXCESS LIAB							EACH OCCURRENCE	s			
	CLAIMS-MADE	1						AGGREGATE	s			
	DED RETENTION S WORKERS COMPENSATION		-						\$			
	AND EMPLOYERS' LIABILITY							➤ PER STATUTE OTH-				
С	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A		0000022412		01/05/2022	01/05/2023	E.L. EACH ACCIDENT	s 100,000			
	If yes, describe under							E.L DISEASE - EA EMPLOYEE	s 100,000			
	DESCRIPTION OF OPERATIONS below	-	-					E.L. DISEASE - POLICY LIMIT	s 500,000			
Α	Liquor Liability			BPS66783		02/10/2022	03/40/3033	0				
						02/10/2022	02/10/2023	General Aggregate	\$2,000,00			
DES	DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)											
Here is the many of the dute, may be attached it more space is required)												
				·								
CERTIFICATE HOLDER CANCELLATION												
				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.								
Town of Bristol												
10 Court St				The state of the s								
A					AUTHOR	AUTHORIZED REPRESENTATIVE						
Bristol RI 02809			Paul Moateleur									
								/ par seem.				
						6	1 4000 204E	0000 00000				



TOWN CLERK'S OFFICE

Melissa Cordeiro, Town Clerk

10 Court Street Bristol, RI 02809 Tel. 401-253-7000 Fax. 401-253-2647 Email:Mcordeiro@bristolr.gov

MEMORANDUM

TO:

Steven Contente

TOWN ADMINISTRATOR

FROM:

Melissa Cordeiro

COUNCIL CLERK

DATE:

June 10, 2022

RE

Gregory Gatos, Bristol House of Pizza, 55 State Street - Request for State Street Seasonal Outdoor

Expansion - Alcohol Service License

May we please have your recommendation or the recommendation of the department head you deem appropriate in order for the Council to review the request at the regular Town Council Meeting to be held on <u>June 22, 2022</u>.

Please note that all council items are due at 12PM noon one week prior to the meeting. All and any items received after the deadline will be held until the next council agenda.

Thank you for your cooperation and prompt reply.

Attachment