

**ADDITIONAL HOURS LICENSE RENEWALS  
2022-2023**

EXPIRES: DECEMBER 1, 2023

FEE: \$50.00

**CUMBERLAND FARMS, INC.**

390 Metacom Avenue

Bristol, RI 02809

**ADDITIONAL OPERATIONAL HOURS:**

Between five o'clock (5:00) A.M. and six o'clock (6:00) A.M.

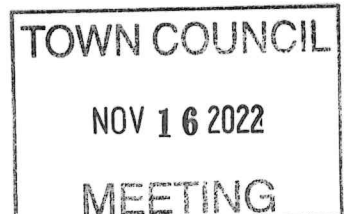
**DUNKIN DONUTS**

381 Metacom Avenue

Bristol, RI 02809

**ADDITIONAL OPERATIONAL HOURS:**

Between four o'clock (4:00) A.M. and six o'clock (6:00) A.M.





**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  
TOWN CLERK

DATE: October 28, 2022

RE: Additional Hours License Renewals 2022-2023

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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 November 16, 2022.

**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



LICENSE REQUEST: VICTUALLING LICENSE WITH ADDITIONAL  
OPERATIONAL HOURS RENEWAL - Expires: December 1, 2023

# 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

NAME OF ESTABLISHMENT: Dunkin' Donuts

ADDRESS: 381 Metacom Avenue

APPLICANT NAME: Clifton Prazeres

HOURS OF OPERATION: Sun - Sat 4am - 9pm

TOWN CLERK'S OFFICE  
BRISTOL, RHODE ISLAND  
2022 OCT 31 PM 12:11

- ☒ Victualling Petition & \$75 License Fee
- ☒ Fee for Additional Hours of Operation \$50 per year \$125 - pd
- ☒ Second Quarter Taxes must be paid (call 253-7000 for amount due)
- ☒ Fire Department Clearance (401-253-6912)
- ☒ Water Pollution Control Clearance (grease removal unit) 401-253-8877
- ☒ RI Department of Health Clearance (401-222-2749)

Please attend the Council  
meeting on November 16, 2022

Petition must be returned by  
November 4, 2022

Petition mailed September 23,  
2022

Date Returned: \_\_\_\_\_

\*SIGNATURE: [Signature]

NAME: Clifton Prazeres

ADDRESS: 46 Ryans Way (PLEASE PRINT NAME OF APPLICANT)

TOWN: Swansea, MA (ADDRESS OF APPLICANT)

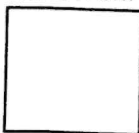
DATE OF BIRTH: \_\_\_\_\_

BUSINESS TELEPHONE #: (401) 396-5427

HOME TELEPHONE #: (401) 286-9837

EMAIL: Cprazer01@gmail.com

TAX STAMP



TO BE USED BY FINANCE  
DEPARTMENT

\*BY SIGNING THIS PETITION, I CONSENT TO EXAMINATION AND  
RELEASE OF RECORDS AND INFORMATION REGARDING MY  
BACKGROUND, INCLUDING POLICE RECORDS, EDUCATIONAL  
INFORMATION, RESIDENCE RECORDS, AND ANY COURT  
RECORDS.