



FOR DEPOSIT ONLY
TOWN OF BRISTOL, RI

LICENSE REQUEST: **VICTUALLING LICENSE RENEWAL**

Expires: **December 1,** Rpt#: 125977

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

VICTUALLING LICENSE RENEWAL

NAME OF ESTABLISHMENT: Subway

ADDRESS: 397 Metacom Ave

APPLICANT NAME: John Hafner

HOURS OF OPERATION: 7-9pm M-F 10-7 Sat, Sun

- ☐ Victualling Petition & \$75 License Fee
- ☐ Second Quarter Taxes must be paid (call 253-7000 for amount due)
- ☐ Fire Department Clearance
- ☐ Water Pollution Control Clearance (grease removal unit)
- ☐ RI Department of Health Clearance

TOWN CLERK'S OFFICE
BRISTOL, RHODE ISLAND
2025 OCT 30 PM 2:06

Please attend the Council
Meeting on November 12, 2025

Petition must be returned by
October 29, 2025

Petition mailed on
September 16, 2025

SIGNATURE: John Hafner

NAME: John Hafner

ADDRESS: 195 Bourne Ave

TOWN: Rumford RI 02916

DATE: 10/30/25

Date Received: _____

TAX STAMP



TO BE USED BY FINANCE
DEPARTMENT

*BY: _____
RI
BACKGROUND, INC.
INFORMATION, RESIDENCE RECORDS, AND

LICENSE REQUEST: **VICTUALLING LICENSE**

Expires: December 1st 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**VICTUALLING LICENSE**NAME OF ESTABLISHMENT: *Sip N-Dip Donuts*ADDRESS: *775 Hope St. Bristol, RI 02809*APPLICANT NAME: *Luis M. Pacheco*HOURS OF OPERATION: *5am - 8pm Daily*

- ☒ **Victualling Petition & \$75 License Fee** (payable after Council approves license)
- ☒ **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 401-222-6109**

Please attend the Council
meeting on November 1, 2023SIGNATURE: *Luis M. Pacheco*NAME: *Luis M. Pacheco*Petition must be returned by
October 18, 2023

Date Received: _____

TAX STAMP

*BY SIGN
RELEASE
BACKG

INFORMATION, RESIDENCE RECORDS, AND ANY COURT RECORDS.

TO BE USED BY FINANCE
DEPARTMENTTOWN CLERK'S OFFICE
BRISTOL, RHODE ISLAND
2023 OCT 31 AM 9:49



LICENSE REQUEST: **VICTUALLING LICENSE RENEWAL**

Expires: December 1, RPT#: 125637

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

VICTUALLING LICENSE RENEWAL

NAME OF ESTABLISHMENT: Hope Diner

ADDRESS: 742 Hope St.

APPLICANT NAME: Lorene Silva

HOURS OF OPERATION: Tues-Fri 6:30-2pm Sat-Sun 6:30-1pm

- ☒ Victualling Petition & \$75 License Fee
- ☐ Second Quarter Taxes must be paid (call 253-7000 for amount due)
- ☐ Fire Department Clearance
- ☐ Water Pollution Control Clearance (grease removal unit)
- ☐ RI Department of Health Clearance

Please attend the Council
Meeting on November 12, 2025

Petition must be returned by
October 29, 2025

Petition mailed on
September 16, 2025

SIGNATURE: Lorene Silva

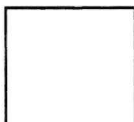
NAME: 742 Hope St

ADDRESS: Bristol RI

2025 OCT -6 AM 10:19
TOWN CLERK'S OFFICE
BRISTOL, RHODE ISLAND

Date Received: _____

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.



LICENSE REQUEST: VICTUALLING LICENSE RENEWAL

Expires: December 1,

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

VICTUALLING LICENSE RENEWAL

NAME OF ESTABLISHMENT: Classic Pizza & Grill

ADDRESS: 349 Metacom Ave

APPLICANT NAME: Vatche Avedissian

HOURS OF OPERATION: 11-12

- ☐ Victualling Petition & \$75 License Fee
- ☐ Second Quarter Taxes must be paid (call 253-7000 for amount due)
- ☐ Fire Department Clearance
- ☐ Water Pollution Control Clearance (grease removal unit)
- ☐ RI Department of Health Clearance

Please attend the Council
Meeting on

SIGNATURE: [Signature]
NAME: Vatche Avedissian

2025 OCT 31 PM 3:32

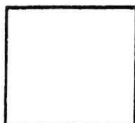
TOWN CLERK'S OFFICE
BRISTOL, RHODE ISLAND

Petition must be returned by

Petition mailed on

Date Received: _____

TAX STAMP



*BY S
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BAC

INFORMED BY RESIDENCE RECORDS, AND ANY COURT RECORDS.

TO BE USED BY FINANCE
DEPARTMENT