

## Select Board Meeting

Wednesday, September 13, 2023

8:30 AM

2<sup>nd</sup> Floor Conference Room, Town Offices

36 Bartlet Street, Andover, MA 01810

ANDOVER TOWN CLERK  
ROUD 2023 SEP 8 PM 12:06

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I. Call to Order – 8:30 A.M.

II. Opening Ceremonies

A. Moment of Silence/Pledge of Allegiance

III. Regular Business

A. Alcoholic Beverages License – Temporary Alteration of Premises

Board to review and consider voting to approve the application of Oak & Iron Brewing Co., at 18 Red Spring Road, Andover, for a Temporary Alteration of Premises on its Farmer Series Pouring, Malt, Alcoholic Beverage License.

IV. Adjourn

*If any member of the public wishing to attend this meeting seeks special accommodations in accordance with the Americans with Disabilities Act, please contact Amy Heidebrecht in the Town Manager's Office at 978-623-8213 or by email at [amy.heidebrecht@andoverma.us](mailto:amy.heidebrecht@andoverma.us)*

MEETINGS ARE TELEVISED ON  
COMCAST CHANNEL 22 AND VERIZON CHANNEL 45



**TOWN OF ANDOVER  
TOWN CLERK'S OFFICE**

36 Bartlet Street  
Andover, MA 01810  
978-623-8230  
www.andoverma.gov

**ALCOHOLIC BEVERAGES LICENSE APPLICATION**

<b>BUSINESS/ENTITY NAME:</b>	OAK & IRON Brewing Co.
<b>DBA:</b>	
<b>PREMISE ADDRESS:</b>	18 Red Spring Rd Andover MA 01810
<b>MANAGER/CONTACT NAME:</b>	James Cass
<b>EMAIL:</b>	[REDACTED]
<b>PHONE:</b>	[REDACTED]
<b>BUSINESS MAILING ADDRESS: (if different from premise)</b>	
<b>FID/SS#:</b>	[REDACTED]

Please select the license transaction for which you are applying below.

Each transaction has an application fee of \$125.00 made payable to TOWN OF ANDOVER.

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> New License                                | <input type="checkbox"/> Change Corporate Name                               | <input type="checkbox"/> Change of Corporate Structure  |
| <input type="checkbox"/> Transfer of License                        | <input type="checkbox"/> Change of Ownership Interest                        | <input type="checkbox"/> Pledge of Collateral           |
| <input type="checkbox"/> Change of Manager                          | <input type="checkbox"/> Change of Class<br>(i.e. Annual/Seasonal)           | <input type="checkbox"/> Management/Operating Agreement |
| <input type="checkbox"/> Change of Officer/Directors/LLC Managers   | <input type="checkbox"/> Change of License Type<br>(i.e. club/restaurant)    | <input type="checkbox"/> Change of Hours                |
| <input type="checkbox"/> Change of Location                         | <input type="checkbox"/> Change of Category<br>(i.e. All Alcohol/Wine, Malt) | <input type="checkbox"/> Change of DBA                  |
| <input checked="" type="checkbox"/> Alteration of Licensed Premises | <input type="checkbox"/> Issuance/Transfer of Stock/New Stockholder          | <input type="checkbox"/> Other _____                    |

I certify under the penalties of perjury, that the above information is true, and that named applicant has complied with all laws of the Commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting child support.

Signature: James R. Cass Date: 8.25.23

This license application requires Select Board approval upon prior approval from the Police Department, Fire Department, Health Department, Building Department and Town Treasurer.

(Office Use Only) SELECT BOARD HEARING DATE: \_\_\_\_\_



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**SALE OF ALCOHOL ON PATIO & OUTDOOR AREAS  
ADDENDUM**

If you are applying to include a patio and/or outdoor area in your licensed premises, you must provide the following additional information. This application will also be forwarded to the Building Division and Planning Division to determine if any additional permits are necessary.

**SECTION 1: RESTRICTIONS/CONDITIONS**

1. Are the premises (existing and/or proposed) subject to any easements, covenants, or deed restrictions regarding use of the property and/or service of alcohol?

YES

NO

If yes, please provide copies of the easements, covenants, or deed restrictions.

2. Are the premises (existing and/or proposed) subject to any Zoning Board of Appeals, Site Plan, or Subdivision conditions or restrictions?

YES

NO

If yes, please provide copies of the conditions and/or restrictions.

**SECTION 2: WRITTEN DESCRIPTION OF PROPOSED PREMISES**

3. Describe the proposed outdoor area including the dimensions, number of tables and chairs, proposed occupancy figures, whether there are any proposed outdoor bars and how the area will be enclosed.

SEE ATTACHED

4. Describe in detail the proposed type of fence, rope or other means of proposed enclosure.

SEE ATTACHED

## **Section 2: Written Description of Proposed Premises**

3. Describe the proposed outdoor area including the dimensions, number of tables and chairs, proposed occupancy figures, whether there are any proposed outdoor bars and how the area will be enclosed.

**We will expand our licensed outdoor area into a portion of the parking lot and a portion of the grassed area beyond our fencing (see attached mapping).**

In the parking lot will be:

- One 20'\*30' tent with 12 8' banquet tables seating ~ 84 people.
- A catering area where Oktoberfest type foods will be served by a licensed caterer.
- A "fun" area for a Stein holding contest (M/F), kids pumpkin passing,
- Merchandise tent for the sale of t-shirts, hoodies, hats etc.

On the grassed area will be:

- 10 high-top tables
- Tent for kids pumpkin painting

### **Occupancy Figures**

Based on estimated 2022 figures and assuming favorable weather, we anticipate a maximum attendance of 650 people over the day (12:00 PM – 9:00 PM). The most densely populated times are between 3:00 PM – 7:00 PM.

### **Outdoor Bar**

There will be one outdoor kegerator located adjacent to the outdoor tent.

### **Proposed Area Enclosure**

- The building encloses the western side.
- The Shawsheen River encloses the south and east.
- A combination of construction cones with yellow tape, 4' security fencing and cars aligned end to end will enclose the north.

4. Explain in detail the proposed type of fence, rope or other means of proposed enclosure.
  - The building encloses / blocks-off the eastern border.
  - To the south and east the Shawsheen River is a natural border and enclosure.
  - The northern border is enclosed by a variety of measure: a line of end-to-end cars blocking entrance and exit. 4' security fencing on the grass area between the parking lot and the Shawsheen River
5. Describe the proposed use of the outdoor area. (E.g., tented area for special events, area for outdoor food service etc)
  - In the macro, the outdoor area handles the following functions:
    - a. Check-in, ticket buying, transactions and exit
    - b. Food service
    - c. Tent for eating, drinking, socialization
    - d. Kegerator station
    - e. 10\*10 tent for merchandise
    - f. "Fun Area" for stein holding contests, corn hole, pumpkin passing, pumpkin painting.
    - g. High top area (10 units) on the grassed area for eating, drinking, socialization

5. Describe the proposed use of the outdoor area. (E.g., tented area for special events, area for outdoor food service, etc.)

SEE ATTACHED

6. Are outdoor food preparation areas proposed?

YES

NO

If yes, please consult the Board of Health. *Completed, License issued.*

**SECTION 3: REQUIRED PLAN**

Submit a detailed, scaled plan of the patio and /or outdoor area showing the proposed:

The existing:

- a) Egress/ingress between the inside premises and the proposed outdoor area
- b) Width of the path of egress/ingress from the inside premises through the outdoor area
- c) Location of proposed tables, chairs, bars, outdoor prep areas, etc.
- d) Location of required signage

SEE ATTACHED

All of the above should be clearly labeled.

**SECTION 4: ENFORCEMENT**

7. Detail how the applicant will ensure alcohol purchased off-premise will not be brought onto or consumed on the outdoor premises.

1. SIGNAGE "OUTSIDE ALCOHOL NOT PERMITTED"

2. NARROW ENTRANCE AREA WHERE OBSERVATIONS TAKE PLACE

3. IN MEDIA COMMUNICATION

4. MANAGERS OBSERVING THROUGHOUT THE EVENT

8. Detail how the applicant will ensure patrons do not leave the outdoor premises with alcohol in their possession.

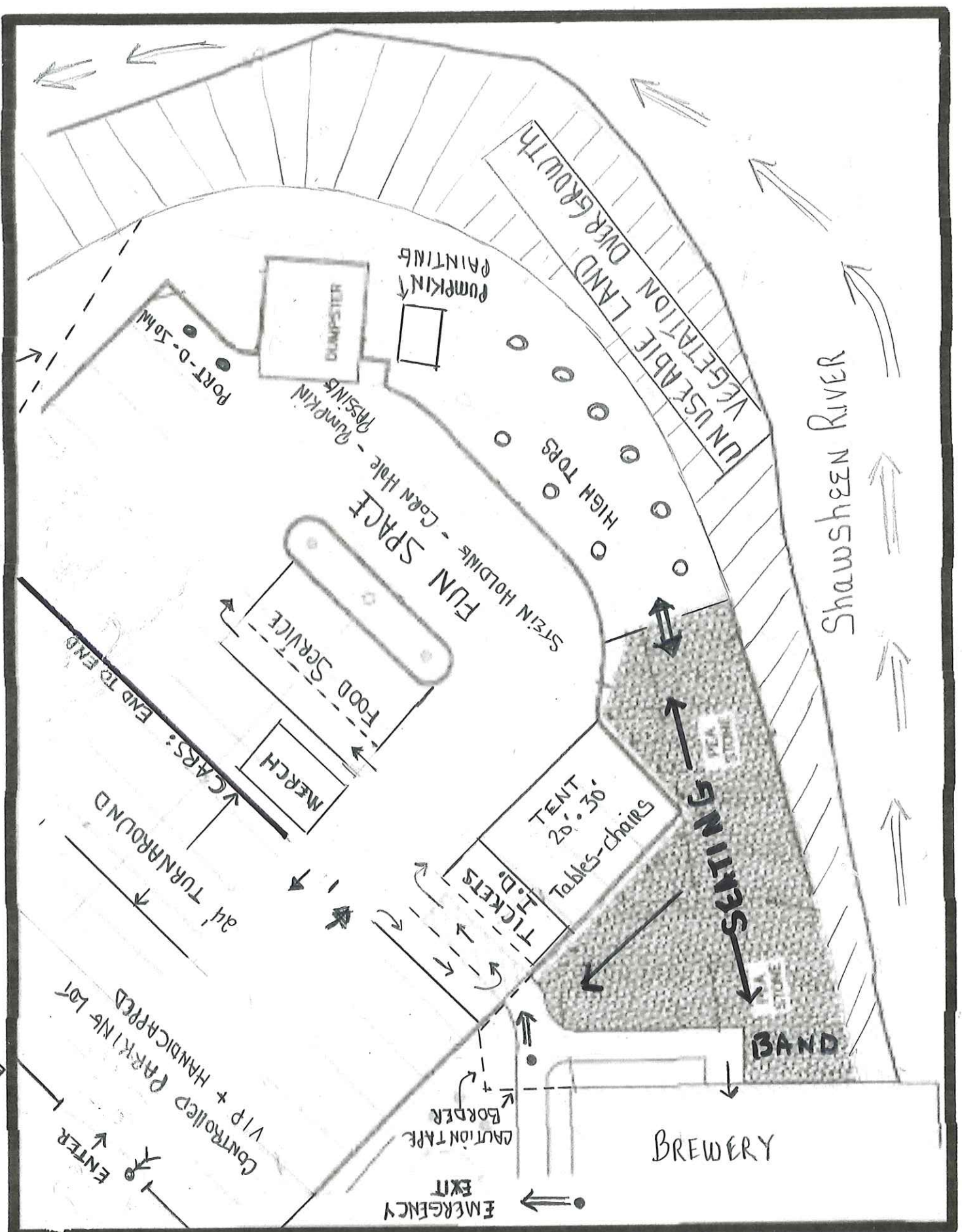
1. SIGNAGE, NO ALCOHOL PERMITTED OUTSIDE BORDER AREA

2. STAFF OBSERVING @ ALL TIMES

**PLEASE NOTE:**

The patio and / or outdoor area are an extension of new or already approved premises. It is a part of the same license and will have the exact same type of license as the entire premises. That means that the type of alcohol sold and the hours of sale will be the same for the entire premises

SECURITY FENCE TO THE RIVER



PORT-O-John

DUMPSTER

PUMPKIN PAINTING

PUMPKIN STAIN HOLDING - Corn Hale - Pumpkin

FUN SPACE

HIGH TOPS

VEGETATION OVERGROWTH

Shawsheen RIVER

SEMINARS

BAND

BREWERY

TENT 26' x 30' Tables-Chairs

TICKETS I.D.

MERCH

FOOD SERVICE

CONTROLLED PARKING LOT VIP + HANDICAPPED

EMERGENCY EXIT

CAUTION TAPE BORDER

ENTER

EXIT

ad TURNAROUND

CARS: END TO END



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**TAX FORM**

APPLICANT NAME: OAK & IRON BREWING Co. / James Cass

I certify under penalties of perjury that the above named applicant has complied with all laws of the Commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting child support.

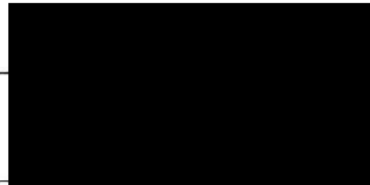
**Signature of Individual or Corporate Name:**  
(Required for all applicants)

James R. Cass

**Name of Corporate Officer:**  
(Required if applicant is a corporation)

James R. Cass

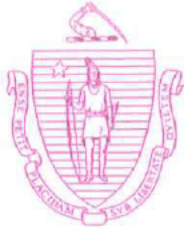
**Social Security #:**  
(Required if applicant is an individual)



**Federal Identification Number (FID #):**  
(Required if applicant is a corporation or non-profit)

*This license will not be issued unless the certification clause is signed by the applicant.*

*Your social security or FID number will be furnished to the Massachusetts Department of Revenue to determine if you have met tax filing or tax payment obligations. Licensees who fail to correct their non-filing delinquency will be subject to license suspension or revocation. This request is made under the authority of Mass General Laws c. 62, s. 49A.*



The Commonwealth of Massachusetts  
 Department of Industrial Accidents  
 1 Congress Street, Suite 100  
 Boston, MA 02114-2017  
 www.mass.gov/dia

Workers' Compensation Insurance Affidavit: General Businesses.  
 TO BE FILED WITH THE PERMITTING AUTHORITY.

**Applicant Information**

Please Print Legibly

Business/Organization Name: OAK & IRON BREWING Co.  
 Address: 18 Red Spring Rd  
 City/State/Zip: ANDOVER Ma 01810 Phone #: [REDACTED]

Are you an employer? Check the appropriate box:

- 1.  I am an employer with 15 employees (full and/ or part-time).\*
- 2.  I am a sole proprietor or partnership and have no employees working for me in any capacity. [No workers' comp. insurance required]
- 3.  We are a corporation and its officers have exercised their right of exemption per c. 152, §1(4), and we have no employees. [No workers' comp. insurance required]\*\*
- 4.  We are a non-profit organization, staffed by volunteers, with no employees. [No workers' comp. insurance req.]

Business Type (required):

- 5.  Retail
- 6.  Restaurant/Bar/Eating Establishment
- 7.  Office and/or Sales (incl. real estate, auto, etc.)
- 8.  Non-profit
- 9.  Entertainment
- 10.  Manufacturing
- 11.  Health Care
- 12.  Other \_\_\_\_\_

\*Any applicant that checks box #1 must also fill out the section below showing their workers' compensation policy information.

\*\*If the corporate officers have exempted themselves, but the corporation has other employees, a workers' compensation policy is required and such an organization should check box #1.

I am an employer that is providing workers' compensation insurance for my employees. Below is the policy information.

Insurance Company Name: MA RETAIL MERCHANTS WC GROUP INC  
 Insurer's Address: 35 Braintree Hill Office Park, Suite 206  
 City/State/Zip: Braintree MA 02184

Policy # or Self-ins. Lic. # [REDACTED] Expiration Date: 01/01/24

Attach a copy of the workers' compensation policy declaration page (showing the policy number and expiration date).

Failure to secure coverage as required under Section 25A of MGL c. 152 can lead to the imposition of criminal penalties of a fine up to \$1,500.00 and/or one-year imprisonment, as well as civil penalties in the form of a STOP WORK ORDER and a fine of up to \$250.00 a day against the violator. Be advised that a copy of this statement may be forwarded to the Office of Investigations of the DIA for insurance coverage verification.

I do hereby certify, under the pains and penalties of perjury that the information provided above is true and correct.

Signature: James R. Case Date: 8.25.23

Phone #: [REDACTED]

Official use only. Do not write in this area, to be completed by city or town official.

City or Town: Andover Permit/License # \_\_\_\_\_

Issuing Authority (circle one):

- 1. Board of Health 2. Building Department 3. City/Town Clerk 4. Licensing Board 5. Selectmen's Office
- 6. Other \_\_\_\_\_

Contact Person: Austin Simko, Town Clerk Phone #: 978-623-8230

