



Select Board Meeting

Monday, January 22, 2024

7:00 PM

School Committee Room, School Administration Building
30 Whittier Court, Andover, MA 01810

RECEIVED
TOWN CLERK'S OFFICE

2024 JAN 18 PM 5:02

~~TOWN OF ANDOVER, MASS~~

I. Call to Order – 7:00 P.M.

II. Opening Ceremonies

A. Moment of Silence/Pledge of Allegiance

III. Communications/Announcements/Liaison Reports

IV. Citizens Petitions and Presentations

V. Regular Business

A. Alcoholic Beverages License - Alteration of Premises

Board to review and consider voting to approve the application of RAVE Hospitality, Inc., doing business as Elm Square Oyster Co., at 2 Elm Square, Andover, for and Alteration of Premises on its All Alcoholic Restaurant Alcoholic Beverage License.

B. Alcoholic Beverages License - Change of Category, Change of Manager, Transfer of Stock

Board to consider voting to approve the applications of Lavdisha, Inc., dba Richdale Convenience, located at 10 Railroad St., Andover, to amend its Wine and Malt Alcoholic Retail Package Store License to an All Alcoholic Retail Package Store License, and to consider voting to approve a change of manager, change of officer, and transfer of stock.

C. Town Tree Policy

Board to consider amending policy to include a member of the Conservation Commission.

D. MBTA Communities

Board to receive an update regarding MBTA Communities Multi-Family Zoning.

E. Petition to Place Question on Annual Town Election Ballot

Board to review and consider voting to take action on the petition of Kristin Wise asking that the Select Board place a question on the March 26, 2024 Annual Town Election ballot.

VI. Consent Agenda

A. Appointments by the Town Manager

Board to vote that the following appointments by the Town Manager be approved.

Department	Name	Position	Rate/Term	Date of Hire
Department of Public Works	Eric Pape <i>Robert Charette</i>	Equipment Operator	\$27.96/hr	02/01/2024
Department of Public Works	Patrick Scholl <i>Vincent Mitrano</i>	Equipment Operator	\$27.12/hr	01/23/2024
Permanent Town Building Advisory Committee	Susan McCready	School Committee Representative	Term Expires 06/30/2026	01/23/2024
Elderly and Disabled Tax Fund Committee	Jane Burns	Member	Term Expires 06/30/2026	01/23/2024

VII. Approval of Minutes

A. Board to approve minutes from the following meetings:

1. September 27, 2023 Quad Board
2. October 18, 2023 Quad Board
3. November 29, 2023 Select Board
4. December 11, 2023 Select Board

VIII. 2024 Select Board Meetings

A. Board to consider voting to accept the following Select Board Meeting Schedule:

March 18, 2024

April 8, 2024

April 22, 2024

IX. 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

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

BUSINESS/ENTITY NAME:	RAVE Hospitality Group LLC
DBA:	Elm Square Oyster Co.
PREMISE ADDRESS:	2 Elm Square Andover ma 01810
MANAGER/CONTACT NAME:	Roseann Hewitt
EMAIL:	[REDACTED]
PHONE:	[REDACTED]
BUSINESS MAILING ADDRESS: (if different from premise)	
FID/SS#:	[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
(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
(i.e. club/restaurant) | <input type="checkbox"/> Change of Hours |
| <input type="checkbox"/> Change of Location | <input type="checkbox"/> Change of Category
(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: _____

Date: 10/16/24

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: _____



TOWN OF ANDOVER

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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.

The area is 21 Feet long & 13ft wide. The proposed area would be adjoining our existing patio. There would be 8/9 tables 2ft x 2ft app 18/20 chairs. There will be an enclosed area with a fence added to our current patio.

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

The fence would be a Solid Iron fence to match our existing patio

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

Outdoor dining for our restaurant in the
spring/summer months

6. Are outdoor food preparation areas proposed?

YES

NO

If yes, please consult the Board of Health.

SECTION 3: REQUIRED PLAN

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

The existing:

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

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.

We do not allow any open containers in our establishment. All beverages including water have to be bought on site.

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

Our outdoor areas are on 24hour ^{video} Surveillance
we have staff dedicated to our patio areas to ensure that all food & beverages do not leave the area

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



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TAX FORM

APPLICANT NAME: RAVE Hospitality Group LLC DBA Elm Square Oyster Co.

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)

Suddes

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

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

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

[REDACTED]

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: RAVE Hospitality Group LLC DBA Elm Square Oyster Co.

Address: 2 Elm Square

City/State/Zip: Andover MA 01820

Phone #: [REDACTED]

<p>Are you an employer? Check the appropriate box:</p> <p>1. <input checked="" type="checkbox"/> I am an employer with <u>13</u> employees (full and/or part-time).*</p> <p>2. <input type="checkbox"/> I am a sole proprietor or partnership and have no employees working for me in any capacity. [No workers' comp. insurance required]</p> <p>3. <input type="checkbox"/> 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]**</p> <p>4. <input type="checkbox"/> We are a non-profit organization, staffed by volunteers, with no employees. [No workers' comp. insurance req.]</p>	<p>Business Type (required):</p> <p>5. <input type="checkbox"/> Retail</p> <p>6. <input checked="" type="checkbox"/> Restaurant/Bar/Eating Establishment</p> <p>7. <input type="checkbox"/> Office and/or Sales (incl. real estate, auto, etc.)</p> <p>8. <input type="checkbox"/> Non-profit</p> <p>9. <input type="checkbox"/> Entertainment</p> <p>10. <input type="checkbox"/> Manufacturing</p> <p>11. <input type="checkbox"/> Health Care</p> <p>12. <input type="checkbox"/> Other _____</p>
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*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: MCHLAUGHLIN INSURANCE & RISK MANAGEMENT

Insurer's Address: 828 Lynn Falls Parkway

City/State/Zip: Melrose MA 02176

Policy # or Self-ins. Lic. # 08 SBA AM 3G PK Expiration Date: 8/1/2024

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: [Signature]

Date: 10/16/2023

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



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

10/10/2023

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 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).

PRODUCER MCLAUGHLIN INSURANCE & RISK MNGMNT 08088035 828 LYNN FELS PARKWAY MELROSE MA 02176	CONTACT NAME:	
	PHONE (781) 665-2775 (A/C, No, Ext):	FAX (A/C, No):
	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	
INSURED RAVE HOSPITALITY LLC. DBA ELM STREET OYSTER CO. 85 GREEN ST MELROSE MA 02176-2315	INSURER A: Hartford Underwriters Insurance Company	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/Y YYYY)	LIMITS	
A	<input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> General Liability			08 SBA AM3GPK	08/01/2023	08/01/2024	EACH OCCURRENCE	\$1,000,000
			DAMAGE TO RENTED PREMISES (Ea occurrence)				\$1,000,000	
			MED EXP (Any one person)				\$5,000	
			PERSONAL & ADV INJURY				\$1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$2,000,000
	<input checked="" type="checkbox"/> POLICY	<input type="checkbox"/> PRO-JECT	<input type="checkbox"/> LOC				PRODUCTS - COMP/OP AGG	\$2,000,000
	OTHER:							
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			08 SBA AM3GPK	08/01/2023	08/01/2024	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
			BODILY INJURY (Per person)					
			BODILY INJURY (Per accident)					
			PROPERTY DAMAGE (Per accident)					
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE			08 SBA AM3GPK	08/01/2023	08/01/2024	EACH OCCURRENCE	\$4,000,000
			AGGREGATE				\$4,000,000	
			DED				RETENTION \$ 10,000	
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER	
							E.L. EACH ACCIDENT	
							E.L. DISEASE -EA EMPLOYEE	
							E.L. DISEASE - POLICY LIMIT	
A	Liquor Liability			08 SBA AM3GPK	08/01/2023	08/01/2024	Each Common Cause Aggregate Limit	\$1,000,000 \$2,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Those usual to the Insured's Operations.

CERTIFICATE HOLDER

For Informational Purposes
 85 GREEN ST
 MELROSE MA 02176-2315

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.

AUTHORIZED REPRESENTATIVE

Susan L. Castaneda

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Receipt from nCourt

To mempro@comcast.net

YOUR RECEIPT >>

Please include the payment receipt with your application. Thank you.

Paid To

Name: Massachusetts Alcoholic Beverages Control Commission - Retail
Address 1: 95 Fourth Street, Suite 3
City: Chelsea
State: Massachusetts
Zip: 02150

Payment On Behalf Of

First Name: Van Last Name: Caldwell
Address 1: [REDACTED] [REDACTED]
City: [REDACTED] [REDACTED]
Phone: [REDACTED] [REDACTED]

Description	ID	Service Fee	Amount
FILING FEES-RETAIL	03490-RS-0026	\$0.00	\$200.35

Description	ID	Service Fee	Amount
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Receipt Date: 10/11/2023 9:02:07 AM EDT
Invoice Number: 20ebb954-adac-4ea6-b203-951584
ed74db

Total Amount Paid: \$200.35

<p>Billing Information</p> <p>First Name Van</p> <p>Last Name Caldwell</p> <p>Address 1 [REDACTED]</p> <p>City [REDACTED]</p> <p>State/Territory [REDACTED]</p> <p>Zip [REDACTED]</p> <p>Email [REDACTED]</p>	<p>Credit / Debit Card Information</p> <p>Card Type [REDACTED]</p> <p>Card Number [REDACTED]</p>
---	--

IMPORTANT INFORMATION >>

Please include the payment receipt with your application. Thank you.
Please verify the information shown above. Your payment has been submitted to the location listed above.



The Commonwealth of Massachusetts
 Alcoholic Beverages Control Commission
 95 Fourth Street, Suite 3, Chelsea, MA 02150-2358
 www.mass.gov/abcc

RETAIL ALCOHOLIC BEVERAGES LICENSE APPLICATION
 MONETARY TRANSMITTAL FORM

AMENDMENT-Change or Alteration of Premises Information

APPLICATION SHOULD BE COMPLETED ON-LINE, PRINTED, SIGNED, AND SUBMITTED TO THE LOCAL LICENSING AUTHORITY.

ECRT CODE: RETA

Please make \$200.00 payment here: [ABCC PAYMENT WEBSITE](#)

PAYMENT MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP, OR INDIVIDUAL AND INCLUDE THE PAYMENT RECEIPT

ABCC LICENSE NUMBER (IF AN EXISTING LICENSEE, CAN BE OBTAINED FROM THE CITY)

ENTITY/ LICENSEE NAME

ADDRESS

CITY/TOWN

STATE

ZIP CODE

For the following transactions (Check all that apply):

- New License
- Change Corporate Name
- Change of Class (i.e. Annual / Seasonal)
- Change Corporate Structure (i.e. Corp / LLC)
- Transfer of License
- Change of DBA
- Change of License Type (i.e. club / restaurant)
- Change of Hours
- Change of Manager
- Alteration of Licensed Premises
- Change of Category (i.e. All Alcohol/Wine, Malt)
- Pledge of Collateral (i.e. License/Stock)
- Change of Officers/Directors
- Change of Location
- Issuance/Transfer of Stock/New Stockholder
- Management/Operating Agreement
- Change of Ownership Interest
- Other

THE LOCAL LICENSING AUTHORITY MUST SUBMIT THIS APPLICATION ONCE APPROVED VIA THE ePLACE PORTAL

Alcoholic Beverages Control Commission
 95 Fourth Street, Suite 3
 Chelsea, MA 02150-2358



The Commonwealth of Massachusetts
 Alcoholic Beverages Control Commission
 95 Fourth Street, Suite 3, Chelsea, MA 02150-2358
 www.mass.gov/abcc

AMENDMENT-Change or Alteration of Premises Information

Change of Location

- Payment Receipt
- Monetary Transmittal Form
- Chg of Location/Alteration of Premises Application
- Financial Statement
- Vote of the Entity
- Supporting financial records
- Legal Right to Occupy
- Floor Plan
- Abutter's Notification
- Advertisement

Alteration of Premises

- Payment Receipt
- Monetary Transmittal Form
- Chg of Location/Alteration of Premises Application
- Financial Statement
- Vote of the Entity
- Supporting financial records
- Legal Right to Occupy
- Floor Plan
- Abutter's Notification
- Advertisement

1. BUSINESS ENTITY INFORMATION

Entity Name	Municipality	ABCC License Number
RAVE HOSPITALITY, Inc. d/b/a Elm Square Oyster	Andover	03490RS0026

Please provide a narrative overview of the transaction(s) being applied for. Attach additional pages, if necessary.

ADDITION OF A FUNCTION ROOM WHICH IS IN A SUITE ADJOINING OUR EXISTING RESTAURANT.

APPLICATION CONTACT

The application contact is the person who should be contacted with any questions regarding this application.

Name	Title	Email	Phone
Van Caldwell	Manager	[REDACTED]	[REDACTED]

2. ALTERATION OF PREMISES

2A. DESCRIPTION OF ALTERATIONS

Please summarize the details of the alterations and highlight any specific changes from the last-approved premises.

THE SPACE, CURRENTLY AN EMPTY SUITE, WILL SERVE AS A SEPARATE FUNCTION AREA (SOMETHING WE CURRENTLY DO NOT HAVE). IN SOME INSTANCES, THE SPACE MAY ALSO SERVE AS OVERFLOW SEATING FOR OUR RESTAURANT.

2B. PROPOSED DESCRIPTION OF PREMISES

Please provide a complete description of the proposed premises, including the number of floors, number of rooms on each floor, any outdoor areas to be included in the licensed area, and total square footage. You must also submit a floor plan.

THE 1093 SQ FT PREMISES, CONSISTS LARGELY OF ONE OPEN ROOM (WITH TWO ACCOMPANYING SMALLER ROOMS WHICH WILL BE USED AS AN OFFICE SPACE AND STORAGE AREA) WHICH WILL INCLUDE A SMALL BAR/SEATING.THERE IS ALSO AN ADDITIONAL 273 SQUARE FEET OF OUTDOOR AREA.

Total Sq. Footage	1366	Seating Capacity	68	Occupancy Number	68
Number of Entrances	3	Number of Exits	3	Number of Floors	1

AMENDMENT-Change or Alteration of Premises Information

3. CHANGE OF LOCATION

3A. PREMISES LOCATION

Last-Approved Street Address

Proposed Street Address

3B. DESCRIPTION OF PREMISES

Please provide a complete description of the premises to be licensed, including the number of floors, number of rooms on each floor, any outdoor areas to be included in the licensed area, and total square footage. You must also submit a floor plan.

THE 1093 SQ FT PREMISES, CONSISTS LARGELY OF ONE OPEN ROOM (WITH TWO ACCOMPANYING SMALLER ROOMS WHICH WILL BE USED AS AN OFFICE SPACE AND STORAGE AREA) WHICH WILL INCLUDE A SMALL BAR/SEATING.THERE IS ALSO AN ADDITIONAL 273 SQUARE FEET OF OUTDOOR AREA.

Total Sq. Footage	<input type="text" value="1366"/>	Seating Capacity	<input type="text" value="68"/>	Occupancy Number	<input type="text" value="68"/>
Number of Entrances	<input type="text" value="3"/>	Number of Exits	<input type="text" value="3"/>	Number of Floors	<input type="text" value="1"/>

3C. OCCUPANCY OF PREMISES

Please complete all fields in this section. Please provide proof of legal occupancy of the premises. (E.g. Deed, lease, letter of intent)

Please indicate by what means the applicant has to occupy the premises

Landlord Name

Landlord Phone

Landlord Email

Landlord Address

Lease Beginning Date

Rent per Month

Lease Ending Date

Rent per Year

Will the Landlord receive revenue based on percentage of alcohol sales?

Yes No

4. FINANCIAL DISCLOSURE

Associated Cost(s): (i.e. Costs associated with License Transaction including but not limited to: Property price, Business Assets, Renovations costs, Construction costs, Initial Start-up costs, Inventory costs, or specify other costs):

Associated Cost(s):	PROPERTY PRICE: N/A
	BUSINESS ASSETS: \$11,476.17
	RENOVATION COSTS: \$3,000.00
	CONSTRUCTION COSTS: \$0.00
	INITIAL START UP COSTS: \$1,000.00
	INVENTORY COSTS: \$1,000.00
	TOTAL: \$16,476.17

SOURCE OF CASH CONTRIBUTION

Please provide documentation of available funds. (E.g. Bank or other Financial institution Statements, Bank Letter, etc.)

Name of Contributor	Amount of Contribution
Total:	

SOURCE OF FINANCING

Please provide signed financing documentation.

Name of Lender	Amount	Type of Financing	Is the lender a licensee pursuant to M.G.L. Ch. 138.
N/A	N/A	N/A	<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No

APPLICANT'S STATEMENT

I, VAN CALDWELL the: sole proprietor; partner; corporate principal; LLC/LLP manager
Authorized Signatory

of RAVE Hospitality, dba Elm Square Oyster
Name of the Entity/Corporation

hereby submit this application (hereinafter the "Application"), to the local licensing authority (the "LLA") and the Alcoholic Beverages Control Commission (the "ABCC" and together with the LLA collectively the "Licensing Authorities") for approval.

I do hereby declare under the pains and penalties of perjury that I have personal knowledge of the information submitted in the Application, and as such affirm that all statements and representations therein are true to the best of my knowledge and belief. I further submit the following to be true and accurate:

- (1) I understand that each representation in this Application is material to the Licensing Authorities' decision on the Application and that the Licensing Authorities will rely on each and every answer in the Application and accompanying documents in reaching its decision;
- (2) I state that the location and description of the proposed licensed premises are in compliance with state and local laws and regulations;
- (3) I understand that while the Application is pending, I must notify the Licensing Authorities of any change in the information submitted therein. I understand that failure to give such notice to the Licensing Authorities may result in disapproval of the Application;
- (4) I understand that upon approval of the Application, I must notify the Licensing Authorities of any change in the ownership as approved by the Licensing Authorities. I understand that failure to give such notice to the Licensing Authorities may result in sanctions including revocation of any license for which this Application is submitted;
- (5) I understand that the licensee will be bound by the statements and representations made in the Application, including, but not limited to the identity of persons with an ownership or financial interest in the license;
- (6) I understand that all statements and representations made become conditions of the license;
- (7) I understand that any physical alterations to or changes to the size of the area used for the sale, delivery, storage, or consumption of alcoholic beverages, must be reported to the Licensing Authorities and may require the prior approval of the Licensing Authorities;
- (8) I understand that the licensee's failure to operate the licensed premises in accordance with the statements and representations made in the Application may result in sanctions, including the revocation of any license for which the Application was submitted; and
- (9) I understand that any false statement or misrepresentation will constitute cause for disapproval of the Application or sanctions including revocation of any license for which this Application is submitted.
- (10) I confirm that the applicant corporation and each individual listed in the ownership section of the application is in good standing with the Massachusetts Department of Revenue and has complied with all laws of the Commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting of child support.

Signature:

Van Caldwell

Date:

11-14-2023

Title:

Manager

ADDITIONAL INFORMATION

Please utilize this space to provide any additional information that will support your application or to clarify any answers provided above.

A large, empty rectangular box with a thin black border, occupying the majority of the page below the text. It is intended for the applicant to provide additional information or clarify previous answers.

ENTITY VOTE

The Board of Directors or LLC Managers of
Entity Name

duly voted to apply to the Licensing Authority of
City/Town and the

Commonwealth of Massachusetts Alcoholic Beverages Control Commission on
Date of Meeting

For the following transactions (Check all that apply):

Alteration of Licensed Premises

Change of Location

Other

"VOTED: To authorize
Name of Person

to sign the application submitted and to execute on the Entity's behalf, any necessary papers and do all things required to have the application granted."

A true copy attest,

For Corporations ONLY

A true copy attest,

Van Caldwell
Corporate Officer /LLC Manager Signature

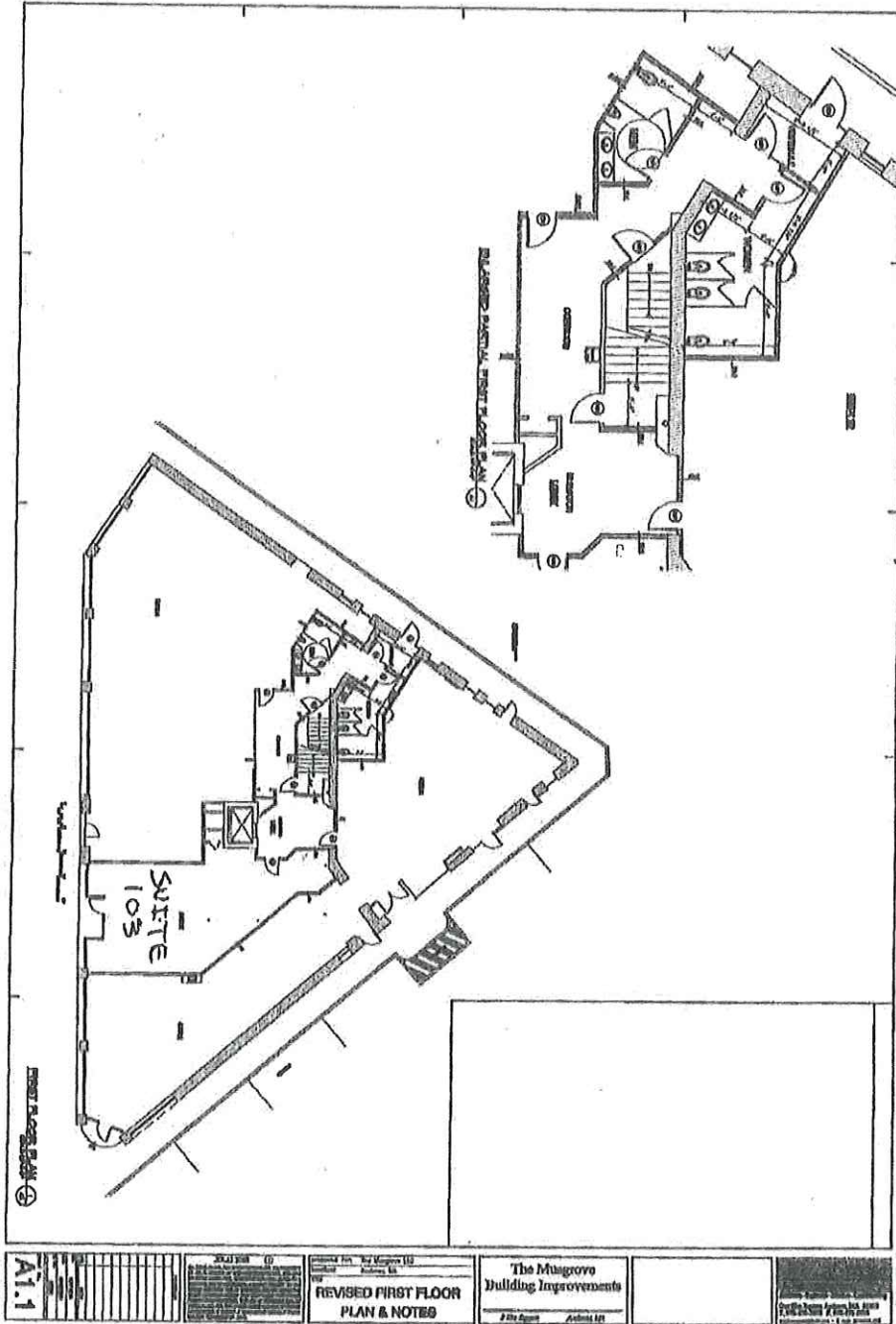
Corporation Clerk's Signature

VAN CALDWELL
(Print Name)

(Print Name)

Exhibit "A"

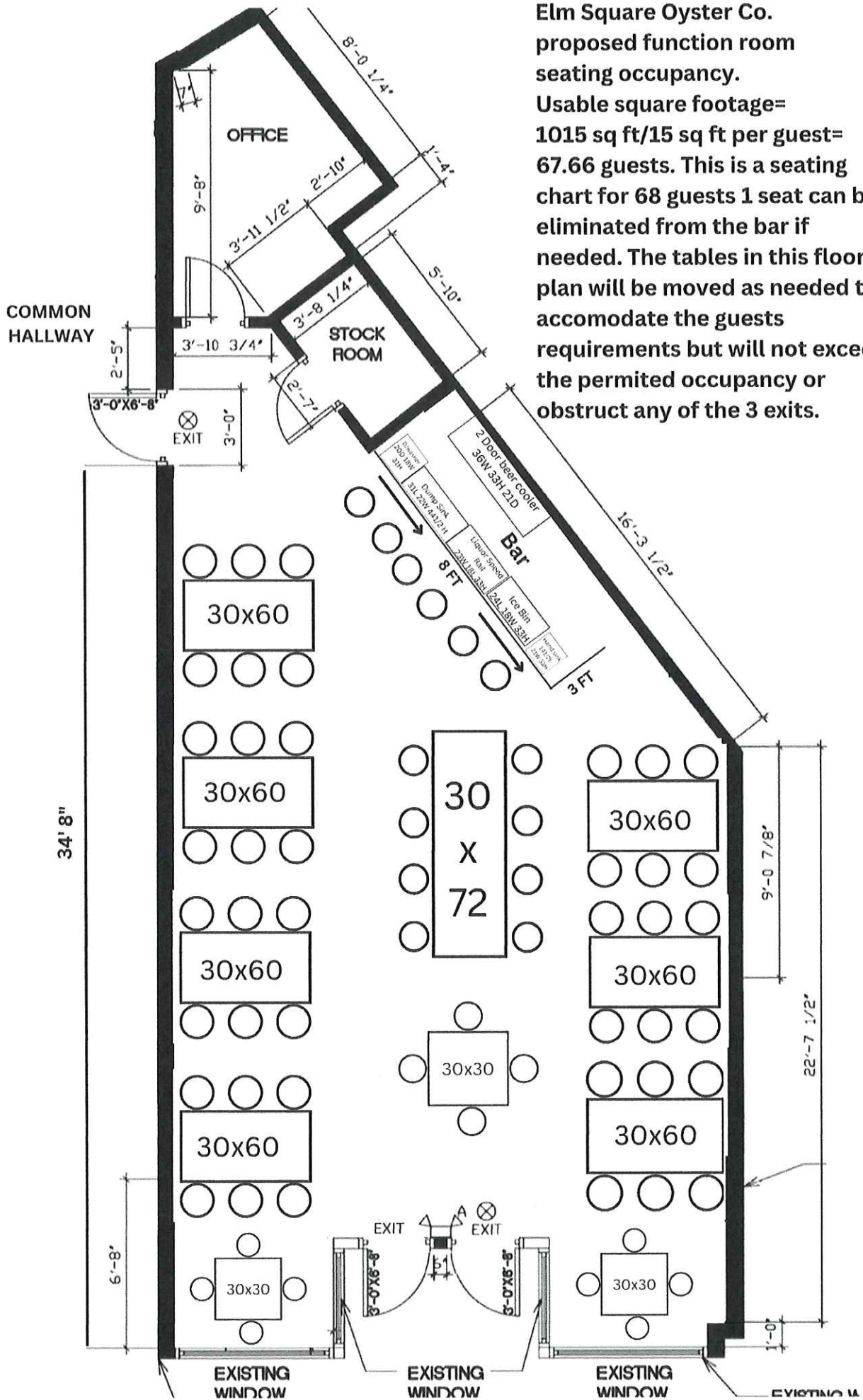
Depiction of the Premises

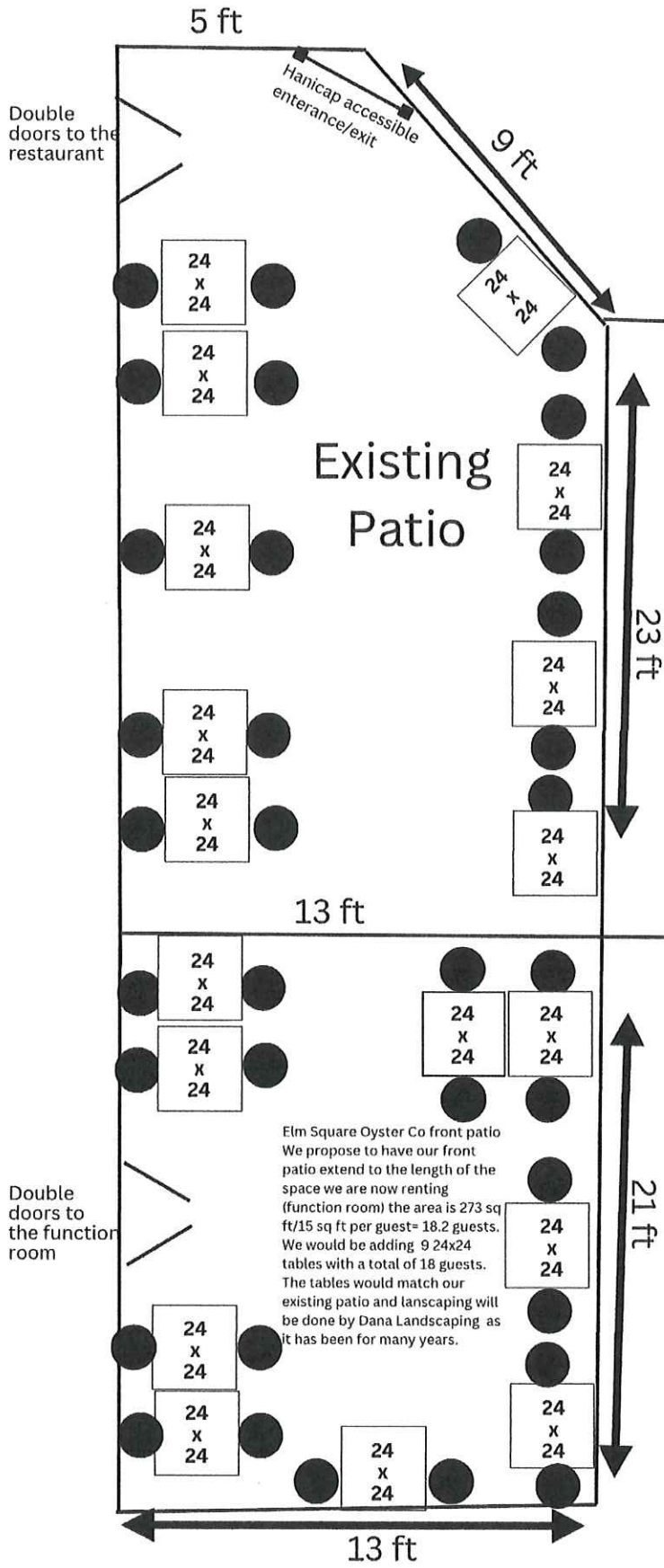


VC
/

Elm Square Oyster Co.
 proposed function room
 seating occupancy.

Usable square footage=
 1015 sq ft/15 sq ft per guest=
 67.66 guests. This is a seating
 chart for 68 guests 1 seat can be
 eliminated from the bar if
 needed. The tables in this floor
 plan will be moved as needed to
 accomodate the guests
 requirements but will not exceed
 the permitted occupancy or
 obstruct any of the 3 exits.







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

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

ALCOHOLIC BEVERAGES LICENSE APPLICATION

BUSINESS/ENTITY NAME:	Lavdisha, Inc.
DBA:	Richdale Convenience
PREMISE ADDRESS:	10 Railroad Street
	Andover, MA 01810
MANAGER/CONTACT NAME:	Sean M. Beagan, Esq. , Attorney for Lavdisha, Inc.
EMAIL:	[REDACTED]
PHONE:	[REDACTED]
BUSINESS MAILING ADDRESS: (if different from premise)	Zero Governors Ave., #33
	Medford, MA 02155
FID/SS#:	[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 checked="" type="checkbox"/> Change of Manager | <input type="checkbox"/> Change of Class
(i.e. Annual/Seasonal) | <input type="checkbox"/> Management/Operating Agreement |
| <input checked="" type="checkbox"/> Change of Officer/Directors/LLC Managers | <input type="checkbox"/> Change of License Type
(i.e. club/restaurant) | <input type="checkbox"/> Change of Hours |
| <input type="checkbox"/> Change of Location | <input checked="" type="checkbox"/> Change of Category
(i.e. All Alcohol/Wine, Malt) | <input type="checkbox"/> Change of DBA |
| <input type="checkbox"/> Alteration of Licensed Premises | <input checked="" 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: Disha Patel Date: 11/27/2023

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: _____



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

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

TAX FORM

APPLICANT NAME: Lavdisha, Inc.

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)

DocuSigned by:
Disha Patel
D0FAED96CA90B463...

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

Disha Patel

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: Lavdisha, Inc.

Address: 1 0 Railroad St.

City/State/Zip: Andover, MA 01810

Phone #:

Are you an employer? Check the appropriate box:

- 1. [X] I am an employer with 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. [X] 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: AmTrust North America

Insurer's Address: 59 Malden Lane

City/State/Zip: New York, NY 10038

Policy # or Self-ins. Lic. # TWC4272290

Expiration Date: 07/22/24

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: Disha Patel

Date: 11/27/2023

BCFA5D06A00B463...

Phone #:

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

Technology Insurance Company, Inc.

A Stock Insurance Company

WORKERS COMPENSATION
AND EMPLOYERS LIABILITY
INSURANCE POLICY

WC 99 00 01 B
1 of 5
INFORMATION PAGE

Ncci Code: 39071

1. Insured:

LAVDISHA INC



Policy Number: TWC4272290

Individual Partnership

Corporation

Other workplaces not shown above:

None

Federal Tax ID:

Producer:

Cocca Insurance Associates, Inc.
27 Water Street-St. 1
Wakefield, MA 01880

Risk Id:

Renewal of: TWC4117525

2. The policy period is from 7/22/2023 to 7/22/2024 12:01 a.m. at the insured's mailing address.

3. A. Workers Compensation Insurance: Part One of the policy applies to the Workers Compensation Law of the states listed here: Massachusetts

B. Employers Liability Insurance: Part Two of the policy applies to work in each state listed in item 3.A.

The limits of our liability under Part Two are:

State	Bodily Injury by Accident	Bodily Injury by Disease	Bodily Injury by Disease
	\$100,000 each accident	\$500,000 policy limit	\$100,000 each employee

C. Other States Insurance: Part Three of the policy applies to the states, if any, listed here:

All states except OH, ND, WA, WY and State(s) Designated in Item 3A.

D. This policy includes these endorsements and schedules: See Extension of Information Page

4. The premium for this policy will be determined by our Manuals of Rules, Classifications, Rates and Rating Plans. All information required below is subject to verification and change by audit.

See Extension of Information Page

TOTAL ESTIMATED ANNUAL PREMIUM

1,385

STATE ASSESSMENT

44

TOTAL ESTIMATED COST

1,429

Minimum Premium

386

Deposit Premium

1,429

Issue Date: 5/30/2023

Countersigned by: _____

Authorized Representative

WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE
POLICY

INFORMATION PAGE

Insured: LAVDISHA INC

Policy Number: TWC4272290

**EXTENSION OF INFORMATION PAGE FOR ITEM #1
ITEM 1: NAMED INSURED and WORKPLACES**

NAMED INSURED:

LAVDISHA INC

WORKPLACES:

Location Number 1.
10 RAILROAD AVE
ANDOVER, MA 01810





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

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

CRIMINAL RECORD INFORMATION FORM

This form must be completed by all Managers, Directors, Stockholders, and Officers.

BUSINESS/ENTITY NAME:	Lavdisha, Inc.
APPLICANT NAME:	Disha Patel
APPLICANT ADDRESS:	[REDACTED]
OCCUPATION:	Store Manager
BIRTHPLACE:	[REDACTED]
DATE OF BIRTH:	[REDACTED]

If you have any record of misdemeanors including: drunkenness, simple assault, speeding, minor traffic violations, affray or disturbance of the peace, and such offences were disposed of ten or more years prior to the filing of this application, you may be considered to have NO RECORD for the purpose of furnishing this department information as to your criminal record.

I, Disha Patel, applicant for a retail liquor license
(name) (license type)
 in the Town of Andover, hereby state that I have not been convicted for violation of a state or federal narcotic law.

I do hereby state that I have no record of criminal convictions in any state or federal court except those listed as follows:

I do hereby state that I have no pending criminal charges against me for any criminal violations in any state or federal court except those listed as follows:

Signed and subscribed to under the pains and penalties of perjury on this

27th day of November, 2023.
(date) (month) (year)

DocuSigned by:
Signature: Disha Patel
 BCF A5D08A00B463...

Any statements contained herein found to be untrue shall be cause for the cancellation and/or revocation of any license granted to the applicant or corporation in which they are a principal or agent.



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

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

**CRIMINAL OFFENDER RECORD INFORMATION (CORI)
ACKNOWLEDGEMENT FORM**

TO BE USED BY ORGANIZATIONS CONDUCTING CORI CHECKS FOR
EMPLOYMENT, VOLUNTEER, SUBCONTRACTOR, LICENSING, AND HOUSING PURPOSES

Town of Andover Town Clerk's Office is registered under the provisions of M.G.L. c. 6, § 172 to receive CORI for the purpose of screening current and otherwise qualified prospective employees, subcontractors, volunteers, license applicants, current licensees, and applicants for the rental or lease of housing.

As a prospective or current employee, subcontractor, volunteer, license applicant, current licensee, or applicant for the rental or lease of housing, I understand that a CORI check will be submitted for my personal information to the Department of Criminal Justice Information Services (DCJIS). I hereby acknowledge and provide permission to Town of Andover Town Clerk's Office to submit a CORI check for my information to the DCJIS. This authorization is valid for one year from the date of my signature. I may withdraw this authorization at any time by providing Town of Andover Town Clerk's Office with written notice of my intent to withdraw consent to a CORI check.

FOR EMPLOYMENT, VOLUNTEER, AND LICENSING PURPOSES ONLY: The Town of Andover Town Clerk/Andover Public Schools may conduct subsequent CORI checks within one year of the date this form was signed by me provided, however, that Town of Andover/Andover Public Schools must first provide me with written notice of this check.

By signing below, I provide my consent to a CORI check and acknowledge that the information provided on page 2 of this Acknowledgement Form is true and accurate.

SIGNATURE: _____

Dishaportel

DATE: _____

12/6/23

Your identity and signature must be verified by examining a government-issued identification **in person**.

All CORI forms must be returned, in person, along with your ID



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

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

SUBJECT INFORMATION:	
Last Name:	Patel
First Name:	Disha
Middle Name:	Ashokkumar
Suffix:	none
Maiden Name (or other name(s) by which you have been known):	[REDACTED]
Date of Birth:	
Place of Birth:	
Last Six Digits of Your Social Security # (REQUIRED):	
Sex:	
Height:	
Eye Color:	
Race:	
Drive License or ID #:	
State of Issue:	
Mother's Full/Maiden Name:	
Father's Full Name:	
Current Address:	
Former Address:	

Office Use Only

The above information was verified by reviewing the following form(s) of government issued identification:

- Driver's License Certified Birth Certificate US Passport Other _____

VERIFIED BY: _____

Name of Verifying Employee (Please Print)

Signature of Verifying Employee

Payment Confirmation

YOUR PAYMENT HAS PROCESSED AND THIS IS YOUR RECEIPT

Your account has been billed for the following transaction. You will receive a receipt via email.



Transaction Processed Successfully.

INVOICE #: 534f2276-035d-4ae4-ae79-7c02ac73389b

Description	Applicant, License or Registration Number	Amount
FILING FEES-RETAIL	00040-PK-0026(Lavdish Inc. d/b/a Richdale Conveni	\$200.00
		\$200.00

Total Convenience Fee: \$4.70

Date Paid: 12/12/2023 11:16:38 AM EDT

Total Amount Paid: \$204.70

Payment On Behalf Of

License Number or Business Name:
00040-PK-0026(Lavdish Inc. d/b/a Richdale
Conveni

Fee Type:
FILING FEES-RETAIL

Billing Information

First Name:
Sean

Last Name:
Beagan

Address:
Zero Governors Ave., #33

City:
Medford

State:
MA

Zip Code:
02155

Email Address:
jbeagan@beaganlaw.com

Payment Confirmation

YOUR PAYMENT HAS PROCESSED AND THIS IS YOUR RECEIPT

Your account has been billed for the following transaction. You will receive a receipt via email.



Transaction Processed Successfully.

INVOICE #: 068b85e9-43ef-496b-b978-b8d5f8082dd1

Description	Applicant, License or Registration Number	Amount
FILING FEES-RETAIL	00040-PK-0026(Lavdishia Inc. d/b/a Richdale Conveni	\$200.00
		\$200.00

Total Convenience Fee: \$4.70

Date Paid: 12/12/2023 11:22:03 AM EDT

Total Amount Paid: \$204.70

Payment On Behalf Of

License Number or Business Name:
00040-PK-0026(Lavdishia Inc. d/b/a Richdale
Conveni

Fee Type:
FILING FEES-RETAIL

Billing Information

First Name:
Sean

Last Name:
Beagan

Address:
Zero Governors Ave., #33

City:
Medford

State:
MA

Zip Code:
02155

Email Address:
jbeagan@beaganlaw.com

Payment Confirmation

YOUR PAYMENT HAS PROCESSED AND THIS IS YOUR RECEIPT

Your account has been billed for the following transaction. You will receive a receipt via email.



Transaction Processed Successfully.

INVOICE #: 4d302084-90c9-4d75-a00f-ab44ebd718ad

Description	Applicant, License or Registration Number	Amount
FILING FEES-RETAIL	00040-PK-0026(Lavdisha Inc. d/b/a Richdale Conveni	\$200.00
		\$200.00

Total Convenience Fee: \$4.70

Date Paid: 12/12/2023 11:26:36 AM EDT

Total Amount Paid: \$204.70

Payment On Behalf Of

License Number or Business Name:

00040-PK-0026(Lavdisha Inc. d/b/a Richdale
Conveni

Fee Type:

FILING FEES-RETAIL

Billing Information

First Name:

Sean

Last Name:

Beagan

Address:

Zero Governors Ave., #33

City:

Medford

State:

MA

Zip Code:

02155

Email Address:

jbeagan@beaganlaw.com

Payment Confirmation

YOUR PAYMENT HAS PROCESSED AND THIS IS YOUR RECEIPT

Your account has been billed for the following transaction. You will receive a receipt via email.



Transaction Processed Successfully.

INVOICE #: 6c7028b4-7207-4943-86c5-88afc484f5ca

Description	Applicant, License or Registration Number	Amount
FILING FEES-RETAIL	00040-PK-0026(Lavdishia Inc d/b/a Richdale Convenie	\$200.00
		\$200.00

Total Convenience Fee: \$4.70

Date Paid: 12/12/2023 11:33:43 AM EDT

Total Amount Paid: \$204.70

Payment On Behalf Of

License Number or Business Name:
00040-PK-0026(Lavdishia Inc d/b/a Richdale
Convenie

Fee Type:
FILING FEES-RETAIL

Billing Information

First Name:
Sean

Last Name:
Beagan

Address:
Zero Governors Ave, #33

City:
Medford

State:
MA

Zip Code:
02155

Email Address:
jbeagan@beaganlaw.com



The Commonwealth of Massachusetts
 Alcoholic Beverages Control Commission
 95 Fourth Street, Suite 3, Chelsea, MA 02150
www.mass.gov/abcc

RETAIL ALCOHOLIC BEVERAGES LICENSE APPLICATION
 MONETARY TRANSMITTAL FORM

APPLICATION SHOULD BE COMPLETED ON-LINE, PRINTED, SIGNED, AND SUBMITTED TO THE LOCAL LICENSING AUTHORITY.

ECRT CODE: RETA

Please make \$200.00 payment here: <https://www.mass.gov/epay-for-online-payments-abcc>

PAYMENT MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP, OR INDIVIDUAL

EPAY CONFIRMATION NUMBER

See attached (4) Receipts

A.B.C.C. LICENSE NUMBER (IF AN EXISTING LICENSEE, CAN BE OBTAINED FROM THE CITY)

00040-PK-0026

ENTITY/ LICENSEE NAME

Lavdishia, Inc.

ADDRESS

10 Railroad St.

CITY/TOWN

Andover

STATE

MA

ZIP CODE

01810

For the following transactions (Check all that apply):

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

ALCOHOLIC BEVERAGES CONTROL COMMISSION
 95 Fourth Street, Suite 3
 Chelsea, MA 02150-2358



Certificate of Compliance

Date: December 4, 2023

Letter ID: L0000450734

Employer ID (FEIN): [REDACTED]

LAVDISHA INC
10 RAILROAD ST
ANDOVER MA 01810-3554

Certificate ID [REDACTED]

The Department of Unemployment Assistance certifies that as of 01-Dec-2023, LAVDISHA INC is current in all its obligations relating to contributions, payments in lieu of contributions, and the employer medical assistance contribution established in G.L.c.149,§189.

This certificate expires in 30 days from the date of issuance.

Sincerely,

Katie Dishnica, Director
Department of Unemployment Assistance

Questions?

Revenue Enforcement Unit
Department of Unemployment Assistance
Email us: Revenue.Enforcement@detma.org
Call us: (617) 626-5750



Commonwealth of Massachusetts
Department of Revenue
Geoffrey E. Snyder, Commissioner

mass.gov/dor



CERTIFICATE OF GOOD STANDING AND/OR TAX COMPLIANCE



LAVDISHA INC
10 RAILROAD ST
ANDOVER MA 01810-3554



Why did I receive this notice?

The Commissioner of Revenue certifies that, as of the date of this certificate, LAVDISHA INC is in compliance with its tax obligations under Chapter 62C of the Massachusetts General Laws.

This certificate doesn't certify that the taxpayer is compliant in taxes such as unemployment insurance administered by agencies other than the Department of Revenue, or taxes under any other provisions of law.

This is not a waiver of lien issued under Chapter 62C, section 52 of the Massachusetts General Laws.

What if I have questions?

If you have questions, call us at (617) 887-6400 or toll-free in Massachusetts at (800) 392-6089, Monday through Friday, 9:00 a.m. to 4:00 p.m..

Visit us online!

Visit mass.gov/dor to learn more about Massachusetts tax laws and DOR policies and procedures, including your Taxpayer Bill of Rights, and MassTaxConnect for easy access to your account:

- Review or update your account
- Contact us using e-message
- Sign up for e-billing to save paper
- Make payments or set up autopay

Edward W. Coyle, Jr., Chief
Collections Bureau



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3, Chelsea, MA 02150-2358
www.mass.gov/abcc

APPLICATION FOR MULTIPLE AMENDMENTS

Please select all of the amendments you are applying for:

CHANGE OF CATEGORY

\$200 fee via [ABCC website](#) and Payment Receipt
Monetary Transmittal Form
DOR Certificate of Good Standing
DUA Certificate of Compliance
Change of Category Application
Vote of the Entity Board
Advertisement*
Abutter's Notification*

CHANGE OF LICENSE TYPE

\$200 fee via [ABCC website](#) and Payment Receipt
Monetary Transmittal Form
Change of License Type Application
Vote of the Entity Board
Advertisement*

CHANGE OF CORPORATE STRUCTURE

\$200 fee via [ABCC website](#) and Payment Receipt
Monetary Transmittal Form
DOR Certificate of Good Standing
DUA Certificate of Compliance
Change of Corporate Structure Application
Vote of the Entity Board
Business Structure Documents
If Sole Proprietor, **Business Certificate**
If partnership, **Partnership Agreement**
If corporation or LLC, **Articles of Organization** from the Secretary of the Commonwealth

CHANGE OF CLASSIFICATION

\$200 fee via [ABCC website](#) and Payment Receipt
Monetary Transmittal Form
DOR Certificate of Good Standing
DUA Certificate of Compliance
Change of Classification Application
Vote of the Entity Board
Abutter's Notification*
Advertisement*



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3, Chelsea, MA 02150-2358
www.mass.gov/abcc

APPLICATION FOR MULTIPLE AMENDMENTS

Please select all of the amendments you are applying for(continued):

CHANGE OF OFFICERS/DIRECTORS/LLC MANAGERS

\$200 fee via [ABCC website](#) and Payment Receipt

Monetary Transmittal Form

DOR Certificate of Good Standing

DUA Certificate of Compliance

Change of Officers/Directors Application

Vote of the Entity Board

CORI Authorization Complete one for the proposed manager of record. This form **must** be *notarized with a stamp or raised seal*.

Business Structure Documents

If Sole Proprietor, Business Certificate

If partnership, Partnership Agreement

If corporation or LLC, Articles of Organization from the Secretary of the Commonwealth

CHANGE OF OWNERSHIP INTEREST (e.g. LLC Members, LLP Partners, Trustees etc.)

\$200 fee via [ABCC website](#) and Payment Receipt

Monetary Transmittal Form

DOR Certificate of Good Standing

DUA Certificate of Compliance

Change of Officers/Directors Application

Financial Statement

Vote of the Entity Board

CORI Authorization Complete one for the proposed manager of record. This form **must** be *notarized with a stamp or raised seal*.

Business Structure Documents

If Sole Proprietor, Business Certificate

If partnership, Partnership Agreement

If corporation or LLC, Articles of Organization from the Secretary of the Commonwealth

Purchase and Sale Agreement

Supporting Financial Records

Advertisement*

CHANGE OF STOCK INTEREST (e.g. New Stockholders or Transfer or Issuance of Stock)

\$200 fee via [ABCC website](#) and Payment Receipt

Monetary Transmittal Form

DOR Certificate of Good Standing

DUA Certificate of Compliance

Change of Officers/Directors Application

Financial Statement

Vote of the Entity Board

CORI Authorization Complete one for the proposed manager of record. This form **must** be *notarized with a stamp or raised seal*.

Business Structure Documents

If Sole Proprietor, Business Certificate

If partnership, Partnership Agreement

If corporation or LLC, Articles of Organization from the Secretary of the Commonwealth

Purchase and Sale Agreement

Supporting Financial Records

Advertisement*

*If abutter notification and advertisement are required for transaction, please see the local licensing authority.



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3, Chelsea, MA 02150-2358
www.mass.gov/abcc

APPLICATION FOR MULTIPLE AMENDMENTS

Please select all of the amendments you are applying for(continued):

CHANGE OF CORPORATE NAME OR DBA

\$200 fee via [ABCC website](#) and Payment Receipt (Corporate Name Only)

Monetary Transmittal Form

DOR Certificate of Good Standing (Corporate Name Only)

DUA Certificate of Compliance (Corporate Name Only)

Change of Corporate Name/DBA Application

Vote of the Entity Board

Business Structure Documents

If Sole Proprietor, **Business Certificate**

If partnership, **Partnership Agreement**

If corporation or LLC, **Articles of Organization** from the Secretary of the Commonwealth

CHANGE OF PLEDGE OF LICENSE, STOCK OR INVENTORY

\$200 fee via [ABCC website](#) and Payment Receipt

Monetary Transmittal Form

DOR Certificate of Good Standing

DUA Certificate of Compliance

Change of Pledge of License, Stock or Inventory Application

Vote of the Entity Board

Pledge documentation

Promissory note

CHANGE OF MANAGER



\$200 fee via [ABCC website](#) and Payment Receipt

Monetary Transmittal Form

Change of Manager Application

Vote of the Entity Board

CORI Authorization Complete one for the proposed manager of record. This form **must** be *notarized with a stamp or raised seal*.

Proof of Citizenship. Passport, birth certificate, voter registration, or naturalization papers will be accepted.



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3, Chelsea, MA 02150-2358
www.mass.gov/abcc

APPLICATION FOR MULTIPLE AMENDMENTS

Please select all of the amendments you are applying for(continued):

CHANGE OF LOCATION

\$200 fee via ABCC website and Payment Receipt
Monetary Transmittal Form
Alteration of Premises/Change of Location Application
Vote of the Entity Board
Supporting financial records
Legal Right to Occupy
Floor Plan
Abutter's Notification*
Advertisement*

ALTERATION OF PREMISES

\$200 fee via ABCC website and Payment Receipt
Monetary Transmittal Form
Alteration of Premises/Change of Location Application
Vote of the Entity Board
Supporting financial records
Legal Right to Occupy
Floor Plan
Abutter's Notification*
Advertisement*

MANAGEMENT AGREEMENT

\$200 fee via ABCC website and Payment Receipt
Monetary Transmittal Form
Management Agreement Application
Management Agreement
Vote of the Entity Board
CORI Forms for all listed in Section 8A and attachments

IMPORTANT NOTE: A management agreement is where a licensee authorizes a third party to control the daily operations of the license premises, while retaining ultimate control over the license, through a written contract. *This does not pertain to a liquor license manager that is employed directly by the entity.*



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APPLICATION FOR MULTIPLE AMENDMENTS

Please select all of the amendments you are applying for(continued):

Non-Profit Club's ONLY

e.g. Veteran's Club

Non-Profit Club CHANGE OF OFFICERS/DIRECTORS

DOR Certificate of Good Standing
DUA Certificate of Compliance
Change of Officers/Directors Application
Vote of the club signed by an approved officer
Business Structure Documents-Articles of Organization from the Secretary of the Commonwealth
Monetary Transmittal Form
\$200 fee via [ABCC website](http://www.mass.gov/abcc) and Payment Receipt

Non-Profit Club CHANGE OF MANAGER

\$200 fee via [ABCC website](http://www.mass.gov/abcc) and Payment Receipt
Monetary Transmittal Form
Change of Manager Application
Vote of the club signed by an approved officer
CORI Authorization Complete one for the proposed manager of record. This form **must** be *notarized with a stamp or raised seal*.
Updated Officers and Directors*
*Please ensure to update your officers and directors *simultaneously* or **PRIOR** to applying for a change of manager. It will be returned with no action taken if the officers and directors do not match ABCC records.
Proof of Citizenship. Passport, birth certificate, voter registration, or naturalization papers will be accepted.



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APPLICATION FOR MULTIPLE AMENDMENTS

1. BUSINESS ENTITY INFORMATION

Entity Name

Municipality

ABCC License Number

Lavdisha, Inc.

Andover

00040-PK-0026

Please provide a narrative overview of the transaction(s) being applied for. On-premises applicants should also provide a description of the intended theme or concept of the business operation. Attach additional pages, if necessary.

Applicant is seeking to change the license category from wine and malt beverages to all alcohol sales.
 Applicant is seeking to change the Manager associated with the license.
 Applicant is seeking to change stock ownership and corporate officers

APPLICATION CONTACT

The application contact is the person who should be contacted with any questions regarding this application.

Name

Title

Email

Phone

Sean Beagan, Esq.

Attorney

2. AMENDMENT-Change of License Classification

Change of License Category

All Alcohol, Wine and Malt,
 Wine Malt and Cordials

Last-Approved License Category

Wines and Malt Beverages

Requested New License Category

All Alcoholic Beverages

Change of License Class

Seasonal or Annual

Last-Approved License Class

Requested New License Class

Change of License Type*

i.e. Restaurant to Club

*Certain License Types

CANNOT change once issued*

Last-Approved License Type

Requested New License Type

3. AMENDMENT-Change of Business Entity Information

Change of Corporate Name

Last-Approved Corporate Name:

Requested New Corporate Name:

Change of DBA

Last-Approved DBA:

Requested New DBA:

Change of Corporate Structure

LLC, Corporation, Sole
 Proprietor, etc

Last-Approved Corporate Structure

Requested New Corporate Structure

4. AMENDMENT-Pledge Information

Pledge of License

To whom is the pledge being made:

Pledge of Inventory

Pledge of Stock

5. AMENDMENT-Change of Manager

Change of License Manager

A. MANAGER INFORMATION

The individual that has been appointed to manage and control the licensed business and premises.

Proposed Manager Name Date of Birth

Residential Address

Email

Please indicate how many hours per week you intend to be on the licensed premises Last-Approved License Manager

B. CITIZENSHIP/BACKGROUND INFORMATION

Are you a U.S. Citizen?* Yes No *Manager must be a U.S. Citizen

If yes, attach one of the following as proof of citizenship US Passport, Voter's Certificate, Birth Certificate or Naturalization Papers.

Have you ever been convicted of a state, federal, or military crime? Yes No

If yes, fill out the table below and attach an affidavit providing the details of any and all convictions. Attach additional pages, if necessary, utilizing the format below.

Date	Municipality	Charge	Disposition

C. EMPLOYMENT INFORMATION

Please provide your employment history. Attach additional pages, if necessary, utilizing the format below.

Start Date	End Date	Position	Employer	Supervisor Name
2/22/2016	cont	Manager	Dishlav, LLC	N/A
2013	2/22/2016	Manager	Lavdisha, Inc. (Richdale Convenience)	N/A

D. PRIOR DISCIPLINARY ACTION

Have you held a beneficial or financial interest in, or been the manager of, a license to sell alcoholic beverages that was subject to disciplinary action? Yes No If yes, please fill out the table. Attach additional pages, if necessary,utilizing the format below.

Date of Action	Name of License	State	City	Reason for suspension, revocation or cancellation

I hereby swear under the pains and penalties of perjury that the information I have provided in this application is true and accurate:

Manager's Signature Date

b. AMENDMENT I-Change of Officers, Stock or Ownership Interest

- Change of Officers/Directors**
- Change of Ownership Interest (LLC Managers/LLP Partners, Trustees)**
- Change of Stock (E.g. New Stockholder/ Transfer or Issuance of Stock)**

List all individuals or entities that will have a direct or indirect, beneficial or financial interest in this license (E.g. Stockholders, Officers, Directors, LLC Managers, LLP Partners, Trustees etc.). Attach additional page(s) provided, if necessary, utilizing Addendum A.

- The individuals and titles listed in this section must be identical to those filed with the Massachusetts Secretary of State.
- The individuals identified in this section, as well as the proposed Manager of Record, must complete a CORI Release Form.
- Please note the following statutory requirements for Directors and LLC Managers:
On Premises (E.g. Restaurant/ Club/Hotel) Directors or LLC Managers - At least 50% must be US citizens;
Off Premises(Liquor Store) Directors or LLC Managers - All must be US citizens and a majority must be Massachusetts residents.
- If you are a Multi-Tiered Organization, please attach a flow chart identifying each corporate interest and the individual owners of each entity as well as the Articles of Organization for each corporate entity. Every individual must be identified in Addendum A.

Name of Principal	Residential Address	SSN	DOB
Disha Patel	[REDACTED]	[REDACTED]	[REDACTED]

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
Sole Officer	100%	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
		<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
		<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
		<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
		<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
		<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Additional pages attached? Yes No

CRIMINAL HISTORY
 Has any individual listed in question 6, and applicable attachments, ever been convicted of a State, Federal or Military Crime? If yes, attach an affidavit providing the details of any and all convictions. Yes No

MANAGEMENT AGREEMENT
 Are you requesting approval to utilize a management company through a management agreement? Please provide a copy of the management agreement. Yes No

6. AMENDMENT-Change of Officers, Stock or Ownership Interest

6B. CURRENT OFFICERS, STOCK OR OWNERSHIP INTEREST

List the individuals and entities of the current ownership. Attach additional pages if necessary utilizing the format below.

Name of Principal	Title/Position	Percentage of Ownership
Disha Patel	Sole Officer and Director	100%

6A. INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Does any individual or entity identified in question 6, and applicable attachments, have any direct or indirect, beneficial or financial interest in any other license to sell alcoholic beverages? Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality

6B. PREVIOUSLY HELD INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Has any individual or entity identified identified in question 6, and applicable attachments, ever held a direct or indirect, beneficial or financial interest in a license to sell alcoholic beverages, which is not presently held? Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality

6C. DISCLOSURE OF LICENSE DISCIPLINARY ACTION

Have any of the disclosed licenses listed in question 6A or 6B ever been suspended, revoked or cancelled? Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Date of Action	Name of License	City	Reason for suspension, revocation or cancellation

7. AMENDMENT-Change of Premises Information

Alteration of Premises: (must fill out attached financial information form)

7A. ALTERATION OF PREMISES

Please summarize the details of the alterations and highlight any specific changes from the last-approved premises.

PROPOSED DESCRIPTION OF PREMISES

Please provide a complete description of the proposed premises, including the number of floors, number of rooms on each floor, any outdoor areas to be included in the licensed area, and total square footage. You must also submit a floor plan.

Total Sq. Footage	<input style="width: 90%;" type="text"/>	Seating Capacity	<input style="width: 90%;" type="text"/>		Occupancy Number	<input style="width: 90%;" type="text"/>
Number of Entrances	<input style="width: 90%;" type="text"/>	Number of Exits	<input style="width: 90%;" type="text"/>		Number of Floors	<input style="width: 90%;" type="text"/>

Change of Location: (must fill out attached financial information form)

7B. CHANGE OF LOCATION

Last-Approved Street Address

Proposed Street Address

DESCRIPTION OF PREMISES

Please provide a complete description of the premises to be licensed, including the number of floors, number of rooms on each floor, any outdoor areas to be included in the licensed area, and total square footage. You must also submit a floor plan.

Total Sq. Footage	<input style="width: 90%;" type="text"/>	Seating Capacity	<input style="width: 90%;" type="text"/>		Occupancy Number	<input style="width: 90%;" type="text"/>
Number of Entrances	<input style="width: 90%;" type="text"/>	Number of Exits	<input style="width: 90%;" type="text"/>		Number of Floors	<input style="width: 90%;" type="text"/>

OCCUPANCY OF PREMISES

Please complete all fields in this section. Please provide proof of legal occupancy of the premises. (E.g. Deed, lease, letter of intent)

Please indicate by what means the applicant has to occupy the premises

Landlord Name

Landlord Phone

Landlord Email

Landlord Address

Lease Beginning Date

Rent per Month

Lease Ending Date

Rent per Year

Will the Landlord receive revenue based on percentage of alcohol sales? Yes No

8. AMENDMENT-Management Agreement

Management Agreement: (must fill out all pages in section 8)

Are you requesting approval to utilize a management company through a management agreement?

If yes, please fill out section 8.

Yes No

Please provide a narrative overview of the Management Agreement. Attach additional pages, if necessary.

IMPORTANT NOTE: A management agreement is where a licensee authorizes a third party to control the daily operations of the license premises, while retaining ultimate control over the license, through a written contract. *This does **not** pertain to a liquor license manager that is employed directly by the entity.*

8A. MANAGEMENT ENTITY

List all proposed individuals or entities that will have a direct or indirect, beneficial or financial interest in the management Entity (E.g. Stockholders, Officers, Directors, LLC Managers, LLP Partners, Trustees etc.).

Entity Name	Address	Phone
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Name of Principal	Residential Address	SSN	DOB
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

CRIMINAL HISTORY

Has any individual identified above ever been convicted of a State, Federal or Military Crime?

If yes, attach an affidavit providing the details of any and all convictions.

Yes No

8B. EXISTING MANAGEMENT AGREEMENTS AND INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Does any individual or entity identified in question 8A, and applicable attachments, have any direct or indirect, beneficial or financial interest in any other license to sell alcoholic beverages; and or have an active management agreement with any other licensees?

Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality

8. AMENDMENT I - Management Agreement

8C. PREVIOUSLY HELD INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Has any individual or entity identified in question 8A, and applicable attachments, ever held a direct or indirect, beneficial or financial interest in a license to sell alcoholic beverages, which is not presently held?

Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality

8D. PREVIOUSLY HELD MANAGEMENT AGREEMENT

Has any individual or entity identified in question 8A, and applicable attachments, ever held a management agreement with any other Massachusetts licensee?

Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Licensee Name	License Type	Municipality	Date(s) of Agreement

8E. DISCLOSURE OF LICENSE DISCIPLINARY ACTION

Have any of the disclosed licenses listed in question 8B, 8C or 8D ever been suspended, revoked or cancelled?

Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Date of Action	Name of License	City	Reason for suspension, revocation or cancellation

8F. TERMS OF AGREEMENT

- a. Does the agreement provide for termination by the licensee? Yes No
- b. Will the licensee retain control of the business finances? Yes No
- c. Does the management entity handle the payroll for the business? Yes No

d. Management Term Begin Date e. Management Term End Date

f. How will the management company be compensated by the licensee? (check all that apply)

- \$ per month/year (indicate amount)
- % of alcohol sales (indicate percentage)
- % of overall sales (indicate percentage)
- other (please explain)

ABCC Licensee Officer/LLC Manager

Management Agreement Entity Officer/LLC Manager

Signature:

Signature:

Title:

Title:

Date:

Date:

9. FINANCIAL DISCLOSURE

Required for the following transactions:

- Change of Officers, Stock or Ownership Interest (E.g. New Stockholder/Transfer or Issuance of Stock)
- Change of Premises Information
- Pledge of License, Inventory or Stock

Purchase Price(s):

\$25,000.00

SOURCE OF CASH CONTRIBUTION

Please provide documentation of available funds. (E.g. Bank or other Financial institution Statements, Bank Letter, etc.)

Name of Contributor	Amount of Contribution
Disha Patel - January 1, 2017	18,750.00
Disha Patel - March 15, 2022	6,250.00
Total	\$25,000.00

SOURCE OF FINANCING

Please provide signed financing documentation.

Name of Lender	Amount	Type of Financing	Is the lender a licensee pursuant to M.G.L. Ch. 138:
N/A			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No

FINANCIAL INFORMATION

Provide a detailed explanation of the form(s) and source(s) of funding for the cost identified above.

The stock in the LavDisha, Inc. was sold during the course of two transactions. On or about January 1, 2017, 75% of the stock was sold to Disha Patel from Sureshbhai Patel for the sum of \$18,750.00. On or about March 15, 2022, the remaining 25% of the stock was sold to Disha Patel from Sureshbhai Patel in the amount of \$6,250.00. Attached hereto is the Stock Sale Agreement Dated January 1, 2017, as well as a Transfer of the remaining 25% of Sureshbhai shareholder interest on March 15, 2022.

APPLICANT'S STATEMENT

I, Disha Patel the: sole proprietor; partner; corporate principal; LLC/LLP manager
Authorized Signatory

of Lavdisha, Inc.
Name of the Entity/Corporation

hereby submit this application (hereinafter the "Application"), to the local licensing authority (the "LLA") and the Alcoholic Beverages Control Commission (the "ABCC" and together with the LLA collectively the "Licensing Authorities") for approval.

I do hereby declare under the pains and penalties of perjury that I have personal knowledge of the information submitted in the Application, and as such affirm that all statements and representations therein are true to the best of my knowledge and belief. I further submit the following to be true and accurate:

- (1) I understand that each representation in this Application is material to the Licensing Authorities' decision on the Application and that the Licensing Authorities will rely on each and every answer in the Application and accompanying documents in reaching its decision;
- (2) I state that the location and description of the proposed licensed premises are in compliance with state and local laws and regulations;
- (3) I understand that while the Application is pending, I must notify the Licensing Authorities of any change in the information submitted therein. I understand that failure to give such notice to the Licensing Authorities may result in disapproval of the Application;
- (4) I understand that upon approval of the Application, I must notify the Licensing Authorities of any change in the ownership as approved by the Licensing Authorities. I understand that failure to give such notice to the Licensing Authorities may result in sanctions including revocation of any license for which this Application is submitted;
- (5) I understand that the licensee will be bound by the statements and representations made in the Application, including, but not limited to the identity of persons with an ownership or financial interest in the license;
- (6) I understand that all statements and representations made become conditions of the license;
- (7) I understand that any physical alterations to or changes to the size of the area used for the sale, delivery, storage, or consumption of alcoholic beverages, must be reported to the Licensing Authorities and may require the prior approval of the Licensing Authorities;
- (8) I understand that the licensee's failure to operate the licensed premises in accordance with the statements and representations made in the Application may result in sanctions, including the revocation of any license for which the Application was submitted; and
- (9) I understand that any false statement or misrepresentation will constitute cause for disapproval of the Application or sanctions including revocation of any license for which this Application is submitted.
- (10) I confirm that the applicant corporation and each individual listed in the ownership section of the application is in good standing with the Massachusetts Department of Revenue and has complied with all laws of the Commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting of child support.

DocuSigned by:
Signature: Disha Patel
BCEA5D06A00B463...

Date: 11/27/2023

Title: President

ADDITIONAL INFORMATION

Please utilize this space to provide any additional information that will support your application or to clarify any answers provided above.

In regards to the change of ownership and change of officers, there was a transfer of stock in Lavdisha, Inc. to Ms. Disha Patel in 2017 for 75% of the corporation, the remaining 25% of the stock was transferred in 2022. This Application is being filed to make the license comport with the current ownership and officers of the corporation.

ENTITY VOTE

The Board of Directors or LLC Managers of Lavdisha, Inc.
Entity Name

duly voted to apply to the Licensing Authority of Andover and the
City/Town

Commonwealth of Massachusetts Alcoholic Beverages Control Commission on November 15, 2023
Date of Meeting

For the following transactions (Check all that apply):

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

"VOTED: To authorize Disha Patel
Name of Person

to sign the application submitted and to execute on the Entity's behalf, any necessary papers and do all things required to have the application granted."

"VOTED: To appoint Disha Patel
Name of Liquor License Manager

as its manager of record, and hereby grant him or her with full authority and control of the premises described in the license and authority and control of the conduct of all business therein as the licensee itself could in any way have and exercise if it were a natural person residing in the Commonwealth of Massachusetts."

A true copy attest,

DocuSigned by:
Disha Patel
BCEA5D06A00B463

Corporate Officer /LLC Manager Signature
 Disha Patel

 (Print Name)

For Corporations ONLY

A true copy attest,

DocuSigned by:
Disha Patel
BCEA5D06A00B463

Corporate Clerk's Signature
 Disha Patel

 (Print Name)



Commonwealth of Massachusetts
 Alcoholic Beverages Control Commission
 95 Fourth Street, Suite 3
 Chelsea, MA 02150

JEAN M. LORIZIO, ESQ.
 CHAIRMAN

CORI REQUEST FORM

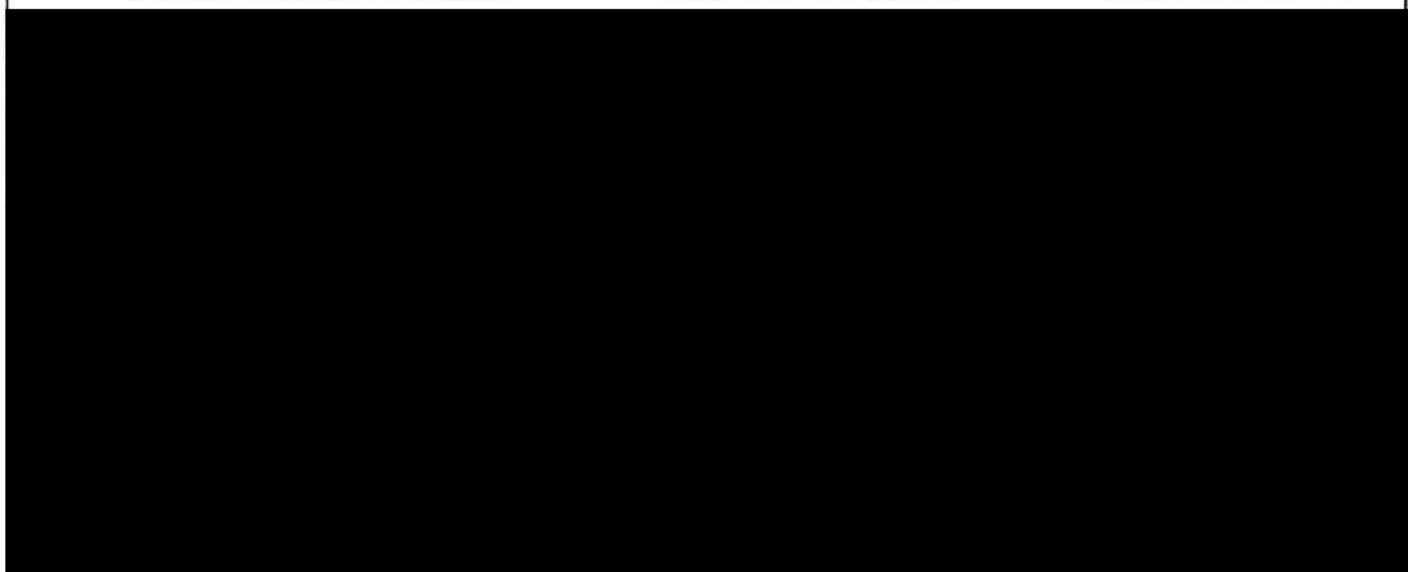
The Alcoholic Beverages Control Commission ("ABCC") has been certified by the Criminal History Systems Board to access conviction and pending Criminal Offender Record Information ("CORI"). For the purpose of approving each shareholder, owner, licensee or applicant for an alcoholic beverages license, I understand that a criminal record check will be conducted on me, pursuant to the above. The information below is correct to the best of my knowledge.

ABCC LICENSE INFORMATION

ABCC NUMBER: <small>(IF EXISTING LICENSEE)</small>	400026	LICENSEE NAME:	Lavdisha, Inc.	CITY/TOWN:	Andover
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APPLICANT INFORMATION

LAST NAME:	Patel	FIRST NAME:	Disha	MIDDLE NAME:	Ashokkumar
------------	-------	-------------	-------	--------------	------------



PRINT AND SIGN

PRINTED NAME:	Disha Patel	APPLICANT/EMPLOYEE SIGNATURE:	<i>Disha Patel</i>
---------------	-------------	-------------------------------	--------------------

NOTARY INFORMATION


On this 8th December 2023 before me, the undersigned notary public, personally appeared Disha Patel
 (name of document signer), proved to me through satisfactory evidence of identification, which were Drivers License
 to be the person whose name is signed on the preceding or attached document, and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose.

[Signature]
 NOTARY

DIVISION USE ONLY

REQUESTED BY:	
---------------	----------

The DCI Identify Theft Index PIN Number is to be completed by those applicants that have been issued an Identify Theft PIN Number by the DCI. Certified agencies are required to provide all applicants the opportunity to include this information to ensure the accuracy of the CORI request process. ALL CORI request forms that include this field are required to be submitted to the DCI via mail or by fax to (617) 660-4614.

 **SEAN M. BEAGAN**
 Notary Public, Commonwealth of Massachusetts
 My Commission Expires September 15, 2028

No. 42316574

CERTIFICATE OF NATURALIZATION

Personal description of holder
as of date of naturalization:

Date of birth: OCTOBER 23, 1991

Sex: FEMALE

Height: 5 feet 04 inches

Marital status: MARRIED

Country of former nationality:
INDIA

USCIS Registration No. A04174710

I certify that the description given is true, and that the photograph affixed
hereto is a likeness of me.

Dishapatil
(Signature and name of holder)

Be it known that, pursuant to an application filed with the Secretary of
Homeland Security

at LAWRENCE, MASSACHUSETTS

The Secretary having found that:

DISHA ASHOKKUMAR PATEL

residing at:

MEDFORD, MASSACHUSETTS

having complied in all respects with all of the applicable provisions of the
naturalization laws of the United States, being entitled to be admitted as
a citizen of the United States, and having taken the oath of allegiance at a
ceremony conducted by

U.S. CITIZENSHIP AND IMMIGRATION SERVICES

at LAWRENCE, MASSACHUSETTS on DECEMBER 01, 2020

such person is admitted as a citizen of the United States of America.

Kim C. II

U. S. Citizenship and Immigration Services



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AFFIDAVIT

I, Sureshbhai Patel, do attest and aver that the following statements are true and accurate.

1. At various times in the corporate documents of Lavdisha, Inc., I have been referred to as Suresh Patel or Sureshbhai Patel.
2. At the time that the Articles of Organization were filed in 2012, my name was listed as Suresh Patel, on the Articles of Organization. (Exhibit A)
3. Subsequently, in 2017, my name appears as Sureshbhai Patel on a Statement of Change of Supplemental Information filed with the Secretary of the Commonwealth of Massachusetts. (Exhibit B)
4. In subsequent Annual Reports for the years 2017-2021, my name appears as both Suresh Patel, Registered Agent and as Sureshbhai Patel, Vice President. (Exhibit C)
5. On documents related to the transfer of stock in Lavdisha, Inc., my name appears as Sureshbhai Patel
6. Sureshbhai Patel and Suresh Patel are one and same person.

Signed this 7th day of December 2023



Sureshbhai Patel a/k/a Suresh Patel

A



The Commonwealth of Massachusetts
William Francis Galvin

Minimum Fee: \$250.00

Secretary of the Commonwealth, Corporations Division
 One Ashburton Place, 17th floor
 Boston, MA 02108-1512
 Telephone: (617) 727-9640

Articles of Organization

(General Laws, Chapter 156D, Section 2.02; 950 CMR 113.16)

Federal Employer Identification Number [REDACTED]

ARTICLE I

The exact name of the corporation is:

LAVDISHA INC.

ARTICLE II

Unless the articles of organization otherwise provide, all corporations formed pursuant to G.L. C156D have the purpose of engaging in any lawful business. Please specify if you want a more limited purpose:

ARTICLE III

State the total number of shares and par value, if any, of each class of stock that the corporation is authorized to issue. All corporations must authorize stock. If only one class or series is authorized, it is not necessary to specify any particular designation.

Class of Stock	Par Value Per Share Enter 0 if no Par	Total Authorized by Articles of Organization or Amendments		Total Issued and Outstanding Num of Shares
		Num of Shares	Total Par Value	
CNP	\$0.00000	200	\$0.00	200

G.L. C156D eliminates the concept of par value, however a corporation may specify par value in Article III. See G.L. C156D Section 6.21 and the comments thereto.

ARTICLE IV

If more than one class of stock is authorized, state a distinguishing designation for each class. Prior to the issuance of any shares of a class, if shares of another class are outstanding, the Business Entity must provide a description of the preferences, voting powers, qualifications, and special or relative rights or privileges of that class and of each other class of which shares are outstanding and of each series then established within any class.

ARTICLE V

The restrictions, if any, imposed by the Articles of Organization upon the transfer of shares of stock of any class are:

ARTICLE VI

Other lawful provisions, and if there are no provisions, this article may be left blank.

Note: The preceding six (6) articles are considered to be permanent and may be changed only by filing appropriate articles of amendment.

ARTICLE VII

The effective date of organization and time the articles were received for filing if the articles are not rejected within the time prescribed by law. If a *later* effective date is desired, specify such date, which may not be later than the *90th day* after the articles are received for filing.

Later Effective Date: Time:

ARTICLE VIII

The information contained in Article VIII is not a permanent part of the Articles of Organization.

a,b. The street address of the initial registered office of the corporation in the commonwealth and the name of the initial registered agent at the registered office:

Name: SURESH PATEL

No. and Street:

City or Town:

c. The names and street addresses of the individuals who will serve as the initial directors, president, treasurer and secretary of the corporation (an address need not be specified if the business address of the officer or director is the same as the principal office location):

Title	Individual Name First, Middle, Last, Suffix	Address (no PO Box) Address, City or Town, State, Zip Code
PRESIDENT	SURESH PATEL	
TREASURER	SURESH PATEL	
SECRETARY	SURESH PATEL	
DIRECTOR	SURESH PATEL	

d. The fiscal year end (i.e., tax year) of the corporation:

December

e. A brief description of the type of business in which the corporation intends to engage:

RETAIL CONVENIENCE STORE WITH BEER & WINE

f. The street address (post office boxes are not acceptable) of the principal office of the corporation:

No. and Street:

10 RAILROAD STREET

City or Town:

ANDOVER

State: MA

Zip: 01810

Country: USA

g. Street address where the records of the corporation required to be kept in the Commonwealth are located (post office boxes are not acceptable):

No. and Street:

10 RAILROAD STREET

City or Town:

ANDOVER

State: MA

Zip: 01810

Country: USA

which is

its principal office

an office of its transfer agent

an office of its secretary/assistant secretary

its registered office

Signed this 3 Day of May, 2012 at 12:13:52 PM by the incorporator(s). *(If an existing corporation is acting as incorporator, type in the exact name of the business entity, the state or other jurisdiction where it was incorporated, the name of the person signing on behalf of said business entity and the title he/she holds or other authority by which such action is taken.)*

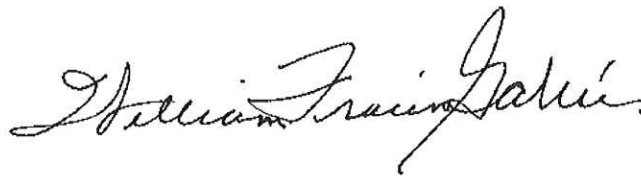
H. DON AHN

THE COMMONWEALTH OF MASSACHUSETTS

I hereby certify that, upon examination of this document, duly submitted to me, it appears that the provisions of the General Laws relative to corporations have been complied with, and I hereby approve said articles; and the filing fee having been paid, said articles are

deemed to have been filed with me on:

May 03, 2012 12:09 PM

A handwritten signature in cursive script that reads "William Francis Galvin". The signature is written in black ink and is centered on the page.

WILLIAM FRANCIS GALVIN

Secretary of the Commonwealth

B



**The Commonwealth of Massachusetts
William Francis Galvin**

No Fee

Secretary of the Commonwealth, Corporations Division
One Ashburton Place, 17th floor
Boston, MA 02108-1512
Telephone: (617) 727-9640

Statement of Change of Supplemental Information

(General Laws, Chapter 156D, Section 2.02 AND Section 8.45; 950 CMR 113.17)

1. Exact name of the corporation: LAVDISHA INC.

2. Current registered office address:

Name: SURESH PATEL

No. and Street:

City or Town:

3. The following supplemental information has changed:

Names and street addresses of the directors, president, treasurer, secretary

Title	Individual Name First, Middle, Last, Suffix	Address (no PO Box) Address, City or Town, State, Zip Code
PRESIDENT	DISHA A. PATEL	
TREASURER	DISHA A. PATEL	
SECRETARY	DISHA A. PATEL	
VICE PRESIDENT	SURESHBHAI PATEL	
DIRECTOR	DISHA A. PATEL	

___ Fiscal year end:

December

___ Type of business in which the corporation intends to engage:

RETAIL CONVENIENCE STORE WITH BEER & WINE

___ Principal office address:

No. and Street:

10 RAILROAD STREET

City or Town:

ANDOVER

State: MA

Zip: 01810

Country: USA

___ g. Street address where the records of the corporation required to be kept in the Commonwealth are located (post office boxes are not acceptable):

No. and Street:

10 RAILROAD STREET

City or Town:

ANDOVER

State: MA

Zip: 01810

Country: USA

which is

its principal office

an office of its transfer agent

an office of its secretary/assistant secretary

its registered office

Signed by HETAL MISTRY SHAH, ESQ., AUTHORIZED REPRESENTATIVE, its OTHER
OFFICER

on this 8 Day of June, 2017

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THE COMMONWEALTH OF MASSACHUSETTS

I hereby certify that, upon examination of this document, duly submitted to me, it appears that the provisions of the General Laws relative to corporations have been complied with, and I hereby approve said articles; and the filing fee having been paid, said articles are deemed to have been filed with me on:

June 08, 2017 12:52 PM

A handwritten signature in cursive script that reads "William Francis Galvin". The signature is written in dark ink and is centered on the page.

WILLIAM FRANCIS GALVIN

Secretary of the Commonwealth

C



The Commonwealth of Massachusetts
William Francis Galvin

Minimum Fee: \$100.00

Secretary of the Commonwealth, Corporations Division
One Ashburton Place, 17th floor
Boston, MA 02108-1512
Telephone: (617) 727-9640

Annual Report

(General Laws, Chapter 156D, Section 16.22; 950 CMR 113.57)

Identification Number: [REDACTED]

1. Exact name of the corporation: LAVDISHA INC.

2. Jurisdiction of Incorporation: State: MA Country:

3,4. Street address of the corporation registered office in the commonwealth and the name of the registered agent at that office:

Name: SURESH PATEL

No. and Street: [REDACTED]

City or Town: [REDACTED]

5. Street address of the corporation's principal office:

No. and Street: 10 RAILROAD STREET

City or Town: ANDOVER State: MA Zip: 01810 Country: USA

6. Provide the name and addresses of the corporation's board of directors and its president, treasurer, secretary, and if different, its chief executive officer and chief financial officer.

Title	Individual Name First, Middle, Last, Suffix	Address (no PO Box) Address, City or Town, State, Zip Code
PRESIDENT	DISHA A. PATEL	[REDACTED]
TREASURER	DISHA A. PATEL	[REDACTED]
SECRETARY	DISHA A. PATEL	[REDACTED]
VICE PRESIDENT	SURESHBHAI PATEL	[REDACTED]
DIRECTOR	DISHA A. PATEL	[REDACTED]

7. Briefly describe the business of the corporation:

RETAIL CONVENIENCE STORE WITH BEER & WINE

8. Capital stock of each class and series:

Class of Stock	Par Value Per Share Enter 0 if no Par	Total Authorized by Articles of Organization or Amendments		Total Issued and Outstanding Num of Shares
		Num of Shares	Total Par Value	
CNP	\$0.00000	200	\$0.00	200

9. Check here if the stock of the corporation is publicly traded:

10. Report is filed for fiscal year ending: 12/31/ 2017

Signed by DISHA A. PATEL, its PRESIDENT
on this 1 Day of March, 2018

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Quad Board Meeting
Select Board - Finance Committee
School Committee-AHS Building Committee
Wednesday, September 27, 2023
Robb Center
30 Whittier Court, Andover, Massachusetts

I. Call to Order

Select Board Chair, Melissa Danisch called the Triboard Meeting to order at 7:05 PM in the Robb Center at 5:30 Whittier Court. Present from the Select Board: Laura Gregory, Alex Vispoli, Melissa Danisch, Chris Huntress, and Annie Gilbert.

Others in Attendance: Town Manager Andrew Flanagan, Deputy Town Manager Mike Lindstrom, CFO Patrick Lawlor, and Janet Nicosia, Director of Facilities.

School Committee Chair Tracey Spruce called the School Committee to order. Members present: Susan McCready, Lauren Conoscenti, Sandis Wright (calling in remotely) Emily DiCesaro. Others in attendance Superintendent Dr. Magda Parvey and Asst. Superintendent for Finance and Administration Keith Taverna.

Finance Committee Chair Paula Colby Clements called the Finance Committee to order. Members in attendance: Aaron Buzay, Paul MacKay, Brian Major, Yican Cao, Ken Russo, Bill Haskell, Andy McBrien.

AHS Building Committee: Chair, Mark Johnson, Shannon Scully, Susan McCready, Tracey Spruce, Dr. Lauren Conoscenti, Andrew Flanagan, Dr. Nancy Kimelman, Dr. Magda Parvey, Director of Facilities, Janet Nicosia, Asst. Superintendent for Finance and Administration Keith Taverna, CFO Patrick Lawlor, Michael Prout (calling in remotely) and AHS Assistant Principal Scott Darlington.

II. Opening Ceremonies/Moment of Silence/Pledge of Allegiance

The meeting began with a Moment of Silence followed the Pledge of Allegiance.

III. Regular Business

A. AHS Building Project Financial Considerations

Presentation by the Town Manager, Andrew Flanagan. (click link to see entire presentation)

The Town Manager provided information relative to the potential financial impact of a large -scale building project i.e. the AHS Building project, and the escalation as it relates to a town funded project versus an MSBA funded project. They engaged S & P to simulate scenarios showing the impact of a bond rating downgrade, impact to the CIP Program, and the impact of the Pension Obligation Bond.

The presentation included the Project Schedule.

For the purposes of this presentation, the baseline project is \$480M high school replacement project funded in 2024.

- Baseline Project Complete in 2028
- Interim Project Complete in 2026
- Potential MSBA Project complete in 2033 if accepted in 2026 (based on MSBA acceptance in 2026) and 2039 (based on MSBA acceptance in 2031)
- Probability of being accepted into the MSBA is unknown at this time.

Bond Rating:

- Rating likely preserved with \$50M investment.
- Rating likely downgraded with an investment substantially more than \$50M.
- Approximate impact of a downgrade as a result of baseline project: \$26.17M.
- Implications on the CIP and Water & Sewer rates.
- Potential impacts on economic development activities and marketability.

Results of the Models:

- Project Cost & Escalation Model: Project gets more expensive in terms of both total cost and the project's share of the tax bill over time.
- Total Debt as a percentage of per Capita Income Model: Project gets less expensive in terms of the percentage of income that will be required to fund the Town's debt service.

Assumptions:

- Escalation: 5.5% and 4% annual increase for building costs. Borrowing Costs: 4.5% borrowing rate for AAA rated and 4.75% borrowing rate for AA+.
- MSBA reimbursement effective total reimbursement at 1%, 20% and 23%.
- Impact on Debt Schedule: existing debt plus any new debt resulting from a potential AHS Project. The debt service projections presented do not include future debt exclusions.
- Per Capita Income: 3.5% annual growth (based on DOR 15-year average of 3.52%).

Interim Plan Overview:

Develop an alternative that achieves the following: Manages costs and provides a bridge to a future project, provides the best opportunity to preserve the Town's bond rating, includes value that will be extended beyond the life of the existing building, short-term alleviation of overcrowding at a project range of \$50-60M.

- High-level conceptual plan intended to show order of magnitude of potential interim plan for AHS.
- Potential plan to bridge the gap between the existing building and a new building.
- Coincide with a process for continuing to submit Statement of Interest to MSBA.
- The plan if developed and approved would be funded over a 15-year borrowing schedule.
- Depending upon the final cost, the plan may preserve the Town's bond rating.
- If the Plan includes fields and other site improvements, approximately 49% of the total value of the plan will extend beyond the life of the existing school.
- The project has not been designed.
- Design funds would need to be approved by Town Meeting.

- Project would be further developed and managed by the AHS Building Committee.

Baseline Project: \$480M funded in 2024.

The presentation included information on the Escalation and Project Schedule and the impact on the CIP.

Preparing for a Potential Project – Fund Balance

- Andover’s current Free Cash a percentage of budget is within the town’s policies for reserve funds as a percentage of budget between 3-7% of budget.
- Andover’s Free Cash as a % of the budget has averaged 4.90% over the last 5 years.
- Increase Fund Balance to 10% of the operating budget, the approximate average of comparable AAA rating.
- The presentation does not include potential impacts to Education Plan.

Bond Rating- S&P Simulations. (presented by Patrick Lawlor)

- Town engaged in an exercise of four simulations (see presentation)
- Impact of downgrade on a High School Project - \$261,77,919.

Patrick Lawlor presented scenarios of the Bond Rating over the course of the CIP and its’ impact. The impact from borrowing costs would be about \$4.6M and will affect water & sewer costs and the actual debt service incurred.

Debt Profile and impact of Pension Obligation Bond: The POB has had a significant impact on our debt profile. In the peak year of the prior funding schedule, the required funding was \$42.9M including funding for the unfunded liability and normal costs of the pension; this would have fully funded the pension system by 2037. In the peak year of our current funding schedule, the required funding is 21.8M and includes funding for the unfunded liability, normal costs of the pension system, and funding for the POB reserve.

Bill Haskell: On preserving the Bond Rating (lowest being AA+) would that be the lowest? The Town Manager believes that based on the information they have now, they are comfortable it would just be one downgrade.

Annie Gilbert asked about the funding the CIP and if there were a downgrade, going forward year by year would you anticipate funding fewer CIP projects and maintaining the 5.72% funding model? The Town Manager replied that at 5.27% there are 3 parts to it. Article 5 (Free Cash) all of our existing debt and new non-exempt debt based on what is proposed and funded. Impact would be minimal in year 1 – over-time as the same projects cost more and the cap doesn’t go up, we would do less projects; except for Water and Sewer.

The Town Manager reviewed various scenarios, dates, total project cost, escalation costs used, MSBA funding, and AHS debt.

Interim Plan:

It is a short-term solution to overcrowding and like any plan, it would need approval of the Select Board to advance and more in-depth information. The alternate plan would manage costs and provide a bridge to a future project, provide the best opportunity to preserve the Town's bond rating, includes value that will be extended beyond the life of the existing building.

This plan has not gone through design development; however, the major share of the cost would be for module classrooms (leaving other spaces vacant and needed to be refit). Other costs include \$1M for the cafeteria, \$2.5M for furniture (which could be redistributed within district), \$1.75 M investment for mechanical systems that have exceeded their use of life , and \$2M for a security audit to implement that plan, \$2M for parking improvements, and \$3M for pavement. Total in the area of \$31M. Other items: \$6M to fund the field plateau with lighting (ADA compliant with soft costs). If needed, they can expand field offerings at Chandler Road and costs for bus transportation. Other allocations of funds from the Maintenance Reserve Funds (through CIP). This plan was designed as an interim plan (some items will need to be repaired)and improvements would need to be ADA compliant. The Town Manager said the interim plan would serve to bridge a gap to where the Town's overall indebtedness would change a bit and provide a short-term alleviation of overcrowding.

Tracey Spruce: What is the plan for security, and accessibility for ADA and those without disabilities in inclement weather? Janet Nicosia shared that modules are built to be fully assessable. The initial plan is that they would be in the parking lot next to the field house and connected to water and sewer. The security for movement to the main building from the modular classrooms would have to be addressed.

Brian Major: How many modular classrooms does this represent? Answer 22 classrooms. How do we improve the high school with the security and space issues, why do we complicate that with adding new fields and renovating fields that increases cost? The Town Manager said it would be an option that the community may or may not approve.

Janet Nicosia spoke about the parking lot and potential loss of spaces, so they would consider using West Middle School for some parking or using the fields at the front of AHS.

Annie Gilbert asked if the 22 modular classrooms would require additional teachers.

Dr. Parvey replied that they are taking teachers out of the building and putting them in modular classrooms, the teachers would move into the modular classrooms and the spaces could be repurposed; depends upon the enrollment each year. If our enrollment does not increase, there could be that type of expense if expanding spaces.

Chris Huntress asked about retrofitting the Collins Center. Janet Nicosia said the Collins Center is not very accessible and we do not have a good way to divide the Center, it does not have the clearance in the hallway to make it an accessible route. Certain items trigger the compliance code requirements.

Aaron Buzay asked if there was an immediate capacity issue or whether the modulars are being presented to add flexibility for an enrollment increase. Janet Nicosia said that the Educational Plan identified how many classrooms the high school is short using the current number of students. Will the modular classrooms alleviate the shortage? The size of the modulars include seven science classrooms to replace and retrofit existing science classrooms into regular classrooms.

Susan McCready said they have to take into account the amount of learning time required by the state and additional passing time (to modular classrooms) that would have an effect on the amount of learning time required.

Shannon Scully spoke about the appetite to stay under the \$6M investment to not trigger code requirements, what areas of AHS are not on the list and need improvement. Updates to the cooling and heating of the building is not on the list. The interim plan keeps the building minimally operational.

State Senator Barry Finegold asked why we are changing the process and not allowing the community to vote for this one way or the other. Melissa Danisch explained that we are not changing the process, we are only having a discussion.

Tracey Spruce thanked everyone who assembled this plan, but it cannot be lost to what it does not do.

The Town Manager said the Interim Plan is intended to serve as a bridge, the final plan has not been fully developed, designed or approved by the Town. A full-scope of finances will need to be conducted; another Quad Board Meeting scheduled for October.

Paula Colby Clements asked when we can fund a project this size and not affect the bond rating. The Town Manger said that it is unclear at this time, but it is not likely in the next five years. He continued that approximately 50% of our debt is supposed to be retired in the next decade. If we were accepted by MSBA in January of 2026, construction would start in 2030 or 2031, which would get us closer to funding a project of this size.

Mark Johnson said that the AHS Bldg. Committee has voted to ask Town Meeting for a vote to approve \$1.3M for a schematic design to help make a calculated decision, on how to pay for AHS and the impact on taxpayers. They asked for more information especially on other issues related to the debt ceiling; the Board has to have that discussion and reflect on tonight's information. There should be a timeline for the \$1.3M and if the project will proceed. Melissa Danisch said having the follow-up conversation on the interim plan would drive the process. Tracey Spruce said we have always gone to Town Meeting for a vote.

The Town Manager suggested scheduling another Quad Board Meeting in October to specifically discuss the interim plan as it relates to the AHS Educational Plan. Melissa Danisch said it has been asked of the Board to call a Special Town Meeting for a vote from residents.

Public Comment:

Jeff Hamilton, 3 Blueberry Circle: Saw information about cost if the MSBA approved plans in different years, but did not see information if we delayed the project and continued to be denied by the state. Why don't we have a scenario where we delay the project and the State does not approve the proposal. If we delay the program the interim plan is absurd relative to exterior buildings, and security would be a concern, we need more information for cost of the interim plan. Plan does not provide full information on what the cost will be, missing a lot of information.

Joe Ponti, 10 Marion Avenue – Would like to see a table showing assessed values and what the tax bill would be for that year provided at the next meeting. What is the average size of the classrooms at AHS now? Dr. Parvey said the average is 22 students; 83 Regular Classrooms and about 15 Special Program Classrooms (1700 students).

Dara Obbard, 6 Marie Drive – Is disappointed that we are not going through with the Special Town Meeting for the \$1.3M and not allowing the Building Committee's hard work to come to a public vote. Many people are concerned about the cost to their taxes. It would be good to understand what the per capita impact is on waiting and if you are on a fixed income, and the impact of a lower bond rating.

Joel Blumstein, Athena Circle Chair of the Building Committee for West El/Shawsheen Project. - Has some major reservations about the interim plan. Trying to avoid code-compliance to not trigger higher costs, does not sit well with him. Andover's theoretically, reimbursement rate with MSBA is about 45%, the actual for the Bancroft Project was around 32%, West El Project is 26.2%. The likelihood of Andover getting into the MSBA Reimbursement Plan is 2031.

Krista DiNapoli, Summer Street- The Building Committee, MSBA, and our architects have put a great deal of work into this project. Do the Schematic Design to determine what the figures are.

Shannon Scully said the AHS Building Committee did an evaluation of what could be done at various levels of investment. In 2018, they reached the conclusion that it was not financially responsible to solve both educational and environmental issues and it was determined that the AHS Building Committee put forward an option that solves the larger problems of the school.

Ted Teichert, 44 Linwood Street- At \$480M and 4% with no reimbursement from MSBA, is this a financially responsible project? The Town Manager thinks that it is different at what lens you are looking at this through; cost/ meeting needs of students, etc.

Kevin Coffey, 1 Stafford Lane - In spite of attending many meetings, it is difficult to understand a range of options and associated costs, it would be a property tax increase of about 20%. There is serious work to be done at AHS, but the numbers presented are high.

IV. Adjourn:

At 10:51 PM on a motion by Alex Vispoli and seconded by Laura Gregory the Select Board voted 5-0 to adjourn from the Quad Board Meeting. Roll call: L. Gregory-Y, A. Gilbert-Y, A. Vispoli-Y, C. Huntress-Y, Melissa Danisch-Y. Motion passes 5-0.

On a motion by Tracey Spruce and seconded by Lauren Conoscenti, the Andover School Committee voted 5-0 to adjourn. Roll call: T. Spruce-Y, E. DiCesaro-Y, L. Conoscenti-Y, Susan McCready-Y, S. Wright-Y. Motion passes 5-0.

On a motion by Brian Major and seconded by Paula Colby-Clements, the Finance Committee voted 7-0 to adjourn. Roll call: B. Major-Y, Aaron Buzay-Y, Yican Cao-Y, P. MacKay-Y, A. McBrien-Y, Paul Haskell-Y, P. Colby-Clements-Y.

Shannon Scully moved for the AHS Building Committee to adjourn. Motion seconded by Janet Nicosia and voted to approve.

The Meeting adjourned at 8:52 pm

Respectfully submitted,
Dee DeLorenzo
Recording Secretary

Presentation: AHS Building Project Financial Considerations

Quad Board Meeting
Select Board - Finance Committee
School Committee-AHS Building Committee
Wednesday, October 18, 2023
Memorial Hall Library
Andover, Massachusetts

I. Call to Order

Select Board Chair, Melissa Danisch called the Triboard Meeting to order at 6:30 PM in the Meeting Room at Memorial Hall Library. Present from the Select Board: Laura Gregory, Alex Vispoli, Melissa Danisch, Chris Huntress, and Annie Gilbert.

Others in Attendance: Town Manager Andrew Flanagan, Deputy Town Manager Mike Lindstrom, CFO Patrick Lawlor.

School Committee Chair Tracey Spruce called the School Committee to order. Members present: Susan McCready, Lauren Conoscenti, Sandis Wright Emily DiCesaro. Others in attendance: Superintendent Dr. Magda Parvey and Asst. Superintendent for Finance and Administration Keith Taverna.

Finance Committee Chair Paula Colby-Clements called the Finance Committee to order. Members in attendance: Andy McBrien, Paul MacKay, Yican Cao, Aaron Buzay, William Haskell, Brian Major, and Ken Russo.

AHS Building Committee: Chair, Mark Johnson Members: Nancy Kimelman, Shannon Scully, Scott Darlington, Susan McCready, Tracey Spruce, Lauren Conoscenti, Mike Prout, Taylor Webber, Dr. Magda Parvey, Janet Nicosia, Keith Taverna.

II. Opening Ceremonies/Moment of Silence/Pledge of Allegiance

The meeting began with a Moment of Silence followed by a Salute to the Flag.

III. Regular Business APS Educational Impact

Dr. Magda Parvey, Superintendent of Schools, and Keith Taverna, Assistant Superintendent of Finance and Administration, provided information on the process and overview which included the Interim Approach Process, Importance of Building Environment, space issue, the District Education Plan as well as the potential educational impacts of various alternatives, including a new building and an interim project.

Process & Overview

The interim approach was requested by the Select Board and Finance Committee Chairs in August of this. Year. The Town Manager reviewed the alternative interim options for AHS that does not involve a downgrade to the Town's bond rating (approximate \$50M-\$60M).

The Town Manager and Facilities Chair met with the Owners Project Manager to review the June 14, 2023 AHS Building Committee meeting cost estimates and analysis of the modular options to explore. In September, the Architect provided a rough estimate of recommendations for modular learning spaces (focused on Science and Educational spaces) which can be added to the existing AHS site staying within budget parameters.

Three internal meetings were held to review the proposed interim approach based on information provided by the Owners Project Manager and the architect. Two meetings were held to preview the Quad Board presentation financial modeling and the final overview of certain details. The interim approach was presented at the Quad Board Meeting held on September 27, 2023.

Why a new building? Building Environment: Impacts to Students & Faculty
Thermal Comfort - studies have shown that thermal health can influence academic performance in the classroom.

Classroom Acoustics: Research has shown that chronic exposures to internal and external sources of noise can lead to deficits in test scores.

Lighting and Access to Natural Light – studies have shown that access to green views through windows helps students to recover faster from stress and mental fatigue and score higher on tests of attentional functioning. Lighting also helps to keep circadian sleep-wake cycles in proper alignment and influences basic cognitive processes.

Air Quality: Improving Indoor Environmental Quality can positively affect cognitive function outcomes (decision making, attention, concentration, and memory).
Examples of a healthy classroom were shown within the presentation.

Education Plan: Core Education Principles: Universal Design (UDL) & Teacher Collaboration.

UDL: Supportive tools, strategies and technologies for all students. A fully accessible building with adaptive gym equipment for students with a physical handicap and a robust space for special education classes and programming.

Teacher Collaboration: Increase teacher collaboration to enhance instruction and professional practice at AHS. Offer more staff collaboration areas and support and accommodate faculty groups with properly outfitted gathering spaces for meetings and trainings. Designated spaces for student office hours.

9th Grade Academy: The 9th Grade Academy space will provide students with a sense of belonging and a team-like environment that offers a thoughtful and well-planned integration into the high school experience. It also offers students core academic content and specialist classes to accommodate grade-level expectations and supports for students' academic, adolescent and personal development. A 9th Grade Academy is the way that you make a large school small and helps students transition into a larger school and have academic success.

Dr. Parvey spoke about the 21st Century Learning and Education visioning Concepts: Watering Hole to come together to exchange ideas. Mountain Top to celebrate learning. Sandpit to experiment and come out with creative ideas. Cave to give students to withdraw and work on their own, and Campfire to share stories and exchange ideas.

The Education Plan defines spaces:

Features: Four interdisciplinary Pods of Classrooms including space for a 9th Grade Academy. Two indoor and two outdoor flex spaces for eating and meeting. Library Media Center, Arts with a Black Box Theater that supports the arts programming, Gym/PE spaces. A Career Tech Center with robotics, engineering, and innovation labs (STEM).

Priorities:

Engaging learners through innovative instruction that aligns with current standards.
Fostering student/teacher relationships through collaboration
Creating dynamic spaces for multiple groups and uses.
Launching growth of similar smaller school communities that connect all.

Inspiration: Where students can perform in a smaller setting, host guest lectures and compete in their Robotics competitions in a designated space.

Efforts by the Andover team to devise the next school that will meet the needs of the students and staff.

Questions:

When the Educational Plan was developed was it developed in abstract not considering facilities or developed to build new facilities. *It was designed to reflect what the actual needs are, not an abstract plan.*

Dr. Parvey shared a video created by AHS students that shows their current educational space(s) and needs for the future to collaborate, have natural light, more meeting space for students/teachers and storage areas.

Slides of the existing overcrowded & undersized classroom spaces were displayed including those that do not meet the standards for High School space requirements including the Science Classrooms and Labs and the Special Needs spaces (less than 50% of recommended space per education program). In 2010, space requirement guidelines for Science Labs were updated by MSBA; AHS spaces do not currently meet these guidelines.

Spaces in the Career Tech/Stem Spaces, cafeteria and the Library Media Center are also undersized.

Space Limitations on Class Offerings:

~Undersized classrooms limit student capacity in special programs such as academic support, English learning and electives.

~Lack of small or large group meeting spaces limit the ability for experimental learning opportunities, counseling programs, special programs to meet student demands such as

robotics, business club, senior projects, tutoring sessions, student government and guest speakers. They constantly have to choose priorities and competing teams because of the space limitations.

Educational best practice dictates that schools open at 85%. We should be designing operating the building at 85% capacity on a daily base and that is not the case. The 2023 - 20234 enrollment actual is 1652 students at this time.

Keith Taverna provided information on space utilization.

<https://aps1.net/DocumentCenter/View/7840/2016-Comprehensive-Facility> Plan

In 20216, MGT Consultants completed a space utilization report (see link above) that identified AHS having a space utilization rate of 117% based on target of 75% building utilization. At that time, AHS had an enrollment of 1,782 students. In September 2023 MGT Consultants identified AHS with a space that drops to a utilization of 108%. This utilization rate is lowered due to lower enrollment as well as creating additional special education and learning language programming which have been added by converting office and storage spaces, although they are undersized.

A demographic study was completed in in 2018 and updated in 2022. The forecast enrollment based on this study in 2032-2033 is 1,715 students. It does not include future development(s) in town. The 1,900 student is based on a recommendation from the Demographic Study completed as part of the building project feasibility study for future enrollment growth and flexibility for a building which will last 50+ years.

A chart highlighting the existing space and space for the proposed building was explained by Mr. Taverna. The dining and food service area and auditorium areas were also included in the chart. This was followed by a chart on the existing AHS space utilization by existing block periods. The makeshift learning spaces and completion of space mining (taking an existing space and turning it into two spaces) was included in the presentation

Currently, there are 19 special education spaces that are all undersized; in the new building there would be 36 spaces per their education plan for a new Andover High School.

A new building would solve of the space challenges. The preliminary interim approach and outstanding challenges were explained by Mr. Taverna. Many spaces would remain undersized and present challenges in the academic day.

Building challenges from a physical space environment and limitations: There are uninsulated areas in the building, the building does not meet current building codes and is not fully accessible, classrooms are undersized with poor natural light, acoustics and thermal comfort (inconsistent temperatures). The cafeteria is too small for the four lunch periods.

There needs to be a guide as to what the assumptions are and the amount of money it would not exceed and not to trigger a code upgrade. The roof warranty expires in 2028 and would cost \$7-8M to fix, the ADA upgrades were missed and we may be forced to do these. Upgrading AHS has been looked at for years and we need to be prepared for what

the cost would be. It is not a simple process, there are a lot of pieces that have to be looked at to improve the education and there are limitations on what the amount of money that can be spent. We have to make sure that we are providing the best services we can education wise for our students; we need to improve the educational experience.

Public comment:

Joe Ponte, 10 Marilyn Ave asked if any benchmarking has been done and assuming we do something what metrics will be put in place to ensure the taxpayers will get the best return on their investment.

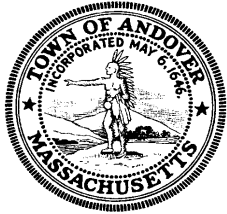
Mike Meyers, South Main Street – there is no question a new building is needed but MSBA does not support what is included in the presentation. The building is in general good condition and the environment is good and conducive to learning and classrooms adequately sized for the enrollment and educational program. He also spoke about the occurrence of the debt and adding in the various projects. He does not know how the average taxpayer will be able to handle the increase in taxes; please pay attention to the affordability. Other residents spoke about the cost and how the vote and will of the people will not be served while some residents spoke about the need for additional space and improvements in the heating/cooling of the school.

IV. Adjourn

At 9:00 PM the Quad Board on a motion by Chris Huntress and seconded by Annie Gilbert the meeting was adjourned.

Respectfully submitted,
Dee DeLorenzo
Recording Secretary

Oct. 18 2023



Select Board Meeting

Wednesday, November 29, 2023

7:00 PM

School Committee Room, School Administration Building
30 Whittier Court, Andover, MA 01810

I. Call to Order – 7:00 P.M.

The Chair, Melissa Danisch, called the Select Board Meeting of Wednesday, November 29, 2023 to order at 7:00 PM.

Other Members in attendance: Chris Huntress, Alex Vispoli.

Others in attendance: Town Manager Andrew Flanagan, Deputy Town Manager Mike Lindstrom, Deputy Town Manager/Town Clerk Austin Simko, CFO Patrick Lawlor, and Town Counsel Doug Heim.

II. Opening Ceremonies

A. Moment of Silence/Pledge of Allegiance

The meeting began with a Moment of Silence followed by the Pledge of Allegiance.

III. Communications/Announcements/Liaison Reports

The Town Manager announced that Holiday Happenings will be held on Friday, December 8th. Holiday Happenings is a great community event and celebration with coordination and participation from many of the Town Departments. Andrew also provided an update on hiring process for a Human Resource Director and Fire Chief; with the goal to have the new Fire Chief on board by April 1, 2024 (90 -day transition period) and a Human Resource Director later this month.

Mike Lindstrom reported on the parking lot spaces behind Old Town Hall. Line stripping for the parking spaces has been done. A lot of work has been done improving the pedestrian pathways and the flex space behind Old Town Hall is almost complete except for the plantings. Also, the Tree Committee will have their Kick off Meeting at 3:00 PM on December 13th.

Austin Simko reported that the MBTA Group will hold their kickoff meeting tomorrow night at 6:45 PM at Memorial Hall Library. . Austin thanked everyone in the community and all involved in the Special Town Meeting that was successful with over 2,000 people attending.

Chris Huntress thanked Austin and Town Moderator Sheila Doherty for putting the meeting together on short notice. The electronic voting was successful.

Alex Vispoli also commended the staff for how they handled the meeting noting that the electronic voting went well.

Thanks to the Fire Fighter's Association for a great Holiday Parade held this past Sunday which was very well attended by the community.

IV. Citizens Petitions and Presentations

Kathy Grant, Morton Street said Article 1 was overwhelming approved with 1,900 people in attendance. She contacted Melissa Danish and the Town Manager to put the Question on the ballot tonight, if not she is requesting it be brought up at the next Select Board's Meeting. She provided the petition to the Select Board Chair, requesting it be on the ballot for March 26, 2024.

Steve Walther, Morton St. is advocating for some action on Option 1 for AHS.

Don Schroeder, Haggetts Pond Road along with several other residents, spoke about the Haggetts Pond trail and their appreciation for the time that has been given to this item. The residents are asking that the trail not be paved but instead that crushed stone or stone dust be used which is cheaper to install and repair. He presented a petition to the Chair with the signatures received. Mike Lindstrom said another public hearing is being held this week.

George Thorlin of 155 Summer Street is asking the Select Board to provide updated information on the roadways where the speed has been rescinded with enough information to the residents.

Mike Meyers, South Main Street, congratulated the Board on the Special Town Meeting held on November 20th and congratulated the Town Manager and his team on the Christmas lights downtown. He also spoke about Articles 7A for building a new high school, and Article 7B to approve funds to renovate. The majority of the Building Committee has an overwhelming number of proponents for building a new high school. He asked what the process is now that the article 7A has passed. Additional members were added to the Town Building Committee which now has nine members. Five of the nine members supported 7A. He is concerned with the impartiality of the group. They need all of the 7B options. He wants to know what the process is once 7B is presented. He said only the School Committee can add members to the Building Committee.

Joe Albuquerque, 197 Greenwood Road thanked Mr. Huntress and Ms. Gilbert for their public service on the Select Board and for their compassion, love and friendship. He encourages the Select Board to embrace democracy and the will of Town Meeting voters on the 2024 local election; let the voter be heard. Put the ballot question (AHS) on the 2024 Ballot Election. He would like to see good solutions and options for 7B. The permanent Town Building Committee should have open meetings to make sure it is a successful process.

Steve Whalther, Morton Street thinks we should respect the results of Town Meeting and would like to see the article vote not ignored and to be put before the voters.

Rosemary Halloran, Haggetts Pond Road, provided updates to the Haggetts Pond Trail from a citizens perspective. She believes we have to look for the lowest impact on the environment. A stone dust trail is cheaper in the long run. A suggestion was made to have a citizen group to be involved in the process. They are also concerned about the trees that will be removed and adding 35-parking spaces. Where was the decision by the Select Board to change the usage of this public space. Mike Lindstrom said a site walk

meeting will be held this Friday and invites the public to attend. A follow-up meeting will be held on January 4th at Five Campanelli Way.

Jesse Jacob, One Paddock Road provided documentation to the Board on topics relative to the speed limits in Andover. He is requesting the eight special speed limit regulations be rescinded and to improve the data which is unusable. Several residents also spoke about this topic. Mike Lindstrom provided a response on the process and status of the speed limits on Andover roads.

Michael Silverman, 54 Tewksbury Street, commented on the speed limits in Town. He asking for more communication from the town on the status of the change in speed limits in town.

Kristen Wise, Inman Lane, asked the Board to do a retrospective on the process that is happening with the AHS Building Committee. The Board needs to understand what went wrong along the way with the submissions sent to the State that weren't accepted. It would be important to have a perspective of the people who were involved in this process to figure out where we went off track, what was done well and what wasn't.

V. **Public Hearings**

[Capital Improvement Program FY2025-2029](#)

A. (First Reading)

The Town Manager presented his recommended Capital Improvement Program. (CIP) The total target for the FY-2025 CIP is \$17,954,126 with funding from General Fund Revenue, General Fund borrowing, Use of Free Cash, Special Dedicated Funds and Water/Sewer Enterprise Funds. He will present the CIP again at the December 6th Triboard Meeting and then it will come before the Select Board for approval.

Remarks: Chris Huntress asked they find out what the demand is for the music room that was supposed to be built for the Andover Youth Center that were never built. Mike Lindstrom said they are working with the AYS to explore bring in more music programming than before and determine the need for the next fall program and if the ventilation for the small rooms are being looked at.

Mr. Huntress also asked about funds to clean up after the September 8th storm that took out many trees. It will take some professional work to clear the downed trees. The Town Manager said they asked Bob Douglas to find out what the actual cost would be. Chris said moving forward we should consider allocating funding for storm events and regular replacing/reforesting some areas.

Joe Albuquerque, 197 Greenwood Road, asked a question about Chapter 90 funds and how it relates to the new Ballardvale Fire Station. It is his understanding that funds from Chapter 90 were to be used for the roadwork. If that is true, how much will it cost for the road work and is it still going to be Chapter 90 money? The Town Manager will look into the answer and get back to him.

Mr. Albuquerque also asked about the CIP funds related to accessing the Merrimack River (for emergency vehicles) Between the DPW are and the Vocational School. There is still

no boat ramp for the Fire Department to get onto the Merrimack River, are there any funds left to do the emergency vehicle ramp? Mike Lindstrom said that they previously funded \$510,000 for construction at town meeting. They have been working on the layout but the build out Greater Lawrence has done has delayed our plans. Andover's plans are in-line and have conservation approval for the public safety launch. In term of permitting it has been extremely frustrating. There will be parking and a turn-around area.

Additionally, Joe Albuquerque asked about the funding for the Fish Brook Pumping station and said it is important that the Town Manager provide an overview of what the debt looks like over 30-years.

The Materials Handling Facility is not in West Andover anymore, is that part of the CIP or contracted out? It was under DPW last year. The Town Manager said it will be part of the operating budget but there is nothing being recommended for next year.

Kevin Coffey, One Stafford Lane requested a 30-year forecast of the big-ticket items that would show the 'rough shape' of the really big things out in the future. He feels the CIP funds especially the maintenance money should be higher than what it has been.

Patrick Lawlor said that on page 6 of the CIP, the Town Manager's letter shows yearly increases for the CIP. Increases from capital projects from taxation over \$1M is in the General Fund Revenue.

VI. Regular Business

A. Alcoholic Beverages License – Location Closure Update

Board to receive update from Liquor Bros, LLC, dba Elm Square Liquors Co., pursuant to Select Board Regulation XI.2.C.5, regarding location closure. Austin Simko said no action is required by the Board at this time. They obtained a lease to move to a change of location and submitted a request, but it didn't work out so they don't have a new location at this point. Austin explained what the process would be for a change of location under their license, the renewal will be for January 1st. They have been in discussions to find a location in Andover as soon as possible.

B. Acceptance of Grant of Water Line Easement and Declaration of Restrictions

Board to consider voting to accept and sign a Grant of Water Line Easement and Declaration of Restrictions at Weeping Willow Estates Subdivision 95-97 Chandler Road, 2-8 and 10 Weeping Willow Drive, Andover, MA. Chris Huntress asked that they check to that there are no other easements.

Alex Vispoli moved to accept and sign a Grant of Water Line Easement and Declaration of Restrictions at Weeping Willow Estates Subdivision 95-97 Chandler Road, 2-8 and 10 Weeping Willow Drive, Andover, MA. Motion seconded by Chris Huntress and voted 3-0 to approve.

C. Acceptance of Gift from the Estate of George F. Layden

Board to vote to accept a gift from the Estate of George F. Layden.

Chris Huntress moved to accept a gift from the Estate of George F. Layden. Motion seconded by Alex Vispoli and voted 3-0 to approve.

D. Andover Means Tested Senior Tax Exemption

Tristen Hoare, Chief Assessor spoke to the Board to consider voting to set the exemption amount for the Andover Means Tested Senior Tax Exemption as voted in the 2018 ATM Article 37. The exemption may be up to a 100% match but no less than a 50% match of the amount of the circuit breaker income tax credit that the applicants received in the previous year. The Home Rule was signed into law on Oct 5, 2018 for a FY-2020 implementation and signed by the Governor to extend to 2027.

Qualification Criteria –

~The Applicant or joint owner must have owned an Andover property as their domicile for the last 10 years.

~The Applicant need to be 65 by December, 2022 and if jointly owned, the joint owner must have been at least 60 by December 2022.

~The Applicant needed to have filed a 2022 MA State Income Tax return and received the MA State Income Circuit Breaker Tax Credit.

The exemption granted in Andover on the real estate tax would be equal to a minimum of 50% to a maximum of 100% of the MA Circuit Breaker Income Tax Credit the applicant earned on the MA Income Tax Filing. Annually, the Select Board will vote on the percentage of the Circuit Breaker Tax Credit that will be exempted for that fiscal year. The minimum of 50% to a maximum of 100% of that circuit breaker.

Assuming the Select Board votes to exempt 100% of the Circuit Breaker credit and keep the same shift adoption established in FY23, the estimated residential tax rate would increase by .01. Assuming a residential value of \$957,210, the full 100% exemption would add \$9.57 in additional tax to fund the exemption.

Patrick Lawlor said the number presented is less than what was presented in Town Meeting when discussed in 2018. The legislature Circuit Breaker for 2023 returns (next year) is more than doubled which the Governor signed into law this past summer.

Chris Huntress said projections are higher; are fewer people taking advantage of the credit? Patrick Lawlor said people are opting not to file, and some of the assessed value changes and will impact the number of people who file. They do work closely with Elder Services on this and the Assessor's Office spends a great deal of time working on this.

Alex Vispoli moved to establish the Andover Means Tested Senior Tax Exemption for FY2024 to be 100 % of the Massachusetts Income Tax Circuit Breaker tax credit earned on their 2022 tax filing. Motion seconded by Chris Huntress and voted 3-0 to approve.

VII. Public Hearings

A. [Fiscal Year 2024 Tax Classification Hearing – First Reading](#)

Board to discuss classification and taxation of all property in Town.

Patrick Lawlor noted that there is an enormous of data in the presentation. You will see a residential value increase of over \$98,000 for the average single-family home. Since FY-2022 the average home has increased by in value by \$262,000 and as they look at the presentation we often look at what will be the average tax bill and always look at the 5-year- 10-year average, but we came in under 3.13% this year. The third issuance for West Elem School and will have additional impact in the next two fiscal years.

Chief Assessor Tristan Hoare presented the tax classification information to the Board.
The four votes to be taken by the Select Board

1. Vote of a residential factor
2. Vote of an Open Space discount
3. Vote of a residential exemption
4. Vote of a commercial exemption.

The presentation included comparisons of the FY-23-FY-24 classes value amounts for 2023-and 2024 and the percentage of change.

Total	FY2023	\$10,932,289,574	
	FY 2024	\$355,152,574	.3% increase

The presentation includes class comparisons from 2020 through 2024.

Overall residential is \$10,062,323,535 for \$10.8% increase.

Commercial value for FY-2024 is \$766,160,279 a change of +12.5%.

Industrial value of \$967,160,279 for a change of 16.8% change,

Personal property value for 2024 is \$355,152,574, a change of .3%.

Total value of the town for 2024:	\$12,150,783,188
Total Levy value amount	\$182,740,7788.32
Levy/value x 1,000 Basic tax rate of	\$15.04

Dividing the Town into classes Yields. (See chart)

Residential	\$10,062,323,535	82.8%
Open Space	0.0%	0%
Commercial	\$766,160,279	6.3%
Industrial	\$967,800	7.9%
Personal Property	\$355,152,574	2.9%

Presentation also included a Review of the Classification Shifts for residential, and Commercial Industrial rate for 2024.

Most uniform shift is 169.5

Residential rate of \$12.88 – CIP Rate \$25.49

For the vote- Residential Factor of 85.75 For the vote: Residential factor of 85.5751

Tristen provided a 2023 tax comparison chart of the various shifts from 168 to a 174 shift.

The Department of Revenue requests that Open Space parcels were reviewed for FY202 be reclassified as vacant land.

The Select Board will vote on the second reading at their next meeting.

VIII. Consent Agenda

Chris Huntress to approve the appointments by the Town Manager as listed in the Consent Agenda. Motion seconded by Alex Vispoli and voted 3-0 to approve.

A. Appointments by the Town Manager

Board to vote that the following appointments by the Town Manager be approved.

Department	Name	Position	Rate/Term	Date of Hire
Memorial Hall Library	Abigail Hurley <i>(Jacob Murphy)</i>	Library Aide	\$15.00/hr	11/30/2023
Memorial Hall Library	James H. Morris <i>(Bonney Streeter)</i>	Library Aide	\$15.00/hr	11/30/2023
Department of Public Works	Apostolos Pastos <i>(Steven Ballard)</i>	Vehicle Maintenance Mechanic	\$32.55/hr	12/11/2023
Planning Board	Ann Knowles	Associate Member	Term Expires 06/30/2024	11/30/2023
Planning Board	Morgan von Prella Pecelli	Member	Term Expires 06/30/2024	11/30/2023
Permanent Town Building Advisory Committee	Patrick Lawlor	Member	Term Expires 06/30/2026	11/30/2023
West Elementary School Building Committee	Keith Taverna	Member		11/30/2023

IX. 2024 Select Board Meetings

A. Board to consider voting to accept the following Select Board Meeting Schedule:
 Alex Vispoli moved for the Select Board to accept the meeting date of March 4, 2024
 Motion seconded by Chris Huntress and voted 3-0 to approve.

X. Adjourn

At 9:12 PM on a motion by Chris Huntress and seconded by Alex Vispoli the Select Board voted 3-0 to adjourn the meeting of Wednesday, November 29, 2023.

Respectfully submitted

Dee DeLorenzo
 Recording Secretary

Select Board Meeting
December 11, 2023
School Committee Room
School Administration Building
30 Whittier Court, Andover, MA 01810

I. Call to Order – 7:00 P.M.

The Chair, Melissa Danisch called the Select Board to order at 7:00 PM.

Members in attendance: Annie Gilbert, Alex Vispoli and Chris Huntress, and Laura Gregory participated via Zoom.

Others in attendance: Town Manager, Andrew Flanagan, Deputy Town Manager, Mike Lindstrom, Asst. Town Manager/Town Clerk, Austin Simko and Chief Administrative and Town Clerk Patrick Lawlor, and Town Counsel Douglas Heim.

II. Opening Ceremonies

A. Moment of Silence/Pledge of Allegiance

The meeting began with a Moment of Silence followed by the Pledge of Allegiance.

III. Communications/Announcements/Liaison Reports

Alex Vispoli gave a shout out to everyone who helped with Holiday Happenings held on Friday night at the Youth Center and the Robb Center. The Town manager reported that this was the 6th year since the Town has taken over Holiday Happenings and he thanked everyone in the Town Departments for their assistance and all of the families who attended the event.

Mike Lindstrom reported that they heard back from Mass DOT with another signed group of special regulated speed zones that have now moved into the 25-mph category. They received official approval on Argilla Road, Woburn Street, Ballardvale Road, Beacon Street, Central Street and Brundrett Ave; the regulated speed zone signs will be coming soon.

Patrick Lawlor provided an update on the license renewal hearing with Verizon. Held in August. He and Attorney August have met with Verizon and things are moving along well. and are positive about the opportunities they can work into this deal. They are for waiting approval from the corporate office on the next draft.

Austin Simko provided the following updates: The MBTA Communities Zoning is holding a Forum at MHL at 7:00 PM this Wednesday. The working group is calibrating where the zoning changes will be made and looking at the actual parameters and acres of each zone and district.

Austin also reported on MGL General Law Chapter 38 stating that the Select Board reviewed and approved past Executive Session Minutes and voted to release some on conditions of redactions at their last meeting on December 4, 2023. A summary of those action swill be attached to the minutes of tonight's meeting.

IV. Citizen Petitions and Presentations

Many members of the community came forward and expressed their concern with the proposed paving of the Haggetts Pond Rail Trail with asphalt stating that it would be better to use crushed stone or stone dust. They are concerned about the possible effects on the drinking water if asphalt is used. Don Schroeder of Haggetts Pond Road gave a presentation to the Board on the cost of paving the trail and have not yet heard the findings from the Commission on Disabilities. He also provided the pros and cons of stone dust vs asphalt (petroleum product). Keith Rogers, 236 Haggetts Pond Road asked questions about the information on the plan put out by the Town Manager. Haggetts Pond Rail Trail is both unique and special. The Chair thanked the residents for their input

V. Regular Business

A. Review of November 20, 2023 Special Town Meeting

Board to discuss articles approved at the 11/20/23 Special Town Meeting.

Article I: Citizen Petition to see if the Town will authorize the Select Board to add the following non-binding ballot question related to open town meeting for the next local town election. The ballot question was read at Town Meeting with a Yes or No response in favor of keeping the Town's current form of Town Meeting. There were questions about Article I in terms of enforceability. Town Counsel said this was something that should be taken up at the Annual Town Meeting. A vote was taken but it would not be binding. An overwhelming number of residents voted that they would like this on the ballot. To move forward, it is important that it we respect that vote and it be done in the proper forum (Annual Town Meeting).

Alex Vispoli asked Town Counsel if we need a Special or Annual Town Meeting. Town Counsel said that primary issue is that Chapter 53 Section 18A doesn't allow for non-binding public policy to be placed on a ballot for a special Town Meeting. It can be put on an Annual Town Meeting for a vote and a petition can be presented to the Select Board by a resident with signed by 10% of the voters. The Select Board had many questions about the process, the language in the article, and how to proceed forward. Town Counsel spoke about the change to Article I that the Select Board can consider

B. Long Term Borrowing

Board to vote to approve long term borrowing.

Patrick Lawlor reported that the town went out to borrow \$55 M and ended up with the most competitive bid process resulting in a net interest for the bonds of 3.95%. They received 3.8M in bond premium bringing the bond down to \$55M with the biggest issuance for West Elementary.

C. [FY2025-FY2029 Capital Improvement Program \(2nd Reading\)](#)

Select Board to vote to accept the Town Manager’s Recommended CIP. Board to receive preliminary FY2025 revenue and expense summary. This is the second reading of the FY2025-2029 CIP. The Town Manager said the project cost of the CIP is \$12,949,500. The Town Manager provided a review of the recent Triboard Meeting. The target for the CIP is 5.75%. In addition, to the CIP review the Town Manager talked about the budget with a preliminary overview of revenues and expenditures.

VI. Consent Agenda

A. Appointments by the Town Manager

Board to vote that the following appointments by the Town Manager be approved.

Annie Gilbert moved to approve the Consent Agenda as presented. Motion seconded by Alex Vispoli. Roll call vote: A. Gilbert-Y, A. Vispoli-Y, M. Danisch-Y, C. Huntress-Y, L. Gregory-Y. Motion passes 5-0.

Department	Name	Position	Rate/Term	Date of Hire
Community Development and Planning	Everett Collupy	Alternate Electrical Inspector	\$40.00/hr	12/12/2023
Permanent Town Building Advisory Committee	Keith Taverna	Administrative Representative	Term Expires 06/30/2025	12/12/2023

VII. Adjourn

At 8:55 PM on a motion by Annie Gilbert and seconded by Chris Huntress and voted 5-0 to approve. Roll call vote: A. Gilbert-Y, A. Vispoli-Y, M. Danisch-Y, C. Huntress-Y, L. Gregory-Y. Motion passes 5-0.

Respectfully submitted

Dee DeLorenzo
Recording Secretary