



TOWN OF WINCHENDON
Town Offices
109 Front Street, Dept. 1
Winchendon, MA 01475
(978) 297-0085 Phone
(978) 297-1616 Fax

SPECIAL ONE-DAY LICENSE APPLICATION

FEE: \$35.00 Wine and Malt - \$60.00 All Alcohol

Date: 8-31-2023

The undersigned hereby applies for a Special One-Day License in accordance with the provisions of the Statutes relating thereto:

PREMISES TO BE LICENSED: Fall Festival

NAME: Wendy Stevens

COMPANY: Coldbrook Springs Winery

ADDRESS: 905 Old Coldbrook Rd, Barre, MA 01005

TELEPHONE: [REDACTED] 01 [REDACTED]

DATE(S) OF EVENT: October 7, 2023

HOURS OF OPERATION: 10am - 7pm

DESCRIPTION OF EVENT - include floor plan with estimated number of guests and plans for parking: _____

License is for the Sale of:
All Alcoholic Beverages _____
Wine & Malt Beverages Only _____
Wine Only _____
Malt Beverages Only _____

The Licensed Activity
or Enterprise is:
for profit/other _____
non-profit _____

Yes, I have contacted the Fire Chief or the Building Inspector to begin the process of obtaining a "Certificate of Inspection," if it is determined that one is necessary.

FOR OFFICE USE ONLY:

Date of Board of Selectmen's Meeting: _____ Approved Denied



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**NECESSARY DOCUMENTS TO PROCESS
SPECIAL ONE-DAY LIQUOR LICENSE APPLICATION
Town of Winchendon**

Attached you will find the following documents regarding Special One-Day Licenses for the sale of Wine & Malt/All Alcoholic Beverages pursuant to Massachusetts General Laws, Chapter 138, Section 14.

General Information Sheet

Please be sure to read this information carefully. This document outlines the general responsibilities and guidelines for any person who wishes to sell alcoholic beverages, as well as the procedures to be followed when applying for a Special One-Day License.

Documents to be returned to the Selectmen's Office

Application

The application must be submitted to the Selectmen's Office at least four weeks prior to the scheduled event. The application will then be forwarded to Department Heads for their review and approval.

Liability Disclaimer – must be signed by the person who will assume responsibility

This Disclaimer outlines the potential liability for injuries and damages to the persons served or to others who are injured or damaged by the persons served.

\$35.00/\$60.00 License Fee - made payable to the "Town of Winchendon".

*Yes, I have contacted the Fire Chief or the Building Inspector to determine whether or not a "Certificate of Inspection" is needed. - Building Comm. says not needed under 200 sq. ft.

Once the above documents are completed and returned to the Selectmen's Office, a hearing will then be scheduled before the Board of Selectmen.

If you have any questions, please contact the Selectmen's Office at 978-297-0085.



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**TOWN OF WINCHENDON
LIABILITY DISCLAIMER
FOR SPECIAL ONE-DAY LICENSE**

By exercising the privileges of this Special One-Day License in serving persons with alcoholic beverages, the Licensee is potentially exposed to significant liability for injuries and damages to the persons served or to others who are injured or damaged by the persons served. Your acceptance and exercise of this Special One-Day License will be deemed to be acknowledgment that you are aware of this potential liability.

You are encouraged to discuss the risks associated with exercising your privileges of this Special One-Day License and the appropriate precautions to avoid injuries, damage and liability to others with your legal advisor.

The Town of Winchendon and the Board of Selectmen acting as the Local License Authority shall not be liable to the Licensee or to others if injury or damage shall result from the exercise of this Special One-Day License.

Wendy A. St.
Signature of Applicant

8-31-2023
Date



Commonwealth of Massachusetts
Office of the State Treasurer
Alcoholic Beverages Control Commission

FARMER-WINERY LICENSE

M.G.L. c. 138, § 19B

This Farmer-Winery License authorizes the following licensee to produce, rectify, blend, or fortify, keep and expose for sale and to sell wine containing not more than twenty-four percent alcohol by weight:

Richard Stevens DBA Coldbrook Springs Winery

905 Old Coldbrook Road
Barre, MA 01005

Approved by the Alcoholic Beverages Control Commission on September 21, 2022

Jean M. Lorigio
Jean Lorigio, Chairman

Crystal Matthews
Crystal Matthews, Commissioner

Deborah A. Baglio
Deborah Baglio, Commissioner

License Number: **FW-LIC-000171**
Record Number: **2022-000016-FW-REN**
Capacity: **5K Gallons or Less**

THIS LICENSE WILL EXPIRE DECEMBER 31, 2023 UNLESS REVOKED OR CANCELLED DURING THIS PERIOD
THIS LICENSE SHALL BE DISPLAYED ON THE PREMISES IN A CONSPICUOUS PLACE WHERE IT CAN BE EASILY READ



Commonwealth of Massachusetts
Office of the State Treasurer
Alcoholic Beverages Control Commission

TRANSPORTATION & DELIVERY PERMIT

M.G.L. c. 138, § 22

This Permit hereby authorizes the use of the following vehicle for transportation and delivery of alcoholic beverages:

Vehicle Plate Number

N52932

Related License:

RICHARD STEVENS

ABCC License Number: FW-LIC-000171

License Type: Farmer Winery

Approved by the Alcoholic Beverages Control Commission on September 21, 2022

Jean Lorizio, Chairman

Crystal Matthews, Commissioner

Deborah Baglio, Commissioner

License Number: TR-LIC-007826

Record Number: 2022-000016-FW-REN

THIS PERMIT WILL EXPIRE DECEMBER 31, 2023 UNLESS REVOKED OR CANCELLED DURING THIS PERIOD

THIS PERMIT SHALL BE CARRIED IN THE VEHICLE AT ALL TIMES



CERTIFICATE OF COMPLETION

This certifies that

Wendy A Stevens

is awarded this certificate for

TIPS On-Premise Alcohol Server Training

Hours: 3.00	Issue Date: 07/14/2023	Expiration Date: 07/13/2026	Certificate #: ON-000029261149
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Scott McFadden
 Official Signature

www.gettips.com

TIPS On-Premise
 Issued: 07/14/2023
 Certificate #: ON-000029261149

Wendy A Stevens
 405 Old Coldbrook Road
 Braintree, MA 01905

CERTIFIED

Expires: 07/13/2026



Phone: 800-438-8477
www.gettips.com

This card was issued for successful completion of the TIPS program.

Signature *Wendy A Stevens*



eTIPS On Premise 3.1

CERTIFIED

Issued: 9/22/2022

Expires: 9/22/2025

ID#: 5826915

Richard C Stevens
905 Old Coldbrook Rd
Barre, MA 01005-9416

For service visit us online at www.gettips.com



A BEETRAINING COMPANY

Phone: 800-438-8477

www.gettips.com

This card was issued for successful completion of the TIPS program.

Signature



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/30/2023

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

PRODUCER J P INSURANCE, LLC 130 Main St Unit 1A Northborough, MA 01532	CONTACT NAME: JEFFREY PICHIERRI PHONE (A/C, No, Ext): (508)393-9327 FAX (A/C, No): (508)393-0001 E-MAIL ADDRESS:																				
	<table border="1"> <tr> <th colspan="2">INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A:</td> <td>FARM FAMILY CASUALTY INS CO</td> <td>13803</td> </tr> <tr> <td>INSURER B:</td> <td></td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A:	FARM FAMILY CASUALTY INS CO	13803	INSURER B:			INSURER C:			INSURER D:			INSURER E:			INSURER F:	
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INSURER F:																					
INSURED RICHARD C. STEVENS WENDY STEVENS 905 OLD COLDBROOK ROAD BARRE, MA 01005																					

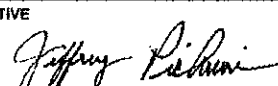
COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY <input checked="" type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			2001X2449	9/18/2022	9/18/2023	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	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			PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

CERTIFICATE HOLDER**CANCELLATION**

TOWN OF WINCHENDON WINCHENDON, MA	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 

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TOWN OF BARRE
OFFICE OF THE TOWN CLERK

Business Certificate

In Conformity with the provisions of Chapter One Hundred and Ten, Section Five of the General Laws, as amended, the undersigned hereby declare(s) that a Business is conducted under the title of:

Cold Brook Springs Winery

At the location of: 905 Old Cold Brook Road Barre MA 02005
Street address Mailing address

By the following named person(s): Include corporate name and title, if corporate officer. Please type or print. Name/Title Street/Mail Address

Cold Brook Springs Winery 905 Old Cold Brook Rd
Richard Stearns

SIGNATURES:

[Signature]

PHONE NUMBER: [Redacted]

TYPE OF BUSINESS: Winery

ON May 17 2022 the above named person(s) personally appeared before me and made oath that the foregoing statement is true.

Dec 4 2026
Commission Expires

[Signature]
Notary Public

Identification Presented: Drivers License #: MA Exp 2/5/24 Other: _____

In accordance with the provisions of Chapter 337 of the Acts of 1983 and Chapter 110, Section 5 of Mass. General Laws, BUSINESS CERTIFICATES SHALL BE IN EFFECT FOR FOUR YEARS FROM THE DATE OF ISSUE AND SHALL BE RENEWED EACH FOUR YEARS THEREAFTER. A statement under oath must be filed with the City Clerk upon discontinuing, retiring or withdrawing from such business or partnership.

Copies of such certificates shall be available at the address at which such business is conducted and shall be furnished on request during regular business hours to any person who has purchased goods or services from such business.

Violations are subject to a fine of not more than three hundred dollars (\$300.00) for each month during which such violation continues.

THIS FORM MUST BE RETURNED TO THE TOWN CLERK WITH A CHECK FOR \$45.00. CHECKS SHOULD BE MADE PAYABLE TO THE TOWN OF BARRE.

RECEIVED May 17 2022 CERTIFICATE EXPIRES: May 17, 2026

A TRUE COPY ATTEST
[Signature]
BARRE TOWN CLERK