



**CITY OF PITTSFIELD**  
**Licensing Board**  
**70 Allen Street, Room 103**  
**Pittsfield, MA 01201**

**APPLICATION FOR TEMPORARY EXTENSION OF PREMISES**  
**TO PATIO AND OUTDOOR DINING AREAS**

Will the Extension of Premise be on a right of way or public property?  
 If yes, you will also need to submit a Sidewalk Café/Occupy the Right-of-Way Application. YES  NO

**1. BUSINESS ENTITY INFORMATION**

Entity Name	ABCC License Number
<input type="text"/>	<input type="text"/>

**APPLICANT CONTACT**

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

Name	Title	Email	Phone
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**2. EXTENSION OF PREMISES**

**2A. DESCRIPTION OF EXTENSION**

Please describe in detail the proposed extension of the premise/outdoor areas to be included in the licensed area.  
**You must also submit a floor plan including dimensions.**

Total Sq. Footage	<input type="text"/>	Seating Capacity	<input type="text"/>	Maximum Occupancy	<input type="text"/>
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**2B. GUIDELINES FOR EXTENSION OF PREMISES TO PATIO AND OUTDOOR AREAS**

- Will the premise be enclosed by a fence, rope, or other means to prevent access from a public walkway?  
 YES  NO
- Will the outdoor area be contiguous to the licensed premises with a clear view of the area from inside the premises?  
 YES  NO   
 If not, will the licensee provide management personnel dedicated to the area?  
 YES  NO
- Will alcohol only be served to patrons who are seated at tables and where food is also available?  
 YES  NO

### **3. OCCUPANCY**

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 which means the applicant has to occupy the premises:

OWN

RENT

TENANT AT WILL

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. NEIGHBORHOOD**

Please describe the neighborhood of the establishment.

Please indicate what precautions will be taken in order to avoid potential noise in the environs.

## APPLICANT'S STATEMENT

I,  the:  sole proprietor;  partner;  corporate principal;  LLC/LLP manager  
Authorized Signatory  
of   
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;
- (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 understand that alcoholic beverages cannot be served outside of a licensed establishment unless and until the Application to extend the licensed premises has been approved;
- (11) I understand that all expanded premises approved pursuant to Governor Charles D. Baker's Covid-19 Order No. 35 are only effective through November 1, 2020, or until the Order is rescinded, whichever is sooner, and revert to their original licensed premises on that date;
- (12) I understand that the ABCC continues to retain supervision and oversight of all alcohol licensees, including those that expand their licensed premises pursuant to Governor Charles D. Baker's Covid-19 Order No. 35.; and
- (13) I ensure that the licensee will comply with the laws of the Commonwealth of Massachusetts, and that sales of alcoholic beverages take place only as authorized by federal, state, and local law.

Signature:  Title:  Date:

**CORPORATE VOTE**

The Board of Directors or LLC Managers of

Entity Name

duly voted to apply to the Licensing Authority of

and the

City/Town

Commonwealth of Massachusetts Alcoholic Beverages Control Commission on

Date of Meeting

for the Extention of Premises to Patio and Outdoor Areas.

“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,

\_\_\_\_\_  
Corporate Officer/LLC Manager Signature

\_\_\_\_\_  
Corporation Clerk’s Signature

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Print Name)