

Town of Pomfret Special Selectboard Meeting Agenda
Town Offices

5238 Pomfret Road
No Pomfret, VT. 05053
Tuesday, March 9th, 2021
6:00 p.m.

Agenda	Presenter	Time Frame
1. Call to Order	Chair	9:00 AM
2. Public Comment		
3. Agenda review		
4. Items for Discussion or Vote a. Warrants b. Suicide Liquor License Renewal c. You Tube		
5. Meeting Wrap-up		
6. Select Board Correspondence		
7. Review of Assignments		
8. Agenda Items for Next Meeting		
9. Meeting Adjournment		

- <https://zoom.us/j/95395079923?pwd=ZjBEed3ZuZWgvWmx2M0tpOE8zbjg2dz09> to start or join a scheduled Zoom meeting
Join Zoom Meeting via Mobile Phone +19292056099,,953950799233#,,1#306922
- Join Zoom Meeting via Landline or Mobile Phone Dial +1 301 715 8592, followed by the Meeting ID: 953 9507 9923 and Password: 306922

2021 LIQUOR LICENSE RENEWAL APPLICATION

160-004-OUTC-001

OUTSIDE CONSUMPTION PERMIT

Page 1

\$20.00

License Year Beginning May 1, 2021 ending April 30, 2022

Paid to DLC

MISREPRESENTATION OF A MATERIAL FACT ON ANY LICENSE APPLICATION SHALL BE GROUNDS FOR SUSPENSION OR REVOCATION OF THE LICENSE, AFTER NOTICE AND HEARING

Applicant: Review all of the information presented on this form, Indicating any changes the spaces provided.

Applicant : Woodstock Resort Corporation Licensee 160- Doing

Business As:

Suicide Six Ski Area

Mailing Address :

Pomfret 05067 14 The

Green Telephone: (802) 457-

1100

Woodst

oodstock VT

05091

PLEASE INCLUDE EMAIL ADDRESS:

Description of the delineated area is as follows :

Deck area extending 60x20 feet adjacent to the back of the building with grounds extending to the ski lift stansions and bottom of the hill; extending to the river along front of the building. Year Round Use. 11: to 11:00p.m.

I/we hereby certify, under the pains and penalties of perjury, that I/we are in good standing with respect to or in full compliance with a plan approved by the Corrmisioner of Taxes to pay any and all taxes due the State of Vermont as of the date of this application. (VSA, Title 32, Section 3113)

I/We hereby certify that I/we are not under an obligation to pay child support or that I/We are good standing with respect to child support or are in full con-pliance with a plan to pay any and all child support payable under a support order. (VSA, Title 15, Section 795)

In accordance with 21 VSA, Section 1378 (b), I/We certify, under pains and penalties of perjury, that I/We are In good standing with respect to or in full cornpliance with a plan to pay any and all contributions or payments in lieu of contributions due to the Department of Eraployment and Training.

I/We hereby certify that the information in this application is true and complete.

Dated this _____ day of _____

Signature of authorized agent Signature of individual or partners of corporation, cornpany, club or association

2021 LIQUOR LICENSE RENEWAL APPLICATION

Ernie Cole
Controller / Treasurer
(Title)

Are you making this application for the benefit of any other party? No ✓

MAKE CHECKS PAYABLE TO AND MAIL TO: VERMONT DIVISION OF LIQUOR CONTROL
13 GREEN MOUNTAIN DRIVE
MONTPELIER, VT 05602

_____ IDC-AL COWISSIONER SECTION BELOW _____

Upon being satisfied that the conditions precedent to the granting of this license as provided in Title 7 of the Vermont Statutes Annotated, as amended, have been fully met by the applicant, the _____ commissioners will endorse their recommendation on the back of the application and transmit it to the Liquor and Lottery Control Board for suitable action thereon, before any License may be granted. For the information of the Liquor and Lottery Control Board, applications shall carry the signature of each individual commissioner registering either approval or disapproval.

APPROVED

DISAPPROVED

Approved by Board of Control Commissioners of the City or Town of _____

Total Membership/TETbers present _____

Attest, Town Clerk _____

160-004-3RST-001

THIRD CLASS RESTAURANT/BAR LICENSE TO
SELL SPIRITUOUS LIQUORS

Page 1

Fee \$1 ,
: 095 .
00

License Year Beginning May 1, 2021 ending April 30,
2022

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DIE

Seasonal Fee :
\$550 . 00
Town: 14065
POMFRE T

2021 LIQUOR LICENSE RENEWAL APPLICATION

MISREPRESENTATION OF A MATERIAL FACT ON ANY LICENSE APPLICATION
SHALL BE GROUNDS FOR SUSPENSION OR REVOCATION OF THE LICENSE,
AFTER NOTICE AND HEARING

Applicant: Review all of the information presented on this form,
Indicating any changes in the spaces provided.

Applicant : Woodstock Resort Corporation
Licensee 4 Doing Business As:
Suicide Six Ski Area Mailing Address :
Pomfret VT 05067 14 The Green
Telephone: (802) g@a.woodstockinn.com
457-1100 Woodstock VI'
05091 PLEASE INCLUDE EMAIL ADDRESS :

Description of Premises: Premises : XX Owned
Leased

Restaurant in a one-story wood
frame building at the Suicide
Ski Area, to include a small
100' X 100' lodge on the south
west side of the Main Tndge
located on Stage Road in the
Town of Pornfret, Vermont.

Last Enforcement Seminar: 04/14/2019
This Club is: An unincorporated Association? Yes xx No
A Limited Liability Company? Yes xx No
A Vermont Corporation? XX Yes No

Fed. ID Number: 03-0220066 Incorporation Date: 12/28/1969
Valid Charter? : Yes State of Charter: Vermont Majority of
Directors are US Citizens: Yes
ATTACH AN ADDITIONAL SHEET TO THIS APPLICATION NOTING ANY NECESSARY CORRECTIONS OR
CHANGES
AND UPDATES HAVE OCCURRED DURING THE PAST YEAR.

Name	Address	Town/City	State Zip Code
Corporation	1655 Fort Myer Drive		
Director 1. Home, Douglas	Suite 1300	Arlington	VA 27709
Director 2 .Olson, Elaine	3438 South Road	Woodstock	VT 05091
Director 3. Hallowell, John	11 The Green	Woodstock	VT 05091

Has any director or stockholder been convicted or pleaded
guilty to any criminal or motor vehicle offense in any
court of law (including traffic tickets by during the last
year? Yes YNo

If yes, please attach the following information: Individual's
name, court/traffic bureau, offense and date

2021 LIQUOR LICENSE RENEWAL APPLICATION

In the past year has any director or stockholder of the corporation held any elective or appointive state, county, city, village or town office in Vermont (See VSA, T. 7, Ch. 9, Sec. 223) ? Yes No
If yes, please attach the following information: Individual s name, office and jurisdiction

Vt. Dept. of Health Food License No. :
Vt. Dept. of Health Lodging
No. : Vt. Tax Dept. Meals & Rooms
Cert. /Acct. No. :
440-080022006F-02

Disclosure of Non-profit Organization? : Yes XX No

ALL APPLICANTS MUST COMPLETE AND SIGN

The applicant understands that he/she must maintain a list of the names and residences of paid up members, a list of club officers, and a list of employees of the club and their annual salaries. These lists must remain on the licensed premises and be available for inspection upon request.

The applicant understands and agrees that the Liquor and Lottery Control Board may obtain criminal history record information from State and Federal record repositories.

I/we hereby certify, under the pains and penalties of perjury, that I/we are in good standing with respect to or in full compliance with a plan approved by the Commissioner of Taxes to pay any and all taxes due the State of Vermont as of the date of this application. (VSA, Title 32, Section 3113)

I/we hereby certify that I/we are not under an obligation to pay child support or that I/We are in good standing with respect to child support or are in full compliance with a plan to pay any and all child support payable under a support order. (VSA, Title 15, Section 795)

In accordance with 21 VSA, Section 1378 (b) , I/we certify, under pains and penalties of perjury, that I/we are in good standing with respect to or in full compliance with a plan to pay any and all contributions or payments in lieu of contributions due to the Department of Employment and Training.

I/we have registered the trade name of these premises with the Secretary of State.

Continued on next page

160-004-3RST-001

THIRD CLASS RESTAURANT/BAR LICENSE TO SELL SPIRITUOUS LIQUORS

2021 LIQUOR LICENSE RENEWAL APPLICATION

I/We hereby certify that the information in this application is true and complete .

Dated this -6- day of March, 2021

Signature of authorized agent Signature of individual or partners of corporation, company, club or association

Signature lines with handwritten signature 'Elaine...' and title 'Controller / Treasurer'.

Are you making this application for the benefit of any other party? Yes No

MAKE CHECKS PAYABLE TO: VERMONT DIVISION OF LIQUOR CONTROL 13 GREEN MOUNTAIN DRIVE MONTPELIER, VT 05602

MAIL CHECK WITH COMPLETED FORMS TO THE TOWN OR CITY CLERK

.....IDCAL COMMISSIONER SECTION BEIK)W.....

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APPROVED

DISAPPROVED

Signature lines for the APPROVED and DISAPPROVED sections.

Approved by Board of Control Commissioners of the City or Town of

Total Membershipmanbers present

Attest, Town Clerk

Signature lines for the bottom section.