



Board of Selectmen

The Wellfleet Board of Selectmen will hold a public meeting on Tuesday, May 10, 2016 at 7:00 p.m. at the Wellfleet Senior Center, 715 Old Kings Highway, Wellfleet, MA 02667. *It is anticipated that the meeting will be recorded by the Town. Anyone else desiring to record the meeting may do so only after notifying the chair and may not interfere with the conduct of the meeting in doing so.*

- I. Announcements, Open Session and Public Comment [7:00]** *Note: Public comments must be brief. The Board will not deliberate or vote on any matter raised solely during Announcements & Public Comment.*

- II. Public Hearing(s) [7:05]**
 - A.** Amend Beach Department fees by adding a new beach fee for bus drop off at beaches.
 - B.** Amend Beach Rules and Regulations by adding new section 8(b) prohibiting the operation of unmanned aircraft at Town beaches. [Community Services Director]

- III. Licenses**
 - A.** Food Truck & Common Victualler licenses: Ben Trusiak d/b/a Shuck Truck; Michael Banghart d/b/a 349 Events; Murro Van Meter d/b/a The Leeside Café LLC; Joseph Rugo d/b/a Joeyes Food Truck and Provincetown Pilgrim Properties, LLC d/b/a Kung Fu Dumplings
 - B.** Special Event Liquor Licenses: 1) SPAT for beer and wine license on October 15 & 16, 2016; 2) Wellfleet Harbor Actors Theater for all alcohol license on July 10 & 26, 2016

- IV. Appointments/Reappointments**
 - 1) Nomination of Assembly of Delegates Member. Application on file: Olga Kahn
 - 2) Full Time Police Officer: Kevin LaRocco, George Spirito, Ryan Murphy, Laecio De Oliveira and Mark Braun from July 1, 2016 through June 30, 2017
 - 3) Special Police Officer: Scott Higgins, Jonathan Hale, Jerre Austin, Bryan Dufresne, Mac Spigel from July 1, 2016 through June 30, 2017
 - 4) Special Police Officer – Department Chaplain: Paul Cullity from July 1, 2016 through June 30, 2017
 - 5) Community Service Officer: Doig Leathan, May 23, 2016 through June 30, 2017
 - 6) Designation of Harry Terkanian as Chief Procurement Officer to June 30, 2016
 - 7) Charter Review Committee nominations
 - 8) Building & Needs Assessment Committee with term ending June 30, 2018; Application on file: Harry Sarkis Terkanian [1 vacancy]
 - 9) Board of Water Commissioners with term ending June 30, 2016; Applications on file: Curt Felix and Miriam Spencer [1 vacancy]
 - 10) Zoning Board of Appeals Alternate with term ending June 30, 2017; Applications on file: Reatha Ciotti and John Cumbler [1 vacancy]
 - 11) Board of Health with term ending June 30, 2019; Applications on file: John Cumbler and Hannelore Vanderschmidt [1 vacancy]

V. Use of Town Property

- 1) SPAT for OysterFest on October 15 & 16, 2016; Application fee paid; event fee TBD
- 2) Brenda Withers of Harbor Stage Company to use Town Landing on July 25 for fundraising event; Application fee paid; event fee TBD
- 3) Michael Banghart to use the band stand end of the pier from May 1 to October 31, 2016 for food concession truck; application fee paid; event fee TBD.
- 4) Lisa Buchs to use the Western side of Indian Neck Beach for a wedding ceremony on June 18, 5 pm – 6 pm; application fee paid; \$100 event fee due.
- 5) Gary Kersteen to use Baker Field Tent for a retirement party on June 26, 2 pm – 5:30 pm; application fee paid; event fee TBD.
- 6) James Gallant and Natalie Hill to use Mayo Beach on September 10, 3 pm – 4 pm for a wedding ceremony; application fee paid; \$100 event fee due.
- 7) Della Spring Cushing to use Mayo Beach on Tuesdays and Thursdays in July & August, 8:30 am-9:45 am for yoga and meditation lessons; application fee paid; event fee TBD
- 8) Olaf Valli to use Whitecrest Beach for surf lessons April 1 - December 31; application fee paid; event fee TBD.

VI. Business

- A. MassDOT presentation on Route 6 bicycle access improvements [MasDOT]
- B. MOU regarding a High Water Mark Sign Project [ATA]
- C. Possible Recreation Department Events Signage at Town Hall. [Community Services]
- D. Award of concessions contract to Murro Van Meter d/b/a The Leaside Café LLC for Newcomb Hollow Town Beach. [ATA]
- E. Award of concessions contract to Michael Banghart d/b/a 349 Events/Solace for Maguire Landing Town Beach. [ATA]
- F. Affordable Housing Restriction [TA]

VII. Town Administrator's Report

VIII. Future Concerns

IX. Correspondence and Vacancy Report

X. Minutes [April 12, April 20, April 25 and May 3]

XI. Adjournment

TOWN OF WELFLEET
PUBLIC NOTICE

Notice is hereby given that the Wellfleet Board of Selectmen will hold a public hearing on Tuesday, May 10, 2016 at 7:05 p.m. in the Wellfleet Council on Aging, 715 Old Kings Highway, to discuss a new Beach fee.

WELFLEET BOARD OF SELECTMEN

To: Board of Selectmen
From: Suzanne Grout Thomas
Date: April 22, 2016
Re: new Beach fee

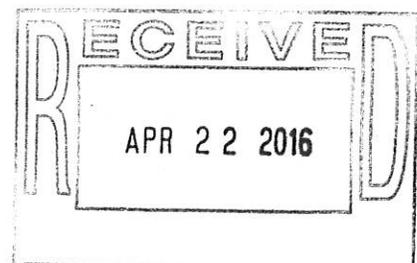
Over the past three or four years, an increasing number of chartered busses, both full size and half size, have been arriving at Town Beach parking lots, mostly Cahoon Hollow, and discharging up to 50 people and their gear. As many as five or six busloads are normal for a Saturday or Sunday in July and August. The busses discharge their people and then look for a place to park in Wellfleet while they wait. The additional bodies on the beach and the additional traffic challenges require additional personnel and the Town receives no income from the busses and their drop offs.

Therefore, I recommend that each bus be charged on a per diem basis for dropping off beach patrons.

Full size bus (approximately 50 people): \$200 per diem
Half size bus (approximately 24 people): \$100 per diem

The fees would apply to any bus not originating from a Town owned beach parking lot.

Companies operating these charters would be notified before the season and would be permitted to purchase the *Drop Off Permits* in advance for their summer seasons.



TOWN OF WELLFLEET
PUBLIC HEARING

Notice is hereby given that the Wellfleet Board of Selectmen will hold a public hearing on Tuesday, May 10, 2016 at 7:05 p.m. in the Wellfleet Council on Aging to amend the Beach Rules and Regulations by adding a section 8 (b) to read:

Using, launching, landing or operating an unmanned aircraft from, above or on land, or waters associated with any of the Town of Wellfleet bathing beaches is prohibited except as approved in writing by the Town Administrator. The term "unmanned aircraft" means a device that is used or intended to be used for flight in the air without the possibility of direct human intervention from within or on the device and the associated operational elements and components that are required for the pilot or system or system operator in command to operate or control the device (such as cameras, sensors, communication links). This term includes all types of devices that meet this definition (e.g., model airplanes, quadcopters, drones) that are used for any purpose including recreation or commerce.

WELLFLEET BOARD OF SELECTMEN

CV 1985
FS 2937

TOWN OF WELLFLEET
300 MAIN STREET
WELLFLEET, MA 02667

2016

Fee 75.00
BOH Fee 100.00
Processing Fee 20.00
TOTAL \$195.00

Business Name/Map/Lot The Shuck Truck LLC
Mailing Address PO Box 1684
Town/State/Zip Wellfleet, MA, 02667
Business Street Address 2207 State Highway, Wellfleet, MA 02667
Business Telephone No. 860-803-0184 Federal ID Number (Mandatory) 47-2814913
Manager Benjamin Tusiak E-Mail Address Shuck.yeah@gmail.com

1. Applicant is (a) an: Individual
2. If applicant is an individual or partnership please answer below:

Applicant #1

a. Tel. No. 860-803-0184
b. Name The Shuck Truck LLC, DBA Shuck Food Truck
c. Street Address 230 High St, Acton, MA 01720
d. Mailing Address PO Box 1684 Wellfleet, MA 02667

Applicant #2

a. Tel. No. _____
b. Name _____
c. Street Address _____
d. Mailing Address _____

3. If applicant is a corporation or trust please answer below:

List the titles of all officers and manager:

Title	Full Name	Home Address
<u>President</u>	<u>Benjamin Tusiak</u>	<u>30 Pheasant Run, Wellfleet, MA 02667</u>
<u>Chief Executive Officer</u>	<u>Julia Nadler</u>	<u>30 Pheasant Run, Wellfleet, MA 02667</u>

4. Corporate or Trust Name The Shuck Truck LLC
Corporate Mailing Address PO Box 1684 Wellfleet, MA 02667
Corporate Tel. No. 860-803-0184

5. Anticipated Opening Date: Year Round _____ Seasonal May 1st - November 30 2016
6. Fully describe type of business conducted (i.e. retail, restaurant, food, gallery): Food Truck
7. Seating Capacity Take out only Hours of Operation 10Am-9pm
8. Special conditions or Restrictions required by Zoning Board of Appeals, Board of Selectmen or Board of Health. Please attach copies:
Food Truck License, Food Establishment Permit
9. Fully describe premises to be licensed including number of rooms and square footage: Mobile Food Truck
10. Has any person in this application ever had his/her license revoked or cancelled? No 2 Room 200 square Feet
- If yes, state for each name the date and reasons why the license was revoked or cancelled: N/A

11. I certify under the penalties of perjury that I, to the best knowledge and belief, have filed all state tax returns and paid all state taxes under law. I further certify that in the conduct of this business I will abide by all Town bylaws and regulations.

Berth
 *Signature of Individual or Signature of Corporate Officer w/Title (Mandatory)

Smk Food Truck
 Corporate Name (Mandatory if Applicable)

47-2814913
 Federal Identification No. **MANDATORY**

4/1/2016
 Date of Application

*Approval of a contract or other agreement will not be granted unless this certification clause is signed by the applicant.
 ** Your social security number will be furnished to the MA Dept. of Revenue to determine if you have met tax filing or payment obligations. (This is required by the state.) Providers who fail to correct their non-filing or delinquency will not have a contract or other agreement issued, renewed or extended. This request is made under the authority of M.G.L. c. 62C s. 49A.

FOR OFFICE USE ONLY BELOW THIS LINE

Department Head or Designee Signatures

- Police Dept. _____ Date _____ Comment _____
- Fire Dept. _____ Date _____ Comment _____
- Tax Collector _____ Date _____ Comment _____
- Bldg Inspector _____ Date _____ Comment _____
- Bd. Of Health _____ Date _____ Comment _____

Date Received 4/14/16 Fee Received 245.00 By (initials) smk Date Issued _____

APPLICATION FOR PERMIT

APPLICATION MUST BE FILLED OUT COMPLETELY

Name The Shuck Food Truck
Mailing Address PO BOX 1684, Wellfleet, MA 02667
Town/State/Zip Wellfleet, MA 02667

Business Address 2207 State Highway, Wellfleet, MA 02667

Owner's Name Benjamin Trusiak Home Tel. 860 803 0184 E-Mail shuck.yeah@gmail.com

Manager's Name Julia Nadler Home Address 30 Pheasant Run, Wellfleet, MA 02667

If Corporation or Partnership, give name, title and home address of officers or partners.

Name	Title	Home Address
<u>Julia Nadler</u>	<u>Chief Executive Officer</u>	<u>30 Pheasant Run, Wellfleet, MA</u>
<u>Benjamin Trusiak</u>	<u>President</u>	<u>30 Pheasant Run, Wellfleet, MA</u>

Establishment is open 12 months a year. Total seating capacity N/A. Take-out service only?

Name of Certified Food Handler (s) Julia Nadler, Ben Trusiak P.I.C. Julia Nadler, Ben Trusiak

Does establishment have outside seating? _____ Seating Capacity _____ is area enclosed? _____ Capacity _____

If seating capacity are over 25, person Chokesaver Certified Benjamin Trusiak

Applications for all licenses/permits required by the Board of Selectmen have been filed for the year 2015 yes no _____

PLEASE CHECK PERMIT (S) YOU ARE APPLYING FOR:

- Temporary Food Service
- Retail Food
- Mobile Unit
- Bed & Breakfast
- Caterer
- Food Service
- Residential Kitchen

FOR FOOD SERVICE ESTABLISHMENTS: Are you compliant with the new Food Allergen Requirements: yes _____ no _____

I certify under the penalties of perjury that I, to my best knowledge and belief, have filed all state tax returns and paid all state taxes required under law.

The Shuck Truck, LLC
* Signature of Individual or Corporate Name (mandatory)
47-2814913

Julia Nadler
By: Corporate Officer (mandatory, if applicable)

Social Security/ Federal Identification Number. **(MANDATORY)

* This license will not be issued unless this certification clause is signed by the applicant.
** Your Federal Identification Number will be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing or tax payment obligations. Licensees who fail to correct their non-filing or delinquency will be subject to license suspension or revocation.

This request is made under the authority of M.G.L. Chapter 62C Section 49A.

Hillary Greenberg-Lemos
Health Agent

4/1/14
Date

Date Received 4/4/14 By (initials) JMN Fee paid Date Issued _____

APPLICATION FOR OPERATION OF A FOOD TRUCK 2016
APPLICATION MUST BE FILLED OUT COMPLETELY

The undersigned hereby applies for a Food Truck License in accordance with the provisions of Town of Wellfleet Board of Selectmen Regulations.

(PLEASE TYPE OR PRINT CLEARLY)

Name of Applicant: Benjamin Trusiak Date: 3/25/16 Fee: \$50.00

D.O.B: 01/07/1986

Drivers License Number: 576774801

Fed.ID #: 47-2814913

Business Address: 2207 State Highway, Wellfleet, MA 02667

Home Address: 30 Pheasant Run, Wellfleet, MA 02667

Mailing: PO Box: 1684, Wellfleet, MA 02667

Business Telephone: 860-803-0184

Cell Phone: 860-803-0184

Name of Operation: Shuck Foot Truck

Plan Review and/or Preliminary Approval (Required for Approval)

Reviewing Department	Signature of Approving Authority	Date of Plan Review/Approval
Building Department:		4-1-16
Health Department:		3/25/16
Police Department		4-1-16
Fire Department:		4-2-16

PROVIDE THE FOLLOWING INFORMATION WITH RESPECT TO EACH LOCATION:

What will be the hours of operation? 10:00 A.M. - 9:00 P.M.

Time(s) of Peak Customer Activity - 10:00 A.M. - 8:00 P.M.

Est. Number of Customers at Peak Time(s): - 100

Est. Number of Employees at Peak Time(s): - 2

What provisions have been made for trash, wastewater, potable water, electric and recycling?

Included in Commissary lease

LIST THE LOCATIONS WHERE THE MOBILE FOOD VEHICLE WILL BE DEPLOYED AND ATTACH A SKETCH OF HOW THE VEHICLE WILL BE POSITIONED AND OTHER DETAILS OF THE AREA TO BE LICENSED.

(Please provide a sketch for each location on a separate piece of paper.)

Location(s)
2207 State Highway, Wellfleet, MA 02667

I the undersigned state that the information provided in this application, and associated attachments, is true and accurate to the best of my knowledge:

Signature:  Printed Name: Benjamin Trusiak

Date: 3/24/16

Note: No Food Truck License will be approved until the applicant addresses all issues and/or concerns to the satisfaction of the Board of Selectmen; and no Food Truck License will be issued until all required inspections have been conducted, permits granted, and final approvals given.

FOR OFFICE USE ONLY

Final Permits/Approvals Granted (Required Before TFL will be Issued)

Approving Department	Yes	No	If "No," Reason Why	Date of Final Approval
Building Department:	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Health Department:	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Police Department:	<input type="checkbox"/>	<input type="checkbox"/>		4-13-2016 DJ
Fire Department:	<input type="checkbox"/>	<input type="checkbox"/>		

SPECIAL STATE LICENSE

Hawker or Pedler

Take care of your license.

Lost license will not be replaced.

Fee: \$60.00

Display \$2.00

No 122338 A

Licensee: Benjamin Trusiak
30 Pheasant Run
Wellfleet, MA 02667



The Commonwealth of Massachusetts

DIVISION OF STANDARDS

ONE ASHBURTON PLACE, BOSTON

Expires: 3-21-17

Date of Birth: 1-7-1986

Date 3-22-16

*Above portion must be worn in a visible
and conspicuous manner on outer clothing.*

Be it known unto all to whom these presents come, that the above-named person is hereby licensed to go about as a HAWKER or PEDLER in all the Cities and Towns in this Commonwealth, and to sell or expose for sale or barter any meats, butter, cheese, fish, fruits, vegetables, or other goods, wares or merchandise; except jewelry, furs, wines, spirituous liquors, small artificial flowers or miniature flags.

This license is not valid until after the licensee has endorsed his usual signature in the space provided in the margin hereof, and the license is dated and stamped with the official stamp or signature of the Director. The portion of the license indicating the license number, licensee's name and the date of expiration must be worn in a visible and conspicuous manner on outer clothing, otherwise he will be liable to the same penalty as if he had no license.

Director of Standards

Signature of Licensee

THIS LICENSE IS NOT TRANSFERABLE

SPECIAL STATE LICENSE

Hawker or Pedler

*Take care of your license.
Lost license will not be replaced.*

Nº 122334 A

Fee: \$60.00
Display \$2.00

The Commonwealth of Massachusetts

DIVISION OF STANDARDS

ONE ASHBURTON PLACE, BOSTON

Licensee: Julia L. Nadler
30 Pheasant Run
Wellfleet, MA 02667



Expires:3-21-17.....

Date of Birth:8-20-1985.....

Date3-22-16.....

*Above portion must be worn in a visible
and conspicuous manner on outer clothing.*

Be it known unto all to whom these presents come, that the above-named person is hereby licensed to go about as a HAWKER or PEDLER in all the Cities and Towns in this Commonwealth, and to sell or expose for sale or barter any meats, butter, cheese, fish, fruits, vegetables, or other goods, wares or merchandise; except jewelry, furs, wines, spirituous liquors, small artificial flowers or miniature flags.

This license is not valid until after the licensee has endorsed his usual signature in the space provided in the margin hereof, and the license is dated and stamped with the official stamp or signature of the Director. The portion of the license indicating the license number, licensee's name and the date of expiration must be worn in a visible and conspicuous manner on outer clothing, otherwise he will be liable to the same penalty as if he had no license.

[Handwritten Signature]

Director of Standards

Signature of Licensee

THIS LICENSE IS NOT TRANSFERABLE

BIG CHIEF HILL



LOCUS IS SHOWN ON THE
WELLFLEET ASSESSORS' ATLAS
AS PARCEL 217 ON SHEET 23
#207 STATE HIGHWAY
COMMERCIAL 2 DISTRICT

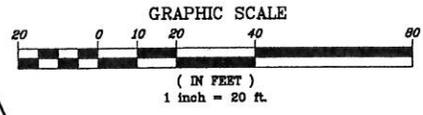
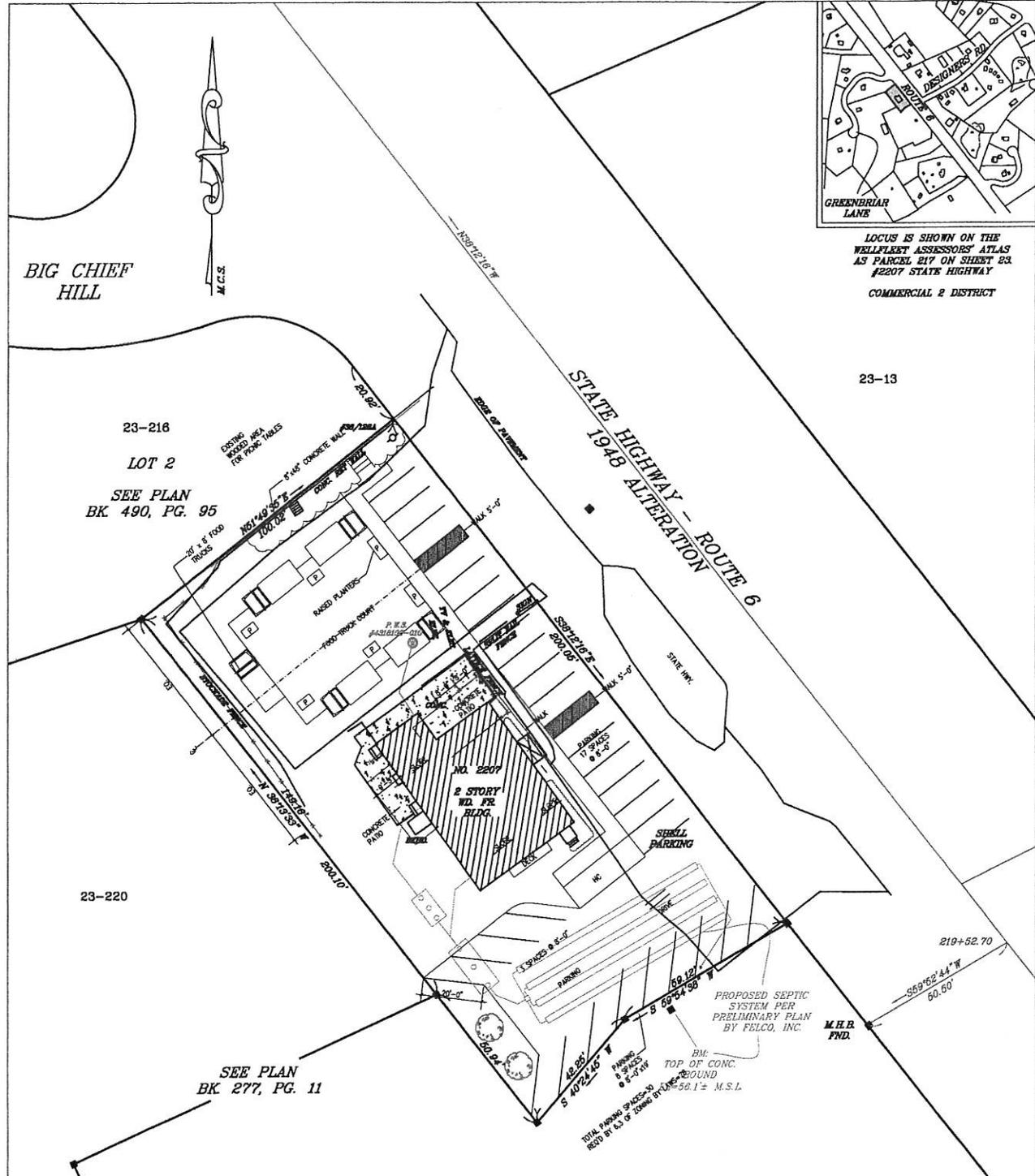
23-216
LOT 2
SEE PLAN
BK 490, PG. 95

23-220

SEE PLAN
BK 277, PG. 11

STATE HIGHWAY - ROUTE 6
1948 ALTERATION

23-13



SITE PLAN
OF LAND IN
WELLFLEET
MADE FOR
CURT FELIX

SCALE: 1"=20'
DECEMBER 28, 2015
SLADE ASSOCIATES, INC., REGISTERED LAND SURVEYORS
10 PINE POINT ROAD, WELLFLEET, MA 02667

DENOTES DRILL HOLES IN CONCRETE MONUMENT
FOUND UNLESS OTHERWISE INDICATED

PLAN #2015-127

PARKING ANNOTATED
EURICH & ASSOCIATES



Title C1.01 1-2016	Project number 15427 Date 12/21/2015 Drawn by FS Checked by CE	2207 ROUTE 6 SITE PLAN PROPOSED Curt Felix	NOT FOR CONSTRUCTION	SCHEMATIC DESIGN	Surveyor ... Newton, MA Structural Engineer ... Newton, MA	Project Team: 617.992.2392 deval@eurich.com	Eurich & Associates Newton, MA 02460

CV 1984
FS 2938

TOWN OF WELLFLEET
300 MAIN STREET
WELLFLEET, MA 02667

2016

Fee 75.00
BOH Fee 100.00
Processing Fee 20.00 paid
TOTAL 195.00

349 Events/

Business Name/Map/Lot T.B.D

Mailing Address

Town/State/Zip Wellfleet MA 02667

Business Street Address _____

Business Telephone No. (774) 216-0888 Federal ID Number (Mandatory) 30087612

Manager Michael Baughart E-Mail Address mbaughart34@yahoo.com

- Applicant is (a) and Individual
- If applicant is an individual or partnership please answer below:

Applicant #1

- Tel. No. _____
- Name _____
- Street Address _____
- Mailing Address _____

Applicant #2

- Tel. No. _____
- Name _____
- Street Address _____
- Mailing Address _____

- If applicant is a corporation or trust please answer below:

List the titles of all officers and manager:

Title	Full Name	Home Address

4. Corporate or Trust Name _____

Corporate Mailing Address _____

Corporate Tel. No. _____

5. Anticipated Opening Date: Year Round _____ Seasonal 5/1/16 - 12/1/16
 6. Fully describe type of business conducted (i.e. retail, restaurant, food, gallery): Mobile Food Truck
 7. Seating Capacity 0 Hours of Operation 1 pm - 9 pm

8. Special conditions or Restrictions required by Zoning Board of Appeals, Board of Selectmen or Board of Health. Please attach copies:

Routine inspection by Board of Health

9. Fully describe premises to be licensed including number of rooms and square footage: _____

10. Has any person in this application ever had his/her license revoked or cancelled? no

If yes, state for each name the date and reasons why the license was revoked or cancelled: _____

11. I certify under the penalties of perjury that I, to the best knowledge and belief, have filed all state tax returns and paid all state taxes under law. I further certify that in the conduct of this business I will abide by all Town bylaws and regulations.

[Signature]
 *Signature of Individual or Signature of Corporate Officer w/Title (Mandatory)

349 events
 Corporate Name (Mandatory if Applicable)

30087612
 Federal Identification No. **MANDATORY**

3/15/16
 Date of Application

*Approval of a contract or other agreement will not be granted unless this certification clause is signed by the applicant.
 ** Your social security number will be furnished to the MA Dept. of Revenue to determine if you have met tax filing or payment obligations. (This is required by the state.) Providers who fail to correct their non-filing or delinquency will not have a contract or other agreement issued, renewed or extended. This request is made under the authority of M.G.L. c. 62C s. 49A.

FOR OFFICE USE ONLY BELOW THIS LINE

Department Head or Designee Signatures

Police Dept. [Signature] Date 3/24/16 Comment OK
 Fire Dept. Call Date 4/2/16 Comment [Signature]
 Tax Collector M. D. [Signature] Date 4/5/16 Comment _____
 Bldg Inspector R68 Date 4-8-16 Comment _____
 Bd. Of Health Janean/30. Cemelley-Lomas Date 4/12/16 Comment _____

Date Received 3/17/16 Fee Received 20.00 By (initials) [Signature] Date Issued _____

2016

TOWN OF WELLFLEET
300 Main Street
Wellfleet, MA 02667

20.00 paid
Hillary Greenberg-Lemos, Health Agent
349-0308
FOOD SERVICE ESTABLISHMENTS

APPLICATION FOR PERMIT

APPLICATION MUST BE FILLED OUT COMPLETELY

Name Michael Bingham
Mailing Address 53 Avery Ave Wellfleet Ma 02667
Town/State/Zip Wellfleet Ma 02667

Business Address 53 Avery Ave Wellfleet Ma 02667
Owner's Name Michael Bingham Home Tel (774) 216-0888 E-Mail mibingham39@yahoo.com
Manager's Name _____ Home Address _____

If Corporation or Partnership, give name, title and home address of officers or partners.

<u>Name</u>	<u>Title</u>	<u>Home Address</u>

Establishment is open 8 months a year. Total seating capacity 0 Take-out service only? yes
Name of Certified Food Handler (s) John Arsenault P.I.C. _____
Does establishment have outside seating? no Seating Capacity 0 is area enclosed? no Capacity 0
If seating capacity are over 25, person Chokesaver Certified _____
Applications for all licenses/permits required by the Board of Selectmen have been filed for the year 2015 yes x no _____

- PLEASE CHECK PERMIT (S) YOU ARE APPLYING FOR:**
- | | |
|---|--|
| <input type="checkbox"/> Temporary Food Service | <input type="checkbox"/> Caterer |
| <input type="checkbox"/> Retail Food | <input type="checkbox"/> Food Service |
| <input checked="" type="checkbox"/> Mobile Unit | <input type="checkbox"/> Residential Kitchen |
| <input type="checkbox"/> Bed & Breakfast | |

FOR FOOD SERVICE ESTABLISHMENTS: Are you compliant with the new Food Allergen Requirements: yes x no _____

I certify under the penalties of perjury that I, to my best knowledge and belief, have filed all state tax returns and paid all state taxes required under law.

Michael Bingham
* Signature of Individual or Corporate Name (mandatory) By: Corporate Officer (mandatory, if applicable)

300878612 (F.I.N.)
**Social Security/ Federal Identification Number. (MANDATORY)

* This license will not be issued unless this certification clause is signed by the applicant.
** Your Federal Identification Number will be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing or tax payment obligations. Licensees who fail to correct their non-filing or delinquency will be subject to license suspension or revocation.

This request is made under the authority of M.G.L. Chapter 62C Section 49A.

Hilary Greenberg-Lemos
Health Agent Date 4/12/16

Date Received 3/17/16 By (initials) SM Fee _____ Date Issued _____

APPLICATION FOR OPERATION OF A FOOD TRUCK 2016
 APPLICATION MUST BE FILLED OUT COMPLETELY

The undersigned hereby applies for a Food Truck License in accordance with the provisions of Town of Wellfleet Board of Selectmen Regulations.

(PLEASE TYPE OR PRINT CLEARLY)

Name of Applicant: Michael Banghart Date: 3/21/16 Fee: \$50.00

D.O.B: 08/27/1969

Drivers. License Number: 559103463 Fed.ID #: 300878612

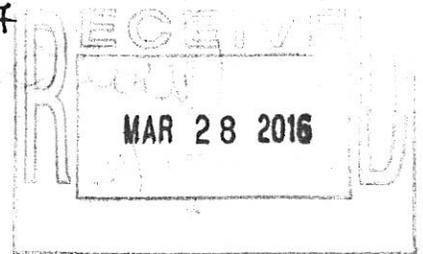
Business Address: 53 Avery Ave Wellfleet ma 02667

Home Address: 120 Cottontail Rd Wellfleet ma 02667

Business Telephone: (774) 216-0888

Cell Phone: same

Name of Operation: Solace (349 Events)



Plan Review and/or Preliminary Approval (Required for Approval)

Reviewing Department	Signature of Approving Authority	Date of Plan Review/Approval
Building Department:	<u>[Signature]</u>	<u>3-23-16</u>
Health Department:	<u>[Signature]</u>	<u>3/23/16</u>
Police Department	<u>[Signature]</u>	<u>3/24/16</u>
Fire Department:	<u>[Signature]</u>	<u>3/21/2016</u>

PROVIDE THE FOLLOWING INFORMATION WITH RESPECT TO EACH LOCATION:

What will be the hours of operation? 11am - 9pm (closed wednesdays)

Time(s) of Peak Customer Activity 2pm - 6pm

Est. Number of Customers at Peak Time(s): 50/hr

Est. Number of Employees at Peak Time(s): 2

What provisions have been made for trash, wastewater, potable water, electric and recycling?

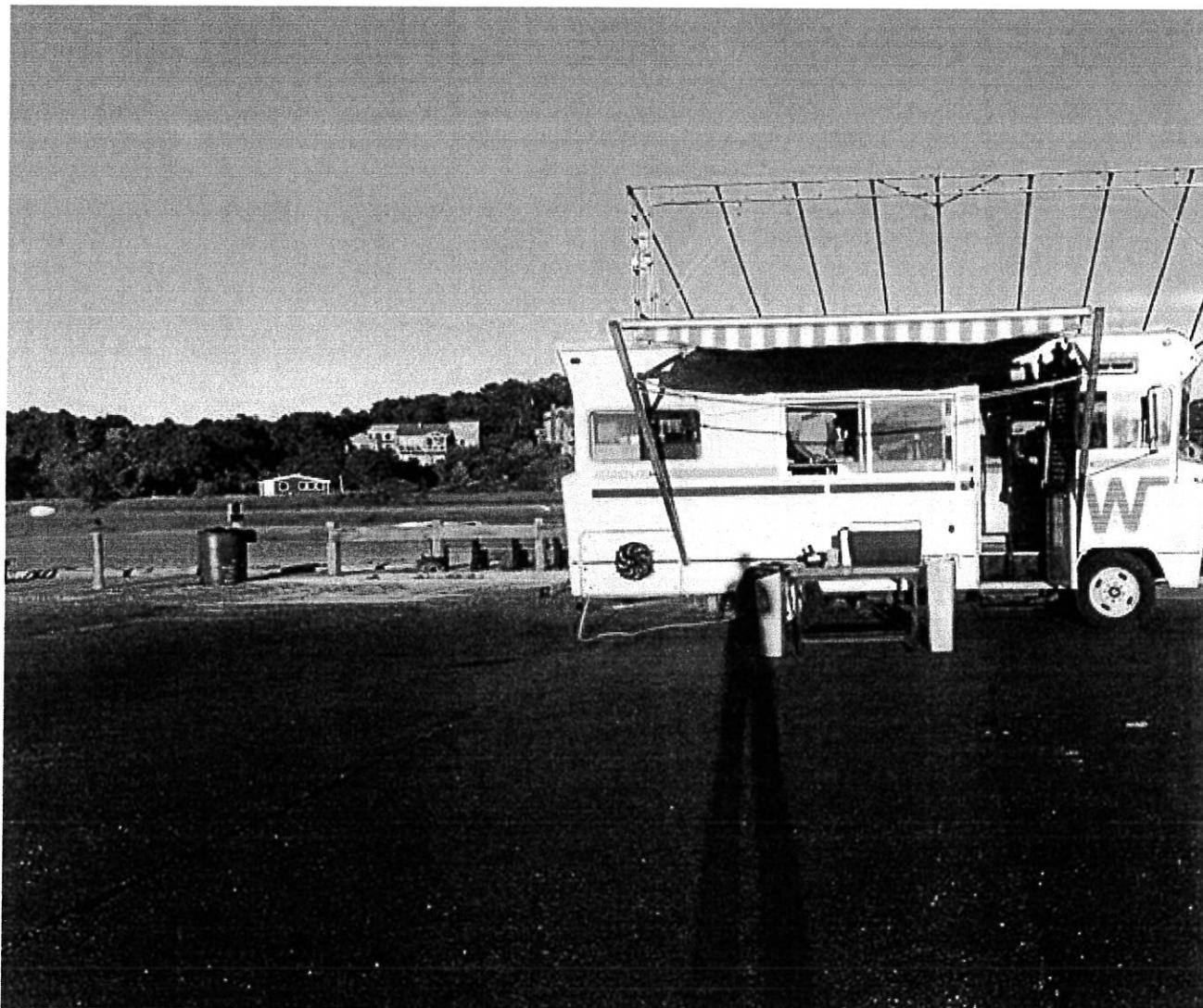
All above services are provided by Salty Market (Frero) with the exception of waste water which is provided by Wellfleet Town Per.



TOWN PIER - BONDSTAND

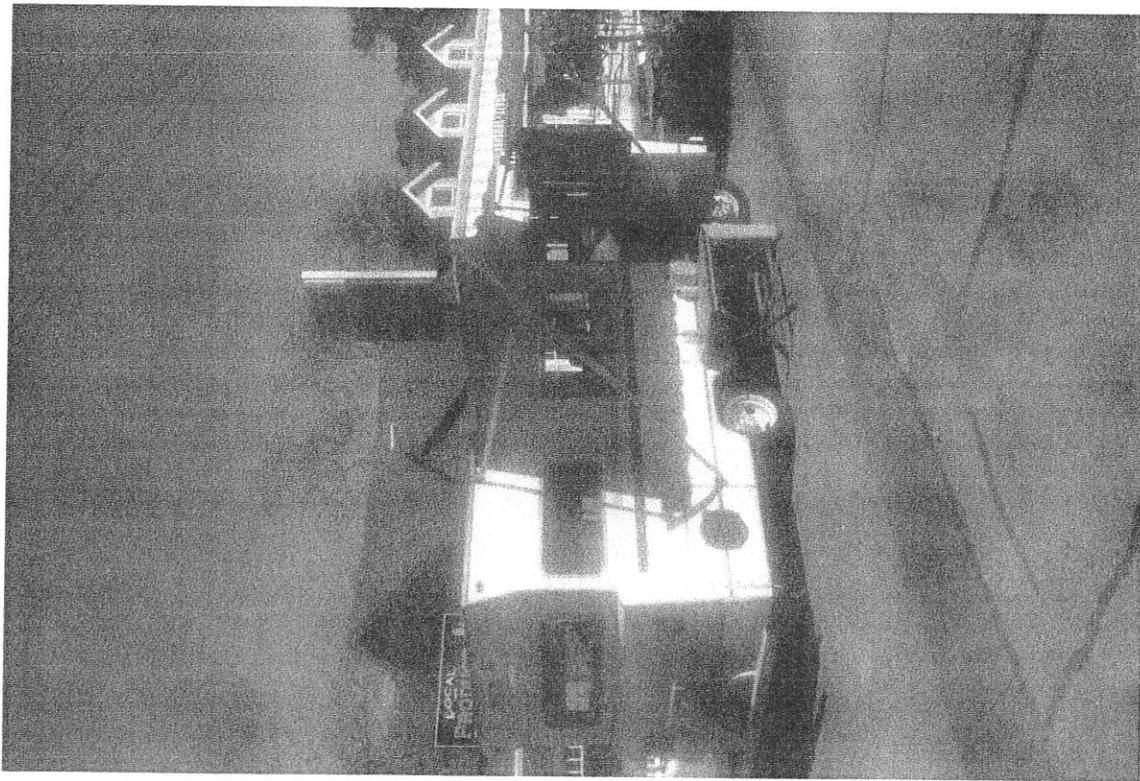


8-DMZ



SAME

SOUTH WELLS
GENERAL STORE



POSSIBLE
LOCATION

S.H. MAIN

CINAW
ISBNA

the Brook

SICK
DAY

PIVW

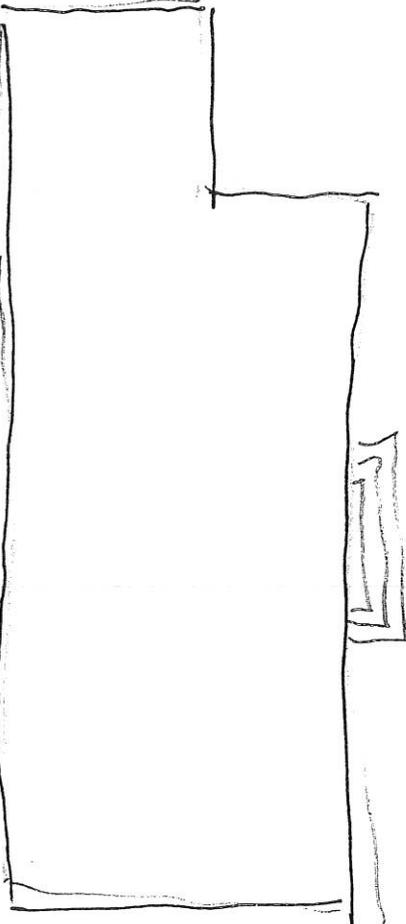
POSSIBLE
LOCATIONS

BOOKSTORE
RESTAURANT

KENDRICK AVE

2207, RT 6
(EX-ANGLY TOMATO)

POSSIBLE
LOCATION
#1

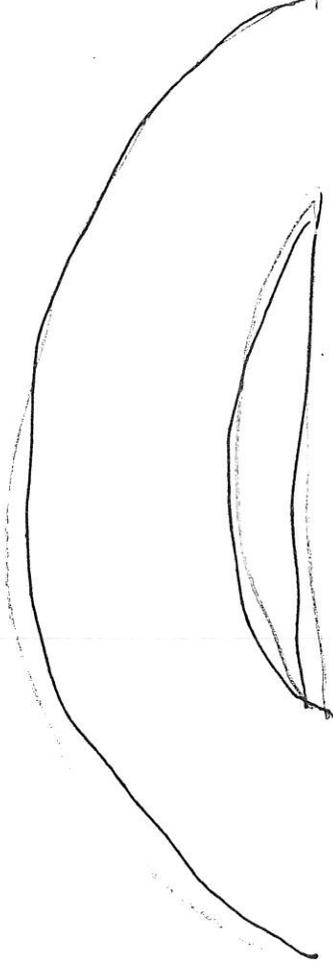


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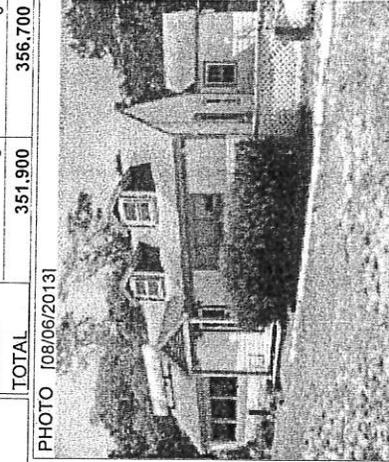
Key: 2449

Town of WELLFLEET - Fiscal Year 2015

5/18/2015 2:52 pm SEQ # 1

CURRENT OWNER		PARCEL ID		LOCATION	
L. LARSEN ROBERT L BOX 863 WELLFLEET, MA 02667		23-217-0		2207 STATE HWY RTE 6	
TRANSFER HISTORY		DOS		BK-PG (Cert)	
LARSEN ROBERT L		04/02/2010 L		445,802 N/A-N/A	
BENGTSON LAURENCE		04/10/2009 S		460,000 23603-181	
LARSEN ROBERT L		02/23/2009 L		391,564 23469-312	
CD	T	AC/SF/UN	Nbhd	INFL1	INFL2
L	S	19,600 C	1.00/100	1.00	1.00
ADJ BASE		SAF	Scenic	Lpi	VC
300,000		1.49/100	1.00	C2	1.00
CREDIT AMT		ADJ VALUE		201,140	
0		201,140			

TOTAL	19,602 SF	ZONING	C2	FRNT	0		
Nbhd	COMMERCIAL	N/ASSOC/PTI=204-22 32/ PARADDNO2=//					
INFL1	NO ADJUST	O MEMO=PROBATE #89P-0725-E1.ERIC'S SEAFOOD					
INFL2	NO ADJUST	T ON 1ST FLOOR AND STUDIO APT ON 2ND FLOOR					
		ASSESSED		CURRENT		PREVIOUS	
		LAND		201,100		201,100	
		BUILDING		150,800		155,600	
		DETACHED		0		0	
		OTHER		0		0	
		TOTAL		351,900		356,700	

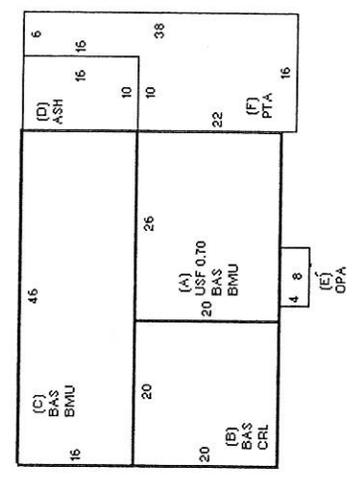
TY	QUAL	COND	DIMNOTE	YB	UNITS	ADJ PRICE	RCNLD
<p>PHOTO 10/08/2013</p>  <p>BLDG COMMENTS</p>							

BUILDING	CD	ADJ	DESC	MEASURE	8/6/2013	SF
MODEL	5		CIM			
STYLE	39	2.15	RESTAURANT [82%]	LIST	1/29/2001	
QUALITY	A	1.00	AVERAGE [100%]	REVIEW	8/6/2013	SF
FRAME	1	0.99	WOOD FRAME [100%]			

YEAR BLT	1954	SIZE ADJ	0.985
NET AREA	2,020	DETAIL ADJ	2,049
\$NLA(RCN)	\$119	OVERALL	1,000
CAPACITY		UNITS	ADJ
STORIES	1.75	100	1.00
% HEATED	100	0	1.00
% A/C	0	0	1.00
% SPRINKLERS	0	0	1.00

ELEMENT	CD	DESCRIPTION	ADJ	S	BAT	T	DESCRIPTION	UNITS	YB	ADJ PRICE	RCN
FOUNDATION	4	BSMT WALL	1.00	+	N	N	BSMT UNF	1,256	1954	32.70	41,066
EXTERIOR WALL	4	VINYL	1.01	+	N	L	BASE AREA	1,656	1954	93.45	154,746
ROOF STRUCTURE	1	GABLE	1.00	+	N	L	UP-STRY FIN	364	1954	93.45	34,014
ROOF COVER	1	ASPH/COMP SHIN	1.00	B	N	L	CRAWL SPACE	400		7.30	2,920
FLOORING	2	SOFTWOOD	0.95	D	N	N	ATT SHED	160		16.20	2,592
INT FINISH	2	DRYWALL	1.02	E	N	N	OPEN PORCH	32		25.84	827
H.V.A.C.	2	HOT WATER	1.02	F	N	N	PATIO	448		7.27	3,255
FUEL SOURCE	1	OIL	1.00								

TOTAL RCN	239,420	
CONDITION ELEM	CD	
EFF. YR/AGE	1990 / 23	
COND	37	37%
FUNC	0	
ECON	0	
DEPR	37	% GD
RCNLD		\$150,800



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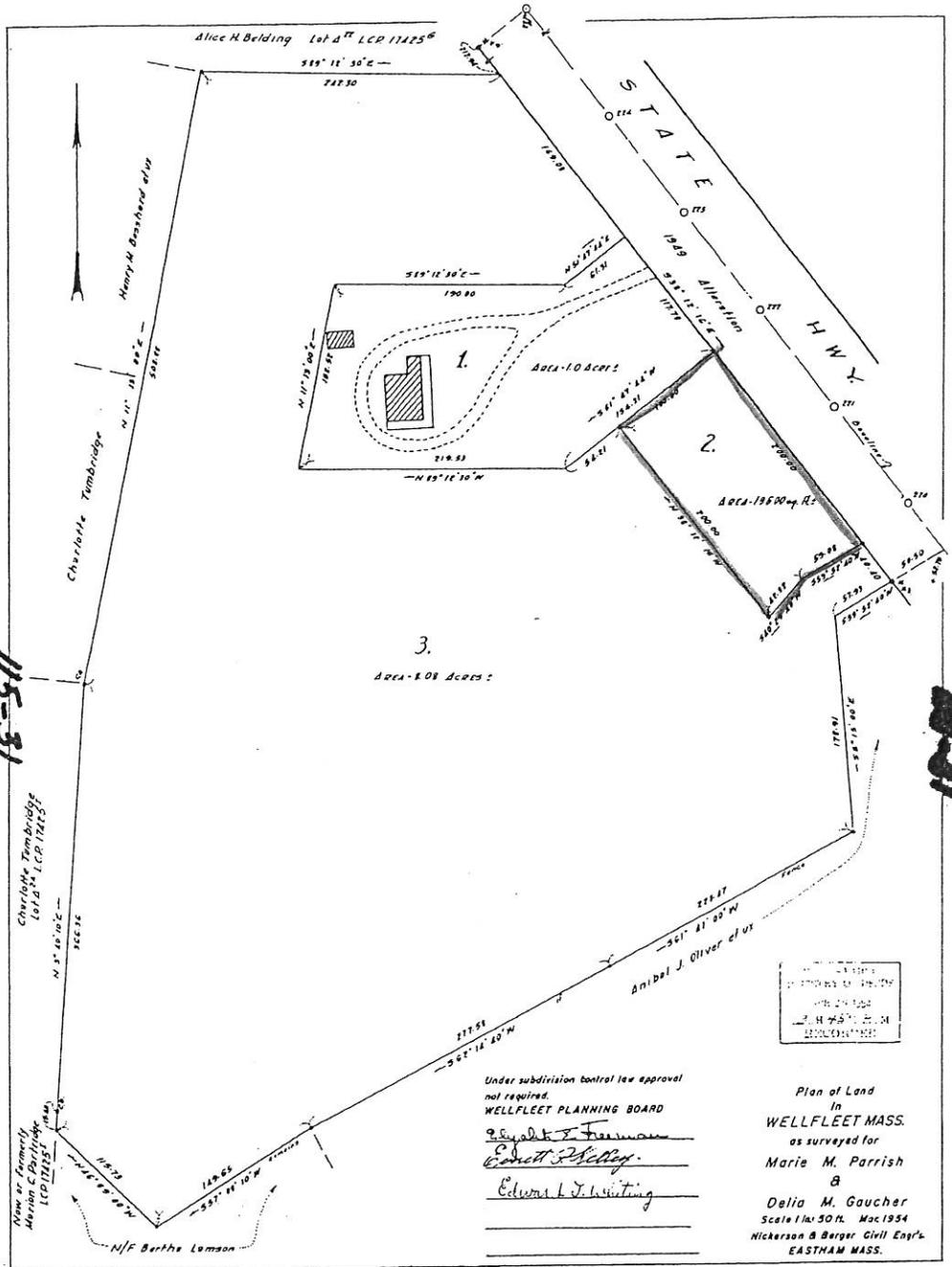
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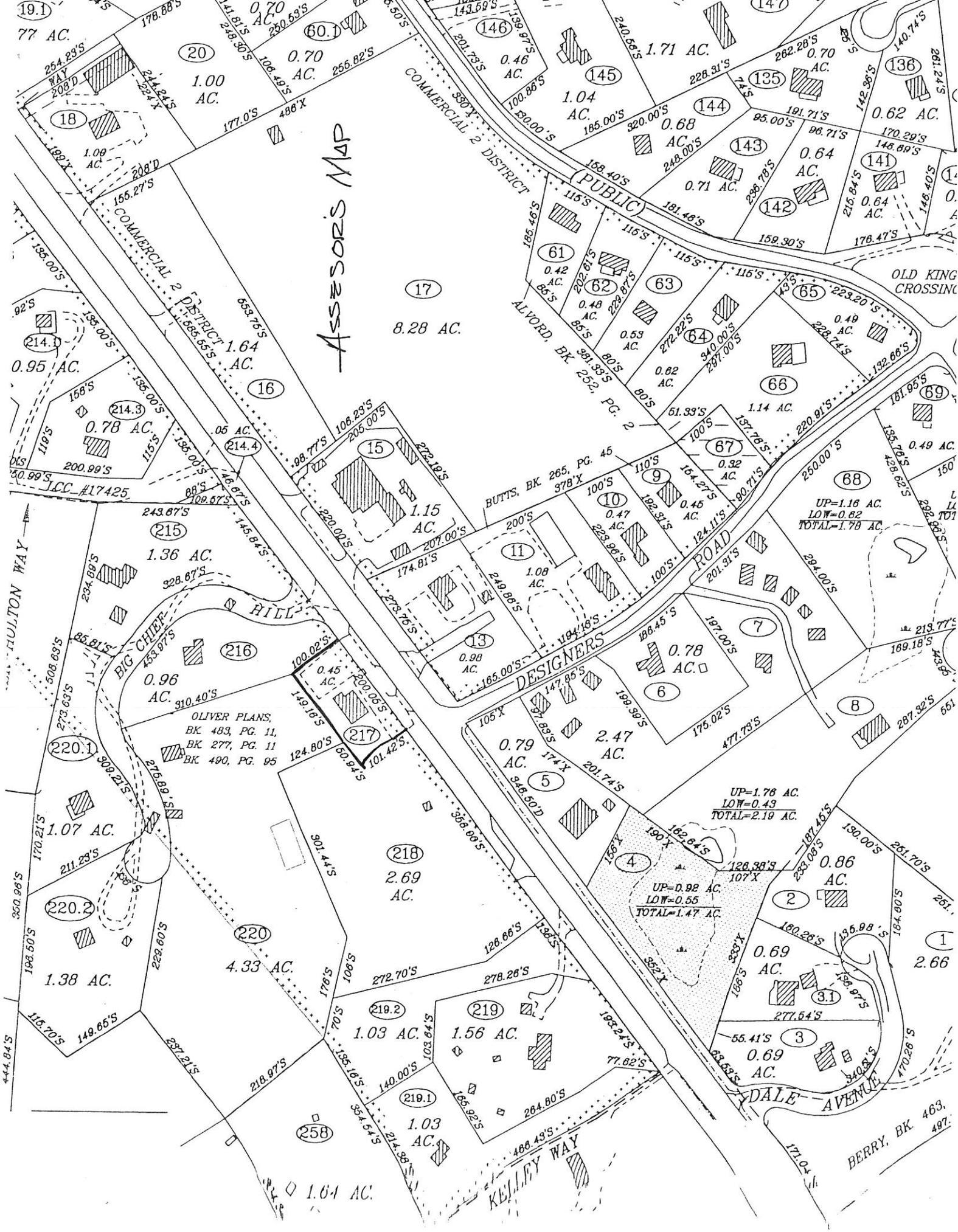
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115-31
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 TPC



Plan Book 115 Page 31

ASSESSOR'S MAP



TOWN BEACHES

- McGUIRE'S LANDING
 - WHITE CREST BEACH
 - NEWCOMB-HOLLOW BEACH
-
- CONDITIONS PURSUANT TO
TOWN BIDDING PROCESS
AND REGULATIONS.

Parcel #91

Key: 1338

Town of WELLFLEET - Fiscal Year 2014 Preliminary

4/3/2013 11:46 am SEQ # 1

CURRENT OWNER		PARCEL ID		LOCATION	
ROBICHEAU RICHARD A TRUSTEE PO BOX 82 WELLFLEET, MA 02667		15-91-0-R		15 BANK ST	
TRANSFER HISTORY		DOS		BK-PG (Cert)	
ROBICHEAU RICHARD A TRUST		02/05/2004 F		18192-233	
ROBICHEAU RICHARD A		11/17/1998 A		1 11846-11	
CD	T	ACRES/SF	Nbhd	INFL1	INFL2
103	S	17,424	C	1.00	SZ1 0.80
TOTAL		17,424	SF	ZONING	CD
				N/ASSOC	PAR1=121-22 41A(38,40PT41
Nbhd		COMMERCIAL		FRNT 0	
INFL1		SIZE 80			
INFL2		NO ADJUST			
TY	QUAL	COND	DIM/NOTE	YB	UNITS
SHP	A	1.00	70 0.70 24*32		768
TOTAL		465,300		ADJ PRICE	
				18.50	
				RCNLD	
				9,900	

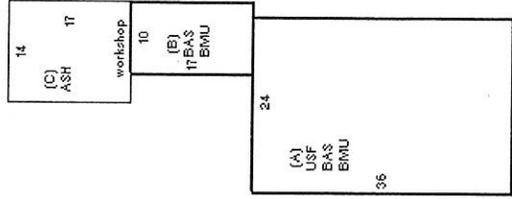
CLASS	CLASS%	DESCRIPTION	BN ID	BN	CARD
3250	100	SMALL RETAIL		1	1 of 1
PMT NO	PMT DT	TY	DESC	AMOUNT	
02248	08/20/2002	5	REMODELING	250	01/14/2003 JC 100 100
02113	04/04/2002	5	REMODELING	18,000	01/14/2003 JC 100 100

ASSESSED	CURRENT	PREVIOUS
LAND	306,400	306,400
BUILDING	149,000	149,000
DETACHED	9,900	9,900
OTHER	0	0
TOTAL	465,300	465,300



PHOTO: 10/126/2001

BLDG COMMENTS



BUILDING	CD	ADJ	DESC
MODEL	1	1.70	RESIDENTIAL
STYLE	7	1.70	OLD STYLE [100%]
QUALITY	AG	1.20	AVERAGE-GOOD [100%]
FRAME	1	1.00	WOOD FRAME [100%]

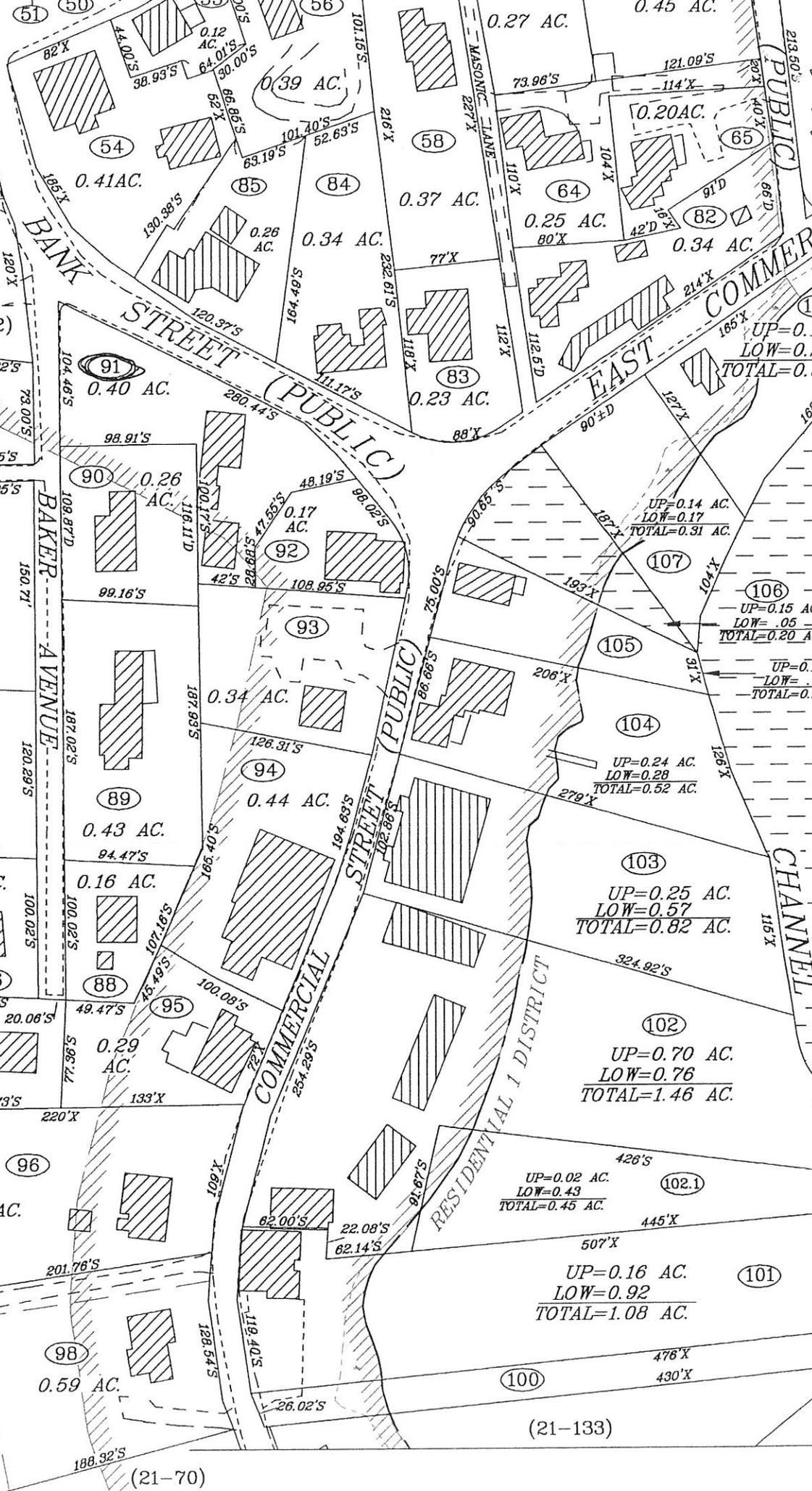
YEAR BLT	1968	SIZE ADJ	1,000
NET AREA	1,898	DETAIL ADJ	1,000
\$/SFLA(RCN)	\$131	OVERALL	1,575

CAPACITY	UNITS	ADJ
STORIES	2	1.00
ROOMS	3	1.00
BEDROOMS	1	1.00
BATHROOMS	1	1.00
HALFBATHS	2	1.00
UNITS	1	1.00
GARAGE SPACES	0	1.00
FIXTURES	7	\$9,129

S	BAT	T	DESCRIPTION	UNITS	YB	ADJ PRICE	RCN	
+	BMU	N	BSMT UNFINISHED	1,034	1968	27.95	28,904	
+	BAS	L	BAS AREA	1,034	1968	117.88	121,888	
A	USF	L	UP-STRY FIN	864	1968	96.24	84,882	
C	ASH	N	ATT SHED	238		14.93	3,553	
TOTAL RCN								248,356
CONDITION ELEM								CD

EFF.YR/AGE	1960 / 50
COND	40 40
FUNC	0
ECON	0
DEPR	40 % GD 60
RCNLD	\$149,000

MATCH LINE SHEET 14



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Key: 1287

Town of WELLFLEET - Fiscal Year 2015

5/1/2015 3:00 pm SEQ # 1

CLASS	CLASS%	DESCRIPTION	BN ID	BN	CARD
9600	100	CHUR.MOSQ.SYNA.TEMP		1	1 of 1
PMT NO	PMT DT	TY	DESC	AMOUNT	BY
0981	03/24/2009	3	MAINTENANCE	20,000	08/09/2010 JH

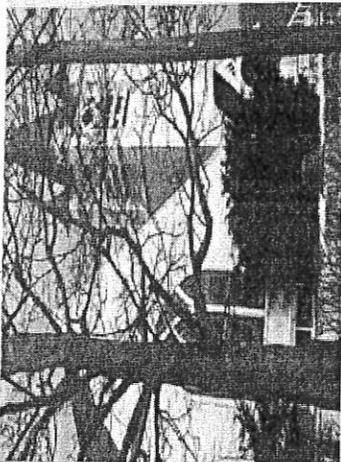
CURRENT OWNER		PARCEL ID		LOCATION								
METHODIST CHURCH BOX 1451 WELLFLEET, MA 02667		15-39-0		246 MAIN ST								
TRANSFER HISTORY		DOS	T	SALE PRICE	BK-PG.(Cert)							
METHODIST CHURCH					N/A-N/A							
CD	T	AC/SF/UN	Nbhd	INFL1	INFL2	ADJ BASE	SAF	Scenic	Lpi	VC	CREDIT AMT	ADJ VALUE
103	S	36,590	C	1.00	1.00	600,000	1.10	1.00	C1	2.00		551,880

TOTAL	36,590 SF	ZONING	CD	FRNT	0
Nbhd	COMMERCIAL	N/ASSOC PAR1=121-22 3// METHODIST CHURCH//			
INFL1	NO ADJUST	OT			
INFL2	NO ADJUST	TE			

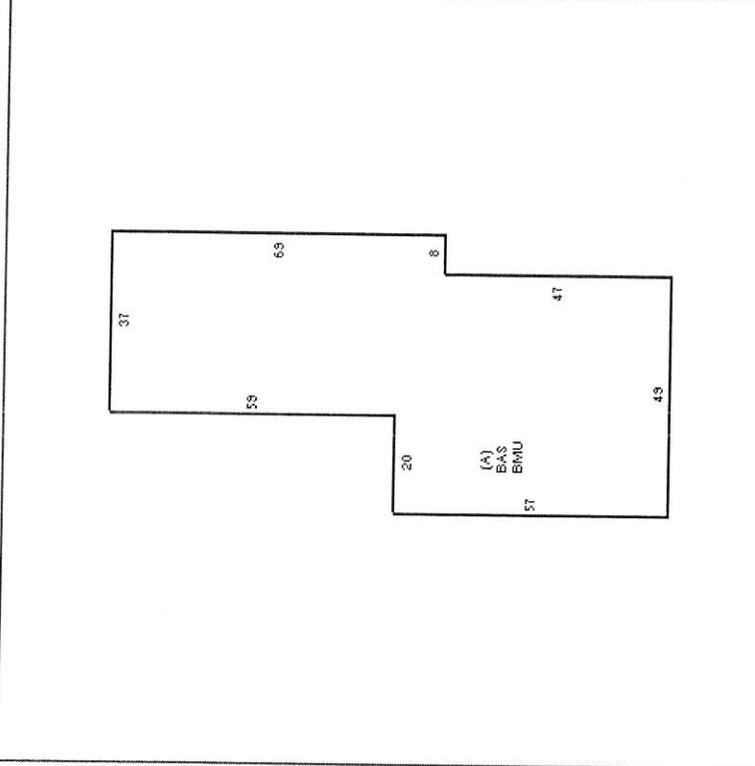
ASSESSED CURRENT PREVIOUS

LAND	551,900	551,900
BUILDING	716,500	736,700
DETACHED	12,100	12,100
OTHER	0	0
TOTAL	1,280,500	1,300,700

PHOTO 10/41/2001



BLDG COMMENTS



BUILDING	CD	ADJ	DESC
MODEL	5		CIM
STYLE	99	2.94	CHURCHES (100%)
QUALITY	G	1.20	GOOD (100%)
U FRAME	1	0.99	WOOD FRAME (100%)

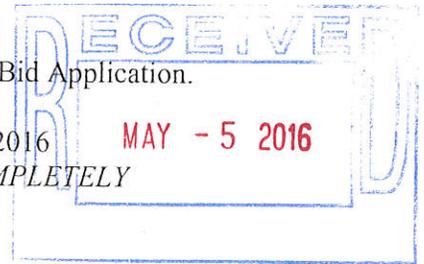
YEAR BLT	1891	SIZE ADJ	0.840
NET AREA	5,056	DETAIL ADJ	3.165
\$NLA(RCN)	\$200	OVERALL	1.000
CAPACITY	UNITS	ADJ	
STORIES	1	1.00	
% HEATED	100	1.00	
% A/C	0	1.00	
% SPRINKLERS	0	1.00	

ELEMENT	CD	DESCRIPTION	ADJ	S	BAT	T	DESCRIPTION	UNITS	YB	ADJ PRICE	RCN	TOTAL RCN
FOUNDATION	4	BSMT WALL	1.00	A	BMU	N	BSMT UNF	5,056	1891	51.68	261,310	1,009,190
EXTERIOR WALL	2	CLAP BOARD	1.00	A	BAS	L	BASE AREA	5,056		147.71	746,831	
ROOF STRUCTURE	1	GABLE	1.00		MST	O	STACK	2		524.50	1,049	
ROOF COVER	1	ASPH/COMP SHIN	1.00									
FLOORING	2	SOFTWOOD	0.95									
INT FINISH	1	PLASTER	1.04									
H.V.A.C.	1	FORCED AIR	1.00									
FUEL SOURCE	0		1.00									

EFF. YR/AGE	1994 / 19
COND	29 29%
FUNC	0
ECON	0
DEPR	29 %GD 71
RCNLD	\$716,500

Required Business Application to be completed and submitted with Bid Application.

BUSINESS PERMIT APPLICATION 2016
APPLICATION MUST BE FILLED OUT COMPLETELY



Business Name/Map/Lot The Leaside Cafe
Mailing Address Box 715
Town/State/Zip Wellfleet MA 02667
Business Street Address 105 Aunt Sallys Way Wellfleet MA 02667
Business Telephone No. 508 360 7659 Federal ID Number (Mandatory) 013-72-6655
Manager _____ E-Mail Address _____

1. Applicant is (a) an: Individual
2. If applicant is an individual or partnership please answer below:

Applicant #1

a. Tel. No. (508) 360 7659
b. Name Murro Van Meter
c. Street Address 105 Aunt Sallys Way
d. Mailing Address 715 - 02667

Applicant #2

a. Tel. No. _____
b. Name _____
c. Street Address _____
d. Mailing Address _____

3. If applicant is a corporation or trust please answer below:
List the titles of all officers and manager: Include a separate sheet if necessary.

Title	Full Name	Home Address
<u>owner/president</u>	<u>Murro Van Meter</u>	<u>105 Aunt Sallys Way Wellfleet MA 02667</u>

4. Corporate or Trust Name The Leaside LLC
Corporate Mailing Address 715 - 02667
Corporate Tel. No. 508 360 7659

5. Anticipated Opening Date: ~~Year Round~~ Seasonal 5/1/16

6. Fully describe type of business conducted (i.e. retail, restaurant, food, gallery): Food Truck

7. Seating Capacity 0 Hours of Operation 8AM - 4pm

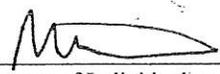
8. Special conditions or Restrictions required by Zoning Board of Appeals, Board of Selectmen or Board of Health. Please attach copies:

none

9. Fully describe premises to be licensed including number of rooms and square footage: 100 sq ft food truck/trailer

10. Has any person in this application ever had his/her license revoked or cancelled? no If yes, state for each name the date and reasons why the license was revoked or cancelled:

11. I certify under the penalties of perjury that I, to the best knowledge and belief, have filed all state tax returns and paid all state taxes under law. I further certify that in the conduct of this business I will abide by all Town bylaws and regulations.



*Signature of Individual or Signature of Corporate Officer w/Title (Mandatory)

Corporate Name (Mandatory if Applicable)

013-72-6655

Federal Identification No. MANDATORY

4/28/16

Date of Application

*Approval of a contract or other agreement will not be granted unless this certification clause is signed by the applicant.
** Your social security number will be furnished to the MA Dept. of Revenue to determine if you have met tax filing or payment obligations. (This is required by the state.) Providers who fail to correct their non-filing or delinquency will not have a contract or other agreement issued, renewed or extended. This request is made under the authority of M.G.L. c. 62C s. 49A.

FOR OFFICE USE ONLY

Department Head or Designee Signatures

Police Dept. _____	Date _____	Comment _____
Fire Dept. _____	Date _____	Comment _____
Tax Collector _____	Date _____	Comment _____
Bldg Inspector _____	Date _____	Comment _____
Bd. Of Health _____	Date _____	Comment _____
Date Received _____	Fee Received _____	By (initials) _____ Date Issued _____

APPLICATION FOR OPERATION OF A FOOD TRUCK 2016
APPLICATION MUST BE FILLED OUT COMPLETELY

The undersigned hereby applies for a Food Truck License in accordance with the provisions of Town of Wellfleet Board of Selectmen Regulations.

(PLEASE TYPE OR PRINT CLEARLY)

Name of Applicant: *Murro Van Meter*

Date: *4/28/16*

D.O.B: *12/2/76*

Drivers. License Number: *S96030451* Fed.ID #:

Business Address: *PO Box 715*

Home Address: *105 Aunt Sallys Way Wellfleet MA 02467*

Business Telephone: *508 360 7659*

Cell Phone: *508 360 7459*

Name of Operation: *The Leaside Cafe*

Plan Review and/or Preliminary Approval (Required for Approval)

Reviewing Department	Signature of Approving Authority	Date of Plan Review/Approval
Building Department:	<i>[Signature]</i>	<i>3-29-16</i>
Health Department:	<i>[Signature]</i>	<i>3/18/16</i>
Police Department	<i>[Signature]</i>	<i>4/25/16</i>
Fire Department:	<i>[Signature]</i>	<i>3/12/16</i>

PROVIDE THE FOLLOWING INFORMATION WITH RESPECT TO EACH LOCATION:

What will be the hours of operation? *8AM-4pm*

Time(s) of Peak Customer Activity *noon*

Est. Number of Customers at Peak Time(s): *100*

Est. Number of Employees at Peak Time(s): *2*

What provisions have been made for trash, wastewater, potable water, electric and recycling?

Frazier, Eversource

LIST THE LOCATIONS WHERE THE MOBILE FOOD VEHICLE WILL BE DEPLOYED AND ATTACH A SKETCH OF HOW THE VEHICLE WILL BE POSITIONED AND OTHER DETAILS OF THE AREA TO BE LICENSED.

(Please provide a sketch for each location on a separate piece of paper.)

Location(s)	<i>Maguire Landing Beach lot</i>
	<i>as per ordered in KFP</i>

Beach Concessions Bid Specifications

~~Newcomb Hollow Beach Landing~~

~~Baker Field~~

~~Maguire Landing~~

2016

I the undersigned state that the information provided in this application, and associated attachments, is true and accurate to the best of my knowledge:

Signature: 

Printed Name: Morro Van Meter

Date: 4/28/16

Note: No Food Truck License will be approved until the applicant addresses all issues and/or concerns to the satisfaction of the Board of Selectmen; and no Food Truck License will be issued until all required inspections have been conducted, permits granted, and final approvals given.

=====

FOR OFFICE USE ONLY

Final Permits/Approvals Granted (Required Before TFL will be Issued)

Approving Department	Yes	No	If "No," Reason Why	Date of Final Approval
Building Department:				
Health Department:				
Police Department:				
Fire Department:				

SPECIAL STATE LICENSE

Hawker or Pedler

No 122441 A

Take care of your license.

Lost license will not be replaced.

Fee: \$60.00

Display \$2.00

Licensee: Murro Van Meter

105 Aunt Sally's Way
Wellfleet, MA 02667

City of Massachusetts

DIVISION OF STANDARDS
ONE ASHBURTON PLACE, BOSTON



Expires: 4-5-17

Date of Birth: 12-2-76

Above portion must be worn in a visible and conspicuous manner on outer clothing.

Date 4-6-16

Be it known unto all to whom these presents come, that the above-named person is hereby licensed to go about as a HAWKER or PEDLER in all the Cities and Towns in this Commonwealth, and to sell or expose for sale or barter any meats, butter, cheese, fish, fruits, vegetables, or other goods, wares or merchandise; except jewelry, furs, wines, spirituous liquors, small artificial flowers or miniature flags.

This license is not valid until after the licensee has endorsed his usual signature in the space provided in the margin hereof, and the license is dated and stamped with the official stamp or signature of the Director. The portion of the license indicating the license number, licensee's name and the date of expiration must be worn in a visible and conspicuous manner on outer clothing, otherwise he will be liable to the same penalty as if he had no license.

.....
Director of Standards

Signature of Licensee

THIS LICENSE IS NOT TRANSFERABLE

Required Food Establishment Permit to be completed and submitted with Bid Application.

APPLICATION FOR FOOD SERVICE ESTABLISHMENTS 2016

APPLICATION MUST BE FILLED OUT COMPLETELY

Name Murro Van Meter

Mailing Address 715-02667

Town/State/Zip Wellfleet MA 02667

Business Address 105 Aunt Sallys Way Wellfleet MA 02667

Owner's Name Murro Van Meter Home Tel. 508 3607659 E-Mail mooree@hotmail.com

Manager's Name _____ Home Address _____

If Corporation or Partnership, give name, title and home address of officers or partners.

Name _____ Title _____ Home Address _____

Establishment is open 6 months a year. Total seating capacity 0 Take-out service only? yes

Name of Certified Food Handler (s) Murro Van Meter P.I.C. _____

Does establishment have outside seating? NO Seating Capacity 0 is area enclosed? na Capacity na

If seating capacity are over 25, person Choke saver Certified na

Applications for all licenses/permits required by the Board of Selectmen have been filed for the year 2016
yes x no _____

PLEASE CHECK PERMIT (S) YOU ARE APPLYING FOR:

- Temporary Food Service
- Retail Food
- Mobile Unit
- Bed & Breakfast
- Caterer
- Food Service
- Residential Kitchen

FOR FOOD SERVICE ESTABLISHMENTS: Are you compliant with the new Food Allergen Requirements: yes x
no ~~no~~ certify under the penalties of perjury that I, to my best knowledge and belief, have filed all state tax returns and paid all state taxes required under law.

Murro Van Meter _____
* Signature of Individual or Corporate Name (mandatory) By: Corporate Officer (mandatory, if applicable)

**Social Security/ Federal Identification Number. 013 72 6655 (MANDATORY)

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

** Your Federal Identification Number will be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing or tax payment obligations. Licensees who fail to correct their non-filing or delinquency will be subject to license suspension or revocation.

This request is made under the authority of M.G.L. Chapter 62C Section 49A.

Deey Co
Health Agent

3/18/16
Date

Date Received _____ By (initials) _____ Fee _____ Date Issued _____

CV
FS 2939

TOWN OF WELLFLEET
300 MAIN STREET
WELLFLEET, MA 02667

2016

Fee 75.00
BOH Fee 100.00
Processing Fee 20.00
TOTAL \$195.00

Business Name/Map/Lot JOEYS FOOD TRUCK

Mailing Address PO BOX 696

Town/State/Zip WELLFLEET MA 02667

Business Street Address 31 SIBLEY ST GRAFTON MA

Business Telephone No. 774.573.6529 Federal ID Number (Mandatory) 47-4059273

Manager JOSEPH RUGO E-Mail Address JOEYSFOODTRUCK@GMAIL.COM

1. Applicant is (a) an: Individual
2. If applicant is an individual or partnership please answer below:

Applicant #1

- a. Tel. No. 774.573.6529
- b. Name JOSEPH RUGO
- c. Street Address 31 SIBLEY ST GRAFTON MA 01519
- d. Mailing Address PO BOX 696 WELLFLEET MA 02667

Applicant #2

- a. Tel. No. _____
- b. Name _____
- c. Street Address _____
- d. Mailing Address _____

3. If applicant is a corporation or trust please answer below:

List the titles of all officers and manager:

Title	Full Name	Home Address
OWNER	JOSEPH RUGO	31 SIBLEY ST

4. Corporate or Trust Name _____
Corporate Mailing Address _____
Corporate Tel. No. _____

5. Anticipated Opening Date: Year Round _____ Seasonal MAY - OCT
6. Fully describe type of business conducted (i.e. retail, restaurant, food, gallery): Food TRUCK / mobile
concessions
7. Seating Capacity _____ Hours of Operation 7am - 6pm
8. Special conditions or Restrictions required by Zoning Board of Appeals, Board of Selectmen or Board of Health. Please attach copies:

9. Fully describe premises to be licensed including number of rooms and square footage: _____

10. Has any person in this application ever had his/her license revoked or cancelled? _____

If yes, state for each name the date and reasons why the license was revoked or cancelled: _____

11. I certify under the penalties of perjury that I, to the best knowledge and belief, have filed all state tax returns and paid all state taxes under law. I further certify that in the conduct of this business I will abide by all Town bylaws and regulations.

[Signature]
*Signature of Individual or Signature of
Corporate Officer w/Title (Mandatory)

OWNER / JOEYS FOOD TRUCK
Corporate Name (Mandatory if Applicable)

47-4059273
Federal Identification No. **MANDATORY**

4/13/16
Date of Application

*Approval of a contract or other agreement will not be granted unless this certification clause is signed by the applicant.
** Your social security number will be furnished to the MA Dept. of Revenue to determine if you have met tax filing or payment obligations. (This is required by the state.) Providers who fail to correct their non-filing or delinquency will not have a contract or other agreement issued, renewed or extended. This request is made under the authority of M.G.L. c. 62C s. 49A.

FOR OFFICE USE ONLY BELOW THIS LINE

Department Head or Designee Signatures

Police Dept. [Signature] Date 4/14/16 Comment OK

Fire Dept. [Signature] Date 4/21/16 Comment [Signature]

Tax Collector [Signature] Date 4/21/16 Comment _____

Bldg Inspector _____ Date _____ Comment _____

Bd. Of Health [Signature] Date 5/5/16 Comment OK

Date Received 4/13/16 Fee Received _____ By (initials) [Signature] Date Issued _____

APPLICATION FOR PERMIT.

APPLICATION MUST BE FILLED OUT COMPLETELY

Name JOSEPH RUGO

Mailing Address PO BOX 696

Town/State/Zip WELLFLEET MA 02667

Business Address 31 SIBLEY ST GRAFTON

Owner's Name JOSEPH RUGO Home Tel. 774 573 6529 E-Mail JOEYRUGO@GMAIL.COM

Manager's Name JOSEPH RUGO Home Address 31 SIBLEY ST GRAFTON MA

If Corporation or Partnership, give name, title and home address of officers or partners.

Name	Title	Home Address
<u>JOSEPH RUGO</u>	<u>OWNER/PRESIDENT</u>	<u>31 SIBLEY ST</u>
<u>Nicholas Kirkpatrick</u>	<u>VICE-PRESIDENT</u>	<u>GRAFTON MA</u>
		<u>31 SIBLEY ST GRAFTON MA</u>

Establishment is open 6 months a year. Total seating capacity _____ Take-out service only? yes

Name of Certified Food Handler (s) JOSEPH RUGO P.I.C. JOSEPH RUGO

Does establishment have outside seating? _____ Seating Capacity _____ is area enclosed? _____ Capacity _____

If seating capacity are over 25, person Chokesaver Certified _____

Applications for all licenses/permits required by the Board of Selectmen have been filed for the year 2015 yes no _____

PLEASE CHECK PERMIT (S) YOU ARE APPLYING FOR:

- Temporary Food Service
- Retail Food
- Mobile Unit
- Bed & Breakfast
- Caterer
- Food Service
- Residential Kitchen

FOR FOOD SERVICE ESTABLISHMENTS: Are you compliant with the new Food Allergen Requirements: yes _____ no _____

I certify under the penalties of perjury that I, to my best knowledge and belief, have filed all state tax returns and paid all state taxes required under law.

Joseph E Rugo
* Signature of Individual or Corporate Name (mandatory)

OWNER
By: Corporate Officer (mandatory, if applicable)

47-4059273

Social Security/ Federal Identification Number. **(MANDATORY)

* This license will not be issued unless this certification clause is signed by the applicant.
** Your Federal Identification Number will be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing or tax payment obligations. Licensees who fail to correct their non-filing or delinquency will be subject to license suspension or revocation.

This request is made under the authority of M.G.L. Chapter 62C Section 49A.

[Signature]
Health Agent

5/5/16
Date

Date Received 4/13/16 By (initials) JRU Fee _____ Date Issued _____

APPLICATION

Date Applied:

Date Approved:

Date Issued:

Fee \$50.00

Office Use Only	Fees Paid:	Tax Cert:	Resumes:	H&P Info:	Plan:	Interview:
-----------------	------------	-----------	----------	-----------	-------	------------

The undersigned hereby applies for a Food Truck License in accordance with the provisions of Town of Wellfleet Board of Selectmen Regulations.

(PLEASE TYPE OR PRINT CLEARLY)

Name of Applicant: JOSEPH RUGO

Date: 4/5/16

D.O.B: 6/22/88

Drivers. License Number:

Fed.ID #:

S95838111

47-4059273

Mass Division of Motor Vehicles Lic Number:

S95838111

Business Address:

31 SIBLEY ST GRAFTON MA 01519

Home Address:

31 SIBLEY ST GRAFTON MA 01519

Business Telephone:

774.573.6529

Cell Phone:

774.573.6529

Name of Operation:

JOEYS FOOD TRUCK

Plan Review and/or Preliminary Approval (Required for Approval)

Reviewing	Signature of Approving	Date of Plan
-----------	------------------------	--------------

Department	Authority	Review/Approval
Building Department:		
Health Department:	<i>[Signature]</i> 5/5/16	
Police Department	<i>[Signature]</i> 4/14/16	
Fire Department:		

PROVIDE THE FOLLOWING INFORMATION WITH RESPECT TO EACH LOCATION:

What will be the hours of operation? 7am - 6pm

Time(s) of Peak Customer Activity 11am - 2pm

Est. Number of Customers at Peak Time(s): 10-15

Est. Number of Employees at Peak Time(s): 2-3

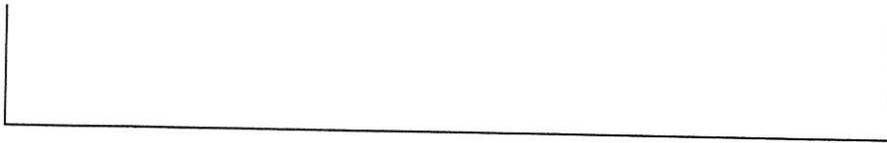
What provisions have been made for trash, wastewater, potable water, electric and recycling?

COMMERCIAL KITCHEN: 2207 Rte 6 Wellfleet MA 02667

LIST THE LOCATIONS WHERE THE MOBILE FOOD VEHICLE WILL BE DEPLOYED AND ATTACH A SKETCH OF HOW THE VEHICLE WILL BE POSITIONED AND OTHER DETAILS OF THE AREA TO BE LICENSED.

(Please provide a sketch for each location on a separate piece of paper.)

Location(s) 2207 Rte 6 Wellfleet MA 02667

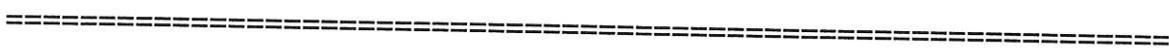


I the undersigned state that the information provided in this application, and associated attachments, is true and accurate to the best of my knowledge:

Signature: *Joseph F Rugo* Printed Name: JOSEPH F RUGO

Date: 4/5/16

Note: No Food Truck License will be approved until the applicant addresses all issues and/or concerns to the satisfaction of the Board of Selectmen; and no Food Truck License will be issued until all required inspections have been conducted, permits granted, and final approvals given.



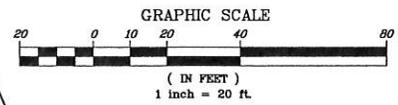
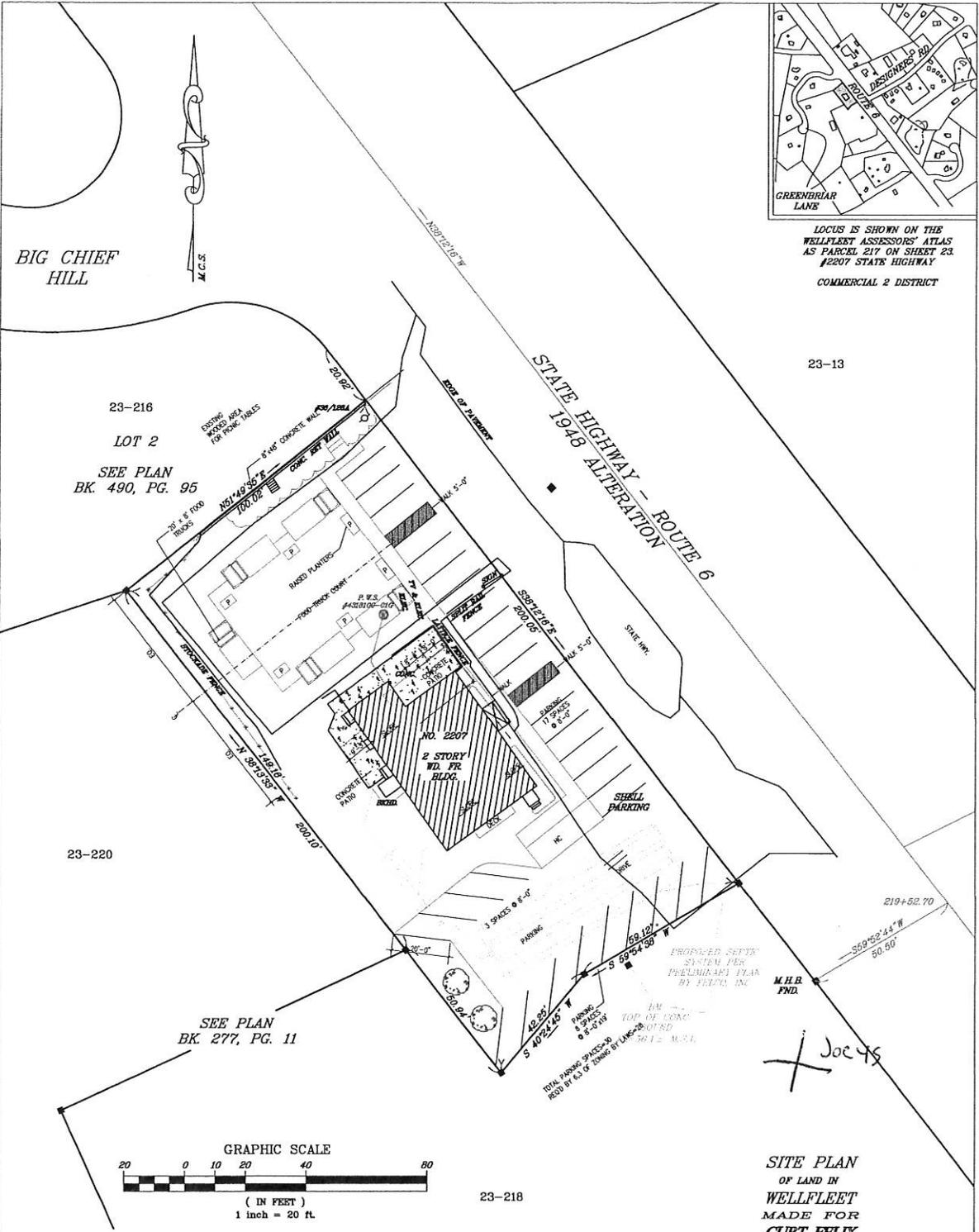
FOR OFFICE USE ONLY

Final Permits/Approvals Granted (Required Before TFL will be Issued)

Approving Department	Yes	No	If "No," Reason Why	Date of Final Approval
Building Department:				
Health Department:	✓			4/5/16
Police Department:				
Fire Department:				



LOCUS IS SHOWN ON THE
WELLFLEET ASSESSORS' ATLAS
AS PARCEL 217 ON SHEET 23
#207 STATE HIGHWAY
COMMERCIAL 2 DISTRICT



**SITE PLAN
OF LAND IN
WELLFLEET
MADE FOR
CURT FELIX**

SCALE: 1"=20' DECEMBER 28, 2015
SLADE ASSOCIATES, INC., REGISTERED LAND SURVEYORS
10 PINE POINT ROAD, WELLFLEET, MA 02867

DENOTES DRILL HOLE IN CONCRETE MONUMENT
FOUND UNLESS OTHERWISE INDICATED.

PLAN #2015-127

**PARKING ANNOTATED
EURICH & ASSOCIATES**



2207 ROUTE 6 Curt Felix SITE PLAN PROPOSED C1.01 1-28-17	Surveyor: Eurich & Associates Newton, MA 02460 817 962 7402 eurich@eurich.com
	Structural Engineer: Newton, MA
NOT FOR CONSTRUCTION	SCHEMATIC DESIGN
1 DATE OF FIELD: 12/23/2015 DATE OF PLAN: 12/23/2015	1 DATE OF FIELD: 12/23/2015 DATE OF PLAN: 12/23/2015

SPECIAL STATE LICENSE
Hawker or Pedler

No 121267 A

Licensee: Joseph Rugo
1878 Rte 6
S. Wellfleet, MA 02667



Expires: 6-21-16

Tuesday, April 12, 2016

Tax Certification

Food Truck Gypsy INC.

D.B.A. Joeys Food Truck

Joseph Rugo

31 Sibley st.

Grafton, MA 01519

EIN # 47-4059273

JOSEPH F RUGO V

774.573.6529

joeysfoodtruck@gmail.com

P.O. Box 696
Wellfleet, MA
01519

Career Objective

To work and grow in a professional, respectful environment, where my knowledge, experience, and creativity can be put to best use.

Experience

Owner, JOEYS FOOD TRUCK, Massachusetts — 2014 - Present
Creation, Development, Management, & Operations of a successful mobile food business. Have added an additional truck to the fleet each year of operations. Three will be in business on Cape Cod over Summer 2016.

Owner, RUGO LANDSCAPING, Provincetown, Truro — 2010-2014
Owned & Operated a small-scale landscaping company. Servicing up to 10+ properties on a weekly basis.

Assistant Manager, CIRO & SALS, Provincetown — 2010-2013
Assisted the GM with daily staffing, ordering, and customer needs. Ability to step-in to many different roles to fill a short staffed position.

Server, BUBULAS BY THE BAY, Provincetown — 2011- 2014
Server at a fast paced, high energy dining establishment. Ability to multi-task successfully and work well with customers and staff.

Education

Emmanuel College: Boston, MA — Political Science, 2010

Skills

My greatest skill is the ability to make decisions and follow through with them. I find ease in making connections with diverse types of people from all backgrounds and walks of life. I am proficient in Microsoft Word, and Excel.

References

Becky Rosenberg, Director: Wellfleet Recreation

Worked closely together to establish Bakers Field food service location in 2014 and 2015. Assisted Wellfleet Rec Dept. with summer camp program & Recreation sponsored events and fundraisers

300 Main St, Wellfleet, MA

508.237.1167

Carl Erickson, CEO: Beacon Worldwide

Carl has been a father figure to me since middle school years. He has advised me on many things from choosing a college to current business decisions. He has also been a landlord over the past year.

13 Bayberry Ln, Millbury, MA

856.472.3589

John Yingling, Owner: Spiritus, Bubulas by the Bay, Local 187

A regular customer, friend, and supporter of JOEYS FOOD TRUCK. Was a big help in establishing the business in 2014

7 Hatch Rd, Truro MA

508.414.4871

Zachary Luster, GM: Ciro & Sals

General Manager of Ciro & Sals and long time friend and college roommate. Introduced me to the outer cape in 2010 and showed me the ropes of restaurant management.

4 Kiley Ct, Provincetown MA

774.216.9813

CV
FS 2941
FT

TOWN OF WELLFLEET
300 MAIN STREET
WELLFLEET, MA 02667

2016

Fee 75.00
BOH Fee 100.00
Processing Fee 20.00
TOTAL \$195.00

Business Name/Map/Lot Provincetown Pilgrim Properties LLC
D.B.A. KUN FU Dumplings

Mailing Address 418 Commercial St Provincetown, MA 02657

Town/State/Zip P

Business Street Address 2207 State Highway, wellfleet, MA

Business Telephone No. 941-350-1194 Federal ID Number (Mandatory) 46-48-38936

Manager Stephen Rome E-Mail Address stephenrome@me.com

1. Applicant is (a) an: ~~Individual~~ LLC.
2. If applicant is an individual or partnership please answer below:

Applicant #1

a. Tel. No. 941-350-1194

b. Name Stephen Rome

c. Street Address 418 Commercial St P-town, MA, 02657

d. Mailing Address

Applicant #2

a. Tel. No. 718-808-5292

b. Name Chuang Tong

c. Street Address 372 Commercial St P-town, MA 02657

d. Mailing Address

3. If applicant is a corporation or trust please answer below:

List the titles of all officers and manager:

Title	Full Name	Home Address
Manager	Stephen Rome	418 Commercial St P-town, MA 02657

4. Corporate or Trust Name Provincetown Pilgrim Properties LLC

Corporate Mailing Address 418 Commercial St. P-town, MA 02657

Corporate Tel. No. 941-350-1194

5. Anticipated Opening Date: Year Round _____ Seasonal 05/20/2016

6. Fully describe type of business conducted (i.e. retail, restaurant, food, gallery): Food, Chinese

7. Seating Capacity N/A Hours of Operation 11am - 8pm

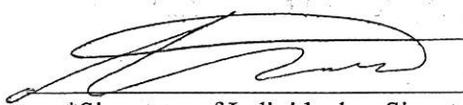
8. Special conditions or Restrictions required by Zoning Board of Appeals, Board of Selectmen or Board of Health. Please attach copies:

9. Fully describe premises to be licensed including number of rooms and square footage: N/A

10. Has any person in this application ever had his/her license revoked or cancelled? No

If yes, state for each name the date and reasons why the license was revoked or cancelled: _____

11. I certify under the penalties of perjury that I, to the best knowledge and belief, have filed all state tax returns and paid all state taxes under law. I further certify that in the conduct of this business I will abide by all Town bylaws and regulations.


*Signature of Individual or Signature of Corporate Officer w/Title (Mandatory)

Provincetown Pilgrim Properties LLC.
Corporate Name (Mandatory if Applicable)

46-4838936
Federal Identification No. **MANDATORY**

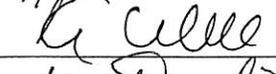
04/22/16
Date of Application

*Approval of a contract or other agreement will not be granted unless this certification clause is signed by the applicant.
** Your social security number will be furnished to the MA Dept. of Revenue to determine if you have met tax filing or payment obligations. (This is required by the state.) Providers who fail to correct their non-filing or delinquency will not have a contract or other agreement issued, renewed or extended. This request is made under the authority of M.G.L. c. 62C s. 49A.

FOR OFFICE USE ONLY BELOW THIS LINE

Department Head or Designee Signatures

Police Dept.  Date 4/25/16 Comment ok

Fire Dept.  Date 5/1/16 Comment _____

Tax Collector  Date 5/3/16 Comment _____

Bldg Inspector _____ Date _____ Comment _____

Bd. Of Health _____ Date _____ Comment _____

Date Received 4/22/16 Fee Received 195.00 By (initials) JMU Date Issued _____

APPLICATION FOR OPERATION OF A FOOD TRUCK 2016
APPLICATION MUST BE FILLED OUT COMPLETELY

The undersigned hereby applies for a Food Truck License in accordance with the provisions of Town of Wellfleet Board of Selectmen Regulations.

(PLEASE TYPE OR PRINT CLEARLY)

Name of Applicant: Stephen Rome Date: 04/22/2016

D.O.B: 05/24/1984

Drivers License Number: 579154931 Fed.ID #: 46-4838936

Business Address: 2207 State Highway wellfleet, MA

Home Address: 418 Commercial St. Provincetown, MA 02657

Business Telephone: 941-350-1194

Cell Phone: 11

Name of Operation: Kung Fu Dumplings

Plan Review and/or Preliminary Approval (Required for Approval)

Reviewing Department	Signature of Approving Authority	Date of Plan Review/Approval
Building Department:		
Health Department:		
Police Department		4/25/16
Fire Department:		5/2/16

PROVIDE THE FOLLOWING INFORMATION WITH RESPECT TO EACH LOCATION:

What will be the hours of operation? 11AM - 8PM

Time(s) of Peak Customer Activity N/A

Est. Number of Customers at Peak Time(s): N/A

Est. Number of Employees at Peak Time(s): 3

What provisions have been made for trash, wastewater, potable water, electric and recycling?

The landlord will provide,

LIST THE LOCATIONS WHERE THE MOBILE FOOD VEHICLE WILL BE DEPLOYED AND ATTACH A SKETCH OF HOW THE VEHICLE WILL BE POSITIONED AND OTHER DETAILS OF THE AREA TO BE LICENSED.

(Please provide a sketch for each location on a separate piece of paper.)

Location(s)	2207 State Highway, Wellfleet, MA

I the undersigned state that the information provided in this application, and associated attachments, is true and accurate to the best of my knowledge:

Signature: 

Printed Name: Stephen Rome

Date: 04/22/2016

Note: No Food Truck License will be approved until the applicant addresses all issues and/or concerns to the satisfaction of the Board of Selectmen; and no Food Truck License will be issued until all required inspections have been conducted, permits granted, and final approvals given.

FOR OFFICE USE ONLY

Final Permits/Approvals Granted (Required Before FTL will be Issued)

Approving Department	Yes	No	If "No," Reason Why	Date of Final Approval
Building Department:				
Health Department:				
Police Department:				
Fire Department:				

2016

TOWN OF WELLFLEET
300 Main Street
Wellfleet, MA 02667

Hillary Greenberg-Lemos, Health Agent
349-0308
FOOD SERVICE ESTABLISHMENTS

APPLICATION FOR PERMIT

APPLICATION MUST BE FILLED OUT COMPLETELY

Name Stephen Rome

Mailing Address 418 Commercial St

Town/State/Zip Provincetown, MA 02657

Business Address 2207 State Highway, Wellfleet, MA

Owner's Name _____ Home Tel. _____ E-Mail _____

Manager's Name _____ Home Address _____

If Corporation or Partnership, give name, title and home address of officers or partners.

<u>Name</u>	<u>Title</u>	<u>Home Address</u>
<u>Stephen Rome</u>	<u>manager</u>	<u>418 commercial st.</u>

Establishment is open 6 months a year. Total seating capacity N/A Take-out service only? yes

Name of Certified Food Handler (s) Stephen Rome P.I.C. _____

Does establishment have outside seating? NO Seating Capacity N/A is area enclosed? NO Capacity N/A

If seating capacity are over 25, person Chokesaver Certified _____

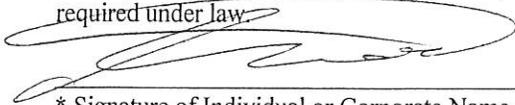
Applications for all licenses/permits required by the Board of Selectmen have been filed for the year 2015 yes _____ no

PLEASE CHECK PERMIT (S) YOU ARE APPLYING FOR:

- Temporary Food Service
- Retail Food
- Mobile Unit
- Bed & Breakfast
- Caterer
- Food Service
- Residential Kitchen

FOR FOOD SERVICE ESTABLISHMENTS: Are you compliant with the new Food Allergen Requirements: yes no _____

I certify under the penalties of perjury that I, to my best knowledge and belief, have filed all state tax returns and paid all state taxes required under law.



* Signature of Individual or Corporate Name (mandatory)

By: Corporate Officer (mandatory, if applicable)

46-4838936

Social Security/ Federal Identification Number. **(MANDATORY)

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

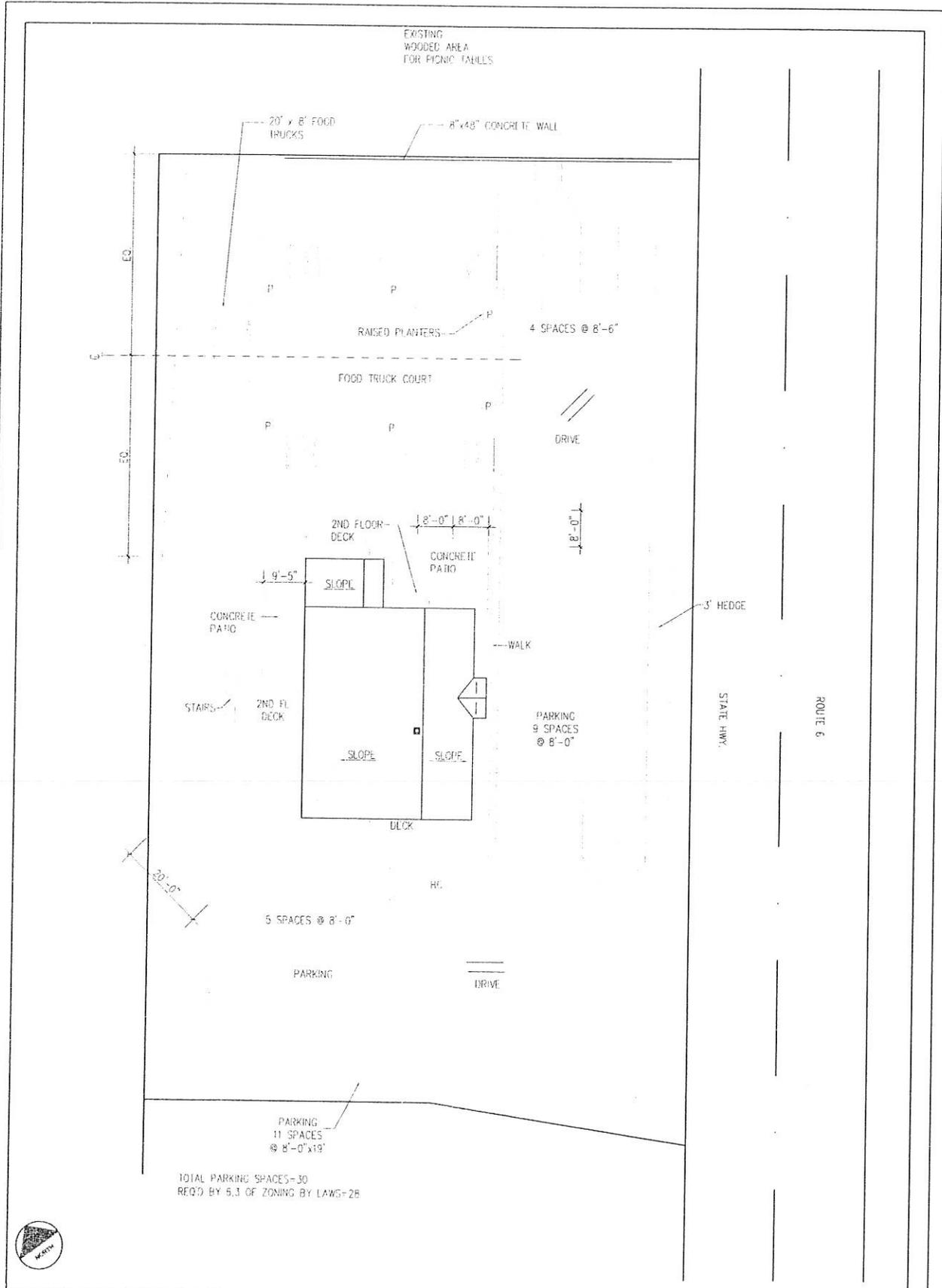
** Your Federal Identification Number will be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing or tax payment obligations. Licensees who fail to correct their non-filing or delinquency will be subject to license suspension or revocation.

This request is made under the authority of M.G.L. Chapter 62C Section 49A.

Health Agent

Date

Date Received _____ By (initials) _____ Fee _____ Date Issued _____



TOTAL PARKING SPACES=30
REQD BY 5.3 OF ZONING BY LAWS=28

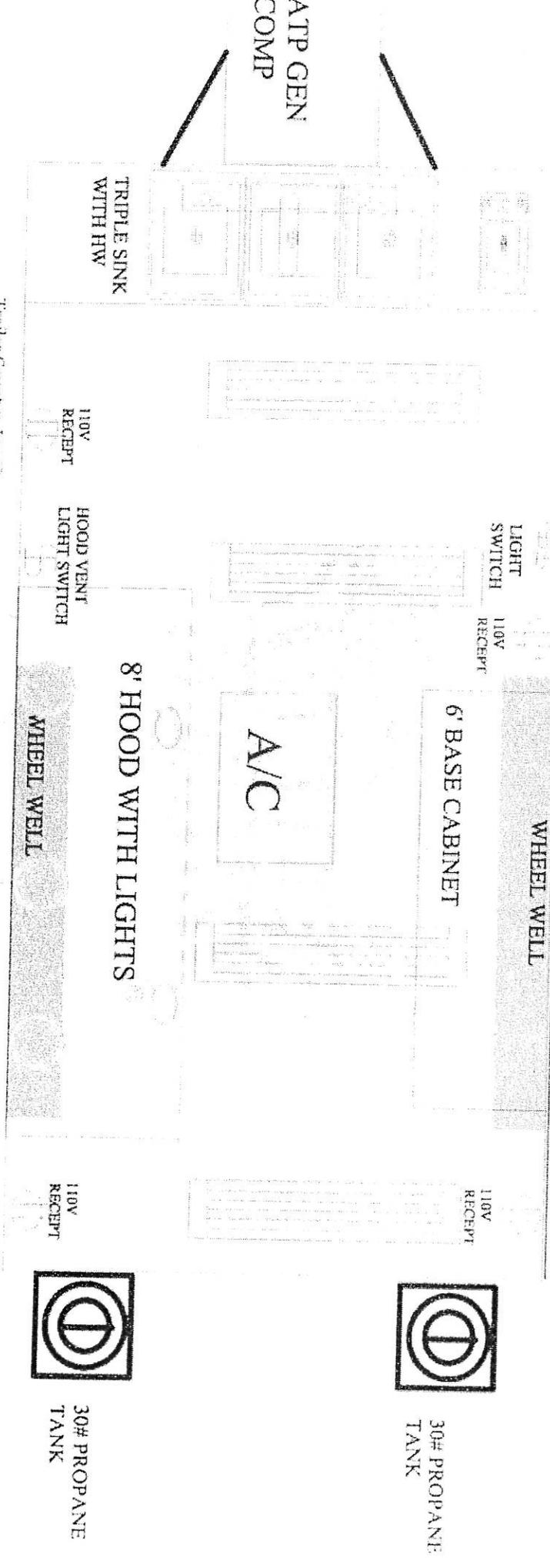


<p>Eurich & Associates Newton, MA 02450</p> <p>817 462-4400 newton@eurich.com</p> <p>Project Team</p>	
<p>Surveyor NEWTON, MA Structural Engineer NEWTON, MA</p>	
<p>NOT FOR CONSTRUCTION</p>	
<p>SCHEMATIC DESIGN</p>	
<p>2207 ROUTE 6 Curt Felix SITE PLAN PROPOSED</p>	
<p>C101</p>	

8.5 X 18 CONCESSION/VENDING TRAILER
 12" EXTRA INTERIOR HEIGHT
 WHITE METAL WALLS AND CEILING
 ATP DIAMOND PLATE FLOORING

36" SIDE DOOR
 PULLED 24"
 OFF FRONT OF
 TRAILER

6' CONCESSION WINDOW
 WITH 6' SERVING SHELF



Trailer Country, Inc.

PROPANE STUBOUTS



30# PROPANE TANK



30# PROPANE TANK

TOWN OF WELLFLEET
APPLICATION FOR SPECIAL EVENT LIQUOR LICENSE

1. Applicant Wellfleet Shellfish Promotion and Tasting, Inc.
Address P.O. Box 2156, Wellfleet, MA, 02667 Telephone 508.349.3499
2. Affiliation/Group Wellfleet OysterFest For Profit _____ Non Profit X
3. Type of License All Alcohol (\$100.00/day) _____ Beer and Wine (\$50.00/day) X
4. Type of Activity Being Conducted Wellfleet OysterFest to be held on October 15 & 16, 2016. This two day public street festival benefits the local community and promotes Wellfleet Shellfishing and Aquaculture, the town's primary industry.
5. Date October 15 & 16, 2016 Hours of Service 10am -5pm each day
6. Description of Premises Beer and wine will be served and consumed in a secure and contained area located in the Town Hall parking lot.
7. Name, Address, Telephone of Designated Manager (person responsible for activity)
Mac Hay, SPAT Board President, P.O. Box 2156, Wellfleet, MA, 02667
8. If activity involves food service, please describe fully (i.e. raw shellfish, heated casseroles, bakery goods, etc.)
The OysterFest will include only ServSafe food purveyors which include restaurateurs, local shell fisherman offering raw bars and a variety of independent food cart vendors.



Applicant's signature

February 15, 2016
Date

Police Dept. Signature *[Signature]* 3/17/16

Comments/Conditions OK
same as previous
years

Building Dept. Signature *[Signature]* 4-1-16

Comments/Conditions SAME
REQUIREMENTS AS
previous year

Fire Dept. Signature *[Signature]* 3-15-2016

Comments/Conditions FIRE DEPARTMENT/EMS DETAIL
WILL BE REQUIRED AS IN PAST
YEARS.

Health Dept. Signature *[Signature]*

Comments/Conditions TEMPORARY FOOD SERVICE PERMITS
REQUIRED

DPW Dept. Signature *[Signature]*

Comments/Conditions OK 4/14/16

3/14/16
Date Received

Fee

Date Issued

TOWN OF WELLFLEET
APPLICATION FOR SPECIAL EVENT LIQUOR LICENSE

1. Applicant Wellfleet Harbor Actors Theater

Address 2357 Route 6, Wellfleet MA 02667 Telephone 508-349-9428 x105

2. Affiliation/Group WHAT For Profit _____ Non Profit

3. Type of License All Alcohol (\$100.00/day) Beer and Wine (\$50.00/day) _____

4. Type of Activity Being Conducted Special Event

5. Date July 10, 2016 Hours of Service 1:00 PM - 6:00 PM

6. Description of Premises _____

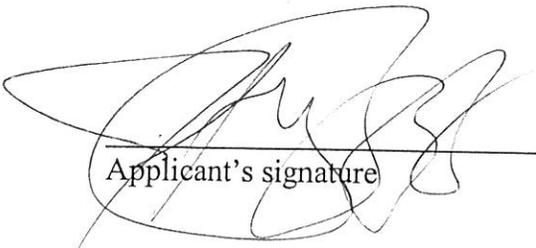
Event tent (seasonal) on property adjacent to theater

7. Name, Address, Telephone of Designated Manager (person responsible for activity)

Jeffrey George 508-349-9428 x 105
2357 Route 6, POB 797 Wellfleet, MA 02667

8. If activity involves food service, please describe fully (i.e. raw shellfish, heated casseroles, bakery goods, etc.)

Catered event : Raw Bar + Buffet


Applicant's signature

March 10, 2016
~~February 18, 2016~~
Date

\$100⁰⁰

Police Dept. Signature [Signature] 3/16/16

Comments/Conditions _____
_____ O.K. _____

Building Dept. Signature [Signature] 4-1-16

Comments/Conditions _____
_____ Permits for Tents _____
_____ Req'd _____

Fire Dept. Signature [Signature] 3/15/16

Comments/Conditions _____

Health Dept. Signature [Signature]

Comments/Conditions _____
_____ TEMPORARY FOOD SERVICE PERMIT _____
_____ REQUIRED IF EVENT IS OPEN TO _____
_____ THE PUBLIC _____

DPW Dept. Signature [Signature]

Comments/Conditions 3/24/16 OK _____

Other _____

Comments/Conditions _____

APR 11 2016
Date Received

paid
Fee

Date Issued

TOWN OF WELLFLEET
APPLICATION FOR SPECIAL EVENT LIQUOR LICENSE

1. Applicant Wellfleet Harbor Actors Theater

Address 2357 Route 6, Wellfleet MA 02667 Telephone 508-349-9428 x105

2. Affiliation/Group WHAT For Profit _____ Non Profit

3. Type of License All Alcohol (\$100.00/day) Beer and Wine (\$50.00/day) _____

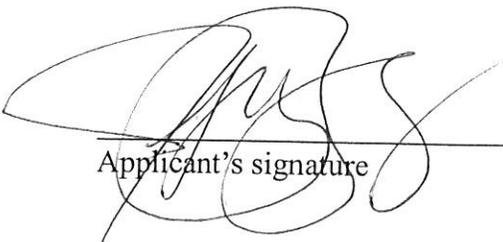
4. Type of Activity Being Conducted Special Event

5. Date July 26, 2016 Hours of Service 5:00pm - 11:00pm

6. Description of Premises _____
Event Tent on patio at entrance to theater

7. Name, Address, Telephone of Designated Manager (person responsible for activity)
Jeffrey George 508-349-9428 x105
2357 Route 6, POB 797 Wellfleet, MA 02667

8. If activity involves food service, please describe fully (i.e. raw shellfish, heated casseroles, bakery goods, etc.)
Catered event: Raw Bar + Buffet


Applicant's signature

March 10, 2016
~~February 18, 2016~~
Date

\$100⁰⁰

Police Dept Signature [Signature] 3/16/16

Comments/Conditions OK

Building Dept. Signature RVS

Comments/Conditions Permits for tents Reg'd

Fire Dept. Signature [Signature]

Comments/Conditions OK

Health Dept. Signature [Signature]

Comments/Conditions TEMPORARY FOOD SERVICE PERMIT NEEDED IF EVENT IS OPEN TO THE PUBLIC

DPW Dept. Signature [Signature]

Comments/Conditions OK 3/24/16

Other TA H&I

Comments/Conditions OK

MAR 11 2016

Date Received

paid
Fee

Date Issued



TOWN OF WELLFLEET APPLICATION FOR TOWN BOARDS & COMMITTEES MEMBERSHIP

Wellfleet depends on its citizens to carry out many of our government's activities. Your community needs your help. *Please volunteer.*

FILL OUT THE FORM BELOW and mail it to:

Wellfleet Selectmen's Office, Town Hall, 300 Main Street, Wellfleet, MA 02667

Name Olga Kahn Date 5/6/16

Mailing Address 30 Marsh View
Wellfleet, MA 02667

Phone (Home) 508 349-0997 (cell) 781 454-9686

E-mail olgakahn@comcast.net

- Please describe briefly any work experience, including volunteer service, that you feel would be useful to the Town: Architect &/or Field Rep for over 25 years on large- and small-scale projects, esp. public and private housing construction.
- Member of Wellfleet Housing Authority, Planning Bd, Historical Review Bd, Historical Commission, Treasurer Democratic Town Comm.
- Added an AADU to my residence and participated in Solarize Wellfleet.
- Worked for Mass Housing and Mass Dept. of Community Affairs (EODD) on building reuse.

Please add any other information that you think may be useful, including education or other formal training, specialized courses, professional licenses or certifications, etc.:

B.A., Barnard College AUTOCAD proficiency

M. Arch. M.I.T. Sch. of Arch. & Planning Spanish-speaker

licensed architect (now retired)

constr. supervisor license (CSL - now retired)

SOMWBA-certified women-owned business

- Committees/Boards of Interest: 1) Appointment to Assembly of Delegates
- 2) _____
- 3) _____

MAY - 6 2016

Town of Wellfleet
Police Department

May 02, 2016

To: Board of Selectmen
From: Chief Ronald L. Fisette

Subject: FULL TIME POLICE OFFICERS REAPPOINTMENT

Full time police officers require annual appointments for the first 5 years of their career, and thereafter they are tenured and require no further appointments.

I request the following individuals be reappointed as a Full Time Police Officer:

Appointment Period: July 1, 2016 through June 30, 2017

<u>Officer:</u>	<u>Initial Appointment</u>
Kevin LaRocco	7/01/2011
George Spirito	10/01/2011
Ryan Murphy	9/08/2014
Laecio De Oliveira	8/26/2015
Mark Braun	04/04/2016

Respectfully submitted for your information and consideration.



Ronald L. Fisette,
Chief of Police

cc: Harry Terkanian, Town Administrator
Joseph Powers, Town Clerk

Town of Wellfleet
Police Department

May 2, 2016

To: Board of Selectmen
From: Chief Ronald L. Fisette

Subject: SPECIAL POLICE OFFICERS REAPPOINTMENT

I request the following individuals be reappointed as a Special Police Officer:

Appointment Period: July 1, 2016 through June 30, 2017

Scott Higgins

Jonathan Hale

Jerre Austin

Bryan Dufresne

Marc Spigel

Respectfully submitted for your information and consideration.



Ronald L. Fisette,
Chief of Police

cc: Harry Terkanian, Town Administrator
Joseph Powers, Town Clerk

Town of Wellfleet
Police Department

May 02, 2016

To: Board of Selectmen
From: Chief Ronald L. Fisette

Subject: SPECIAL POLICE OFFICERS – Department Chaplain

Reverend Paul Cullity, First Congregational Church, Wellfleet has expressed an interest in serving as our Department Chaplain.

I request the following individual be reappointed as a Special Police Officer – Department Chaplain:

Appointment Period: July 01, 2015 through June 30, 2016

Paul Cullity

Respectfully submitted for your information and consideration.



Ronald L. Fisette,
Chief of Police

cc: Harry Terkanian, Town Administrator
Joseph Powers, Town Clerk

Town of Wellfleet
Police Department

May 2, 2016

To: Town Administrator Harry Terkanian, (Parking Clerk)
From: Chief Ronald L. Fiset

Subject: COMMUNITY SERVICE OFFICER APPOINTMENT

I request the following individuals be appointed as a Community Service Officer and be authorized to write parking tickets:

Appointment Period: May 23, 2016 through June 30, 2017

Doig Leathan

Respectfully submitted for your information and consideration.



Ronald L. Fiset,
Chief of Police

Notice of Appointment of Chief Procurement Officer
(Type or print legibly)

1. I hereby provide notice to the Office of the Inspector General of the appointment of a Chief Procurement Officer as defined by the provisions of M.G.L. c. 30B, § 2.

Jurisdiction Name: Town of Wellfleet

Department: Administration

Employee's Title/Position: Town Administrator

Name of Current Employee/CPO: Harry Sarkis Terkanian

Email of Current Employee: harry.terkanian@wellfleet-ma.gov

Date of Appointment: 05/10/2016

2. This appointment is conditioned upon compliance with M.G.L. c. 30B, all applicable statutes, rules, regulations, charters, ordinances, or bylaws, and subject to the following additional **requirements**:

- Designation as a Massachusetts Certified Public Purchasing Official (MCPPO)
- Designation as an MCPPO for Supplies and Services
- Designation as an MCPPO for Design and Construction
- Other Designation/Certification (specify in attachment)
- Completion of the following MCPPO course(s):
 - Public Contracting Overview
 - Supplies and Services Contracting
 - Design & Construction Contracting
 - Construction Management at Risk
 - Other (specify in an attachment)
 - Bidding Basics & Contract Administration
 - Bidding for Better Results
 - Model IFB Course
 - Advanced Topics Update

3. This appointment shall remain in effect until revoked or amended. Otherwise, this appointment shall expire on: 06/30/2016

Full name of the person appointing the CPO: _____

Title: _____

Office Address: 300 Main Street, Wellfleet, MA 02667

Office Telephone: (508) 349-0300

MCPPO Certified? Yes No

Email Address of Appointing Employee: bos@wellfleet-ma.gov

Signed By: _____

Date: _____

I attest under pains and penalties of perjury, the above information is accurate.

Mail the original copy of this form to: Office of the Inspector General, One Ashburton Place, Room 1311, Boston, MA, 02108-1518, Attn: CPO Appointments.



TOWN OF WELLFLEET
APPLICATION FOR TOWN BOARDS & COMMITTEES MEMBERSHIP

Wellfleet depends on its citizens to carry out many of our government's activities. Your community needs your help. *Please volunteer.*

FILL OUT THE FORM BELOW and mail or bring it to:
Wellfleet Selectmen's Office, Town Hall, 300 Main Street, Wellfleet, MA 02667

Name Harry Sarkis Terkianian Date 4/28/16

Mailing Address 80 School Street
Wellfleet

Phone (Home) (508) 349-9077 (cell) (508) 737-6060

E-mail harry@outermostsystems.com

Please describe briefly any work experience, including volunteer service, that you feel would be useful to the Town: _____

current Town Administrator
former Town Moderator

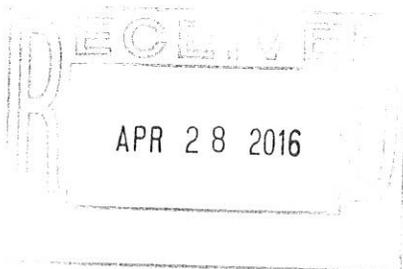
Please add any other information that you think may be useful, including education or other formal training, specialized courses, professional licenses or certifications, etc.:

Mass Certified Public Purchasing Officer
attorney (retired) with municipal law
experience

Committees/Boards of Interest: 1) _____

Building & Needs Assessment
2) (as of 7/1/16)

3) Charter Review Committee
(at large member)
(moderator advised)





MAY - 4 2015

TOWN OF WELLFLEET
APPLICATION FOR TOWN BOARDS & COMMITTEES MEMBERSHIP

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FILL OUT THE FORM BELOW and mail or bring it to:
Wellfleet Selectmen's Office, Town Hall, 300 Main Street, Wellfleet, MA 02667

Name Curtis Felix Date 5/4/2016

Mailing Address P.O. Box 967

Phone (Home) 603-209-6000 (cell) same

E-mail cfelix@planktonpower.net

Please describe briefly any work experience, including volunteer service, that you feel would be useful to the Town:

Wastewater Committee | Biology, Chemistry
background, Forum Beavel, Conservation Trust

Please add any other information that you think may be useful, including education or other formal training, specialized courses, professional licenses or certifications, etc.:

Rate Design + utility forecasting professional
experience at Boston Edison now Eversource

Committees/Boards of Interest: 1) Board of Water Commissioners
2) _____
3) _____



APR - 4 2016

TOWN OF WELFLEET
APPLICATION FOR TOWN BOARDS & COMMITTEES MEMBERSHIP

Wellfleet depends on its citizens to carry out many of our government's activities. Your community needs your help. *Please volunteer.*

FILL OUT THE FORM BELOW and mail or bring it to:
Wellfleet Selectmen's Office, Town Hall, 300 Main Street, Wellfleet, MA 02667

Name Miriam Spencer Date 4/4/16
Mailing Address 55 E Commercial St. Wellfleet
Phone (Home) _____ (cell) 802-591-2986
E-mail mtspencerma@gmail.com

Please describe briefly any work experience, including volunteer service, that you feel would be useful to the Town: For more than one year now I have worked both as the secretary for the Board of Water Commissioners and as the clerk for the Wellfleet Water System.

Please add any other information that you think may be useful, including education or other formal training, specialized courses, professional licenses or certifications, etc.:

- math & teaching - MEd in Curriculum & Instruction
- MEd in Mathematics Education
- training & use in MS Office
- workshop in small water system financing

Committees/Boards of Interest: 1) Board of Water Commissioners
2) _____
3) _____

Attached is confirmation from Town Counsel that my participation on this board poses no conflict of interest as long as correct procedures are followed as outlined

From: Brian Riley [mailto:BRiley@k-plaw.com]
To: harry.terkanian@wellfleet-ma.gov [mailto:harry.terkanian@wellfleet-ma.gov]
Cc: Darren Klein [mailto:DKlein@k-plaw.com], Carolyn M. Murray [mailto:CMurray@k-plaw.com]
Sent: Fri, 25 Mar 2016 14:15:40 -0500
Subject: RE: Wellfleet - Conflict of Interest Question

Harry: Darren asked me to follow up with you on the question below. In my opinion, the employee may be appointed to the Board of Water Commissioners and would only need to file the attached written disclosure with the Town Clerk. I would first note that in order to receive confirmation from the State Ethics Commission, I would need to send this as a formal opinion and address it to the employee (who would need to request the opinion) and copy the Ethics Commission. However, this particular question is straightforward, in my opinion. I assume, pursuant to the Town Charter, that the employee's administrative position is filled by appointment of the Town Administrator.

In my opinion, the employee may be appointed to the Board of Water Commissioners ("Board") whether or not the Board is designated as "special municipal employees." As you note, a paid appointed position is only eligible for special employee designation if it involves less than 800 hours per year, or an average of 15 hours per week, so anything above that and the position is ineligible. Prior to the State Ethics Commission adopting some regulations a few years ago, this appointment would have required the Board to be special municipal employees, or otherwise the multiple office holding would have posed a violation of Chapter 268A, §20 which limits one's ability to hold one office and have a financial interest in a "contract" [paid position]. The Ethics Commission enacted the following regulation, however, to make it easier for Town employees to volunteer for an unpaid board:

930 CMR 6.02(3)(a)

(a) A public employee, or a person with an existing direct or indirect financial interest in a public contract, does not violate M.G.L. c. 268A, § 7, 14, or 20 by being elected or appointed to an uncompensated position with a public agency at the same level of government, including such a position with the same agency in which the public employee is serving, provided that the employee makes a disclosure as set forth in 930 CMR 6.01(6). Persons acting within this exemption remain subject to the other prohibitions of M.G.L. c. 268A, including, but not limited to, M.G.L. c. 268A, §§ 8A, 15A, and 21A concerning election and appointment by public boards; M.G.L. c. 268A, §§ 6, 13, and 19 concerning self-dealing; and M.G.L. c. 268A, § 23, the standards of conduct.

So if the employee is appointed to the Board, she should immediately fill out the attached disclosure form and file it with the Town Clerk. If needed, here are the Ethics Commission's instructions for §6.02:

<http://www.mass.gov/ethics/disclosure-forms/inst-6-02-uncomp-position-new.pdf>

As an unpaid board, the Board of Water Commissioners may be designated as "special municipal employees" by the Board of Selectmen, but that would not be necessary in this particular case, in my opinion. If there are further questions, please let me know.

Very truly yours,
Brian Riley

Brian W. Riley, Esq.
KOPELMAN AND PAIGE, P.C.
101 Arch Street, 12th Floor
Boston, MA 02110
O: (617) 654 1722
F: (617) 654 1735
C: (617) 909 9084
briley@k-plaw.com
www.k-plaw.com



TOWN OF WELLFLEET
APPLICATION FOR TOWN BOARDS & COMMITTEES MEMBERSHIP

Wellfleet depends on its citizens to carry out many of our government's activities. Your community needs your help. *Please volunteer.*

FILL OUT THE FORM BELOW and mail it to:

Wellfleet Selectmen's Office, Town Hall, 300 Main Street, Wellfleet, MA 02667

Name Reatha Ciotti Date 4-20-2016

Mailing Address 85 Old Wharf Rd.
Wellfleet, MA 02667

Phone (Home) 508 349 7545 (cell) _____

E-mail ciotti-family@comcast.net
underscore

Please describe briefly any work experience, including volunteer service, that you feel would be useful to the Town: _____

I currently serve on the Wellfleet Library Board of Trustees and have for the last 13 years. Just finished serving on the Search Committee for Town Administrator.

Please add any other information that you think may be useful, including education or other formal training, specialized courses, professional licenses or certifications, etc.:

I do not have formal training in zoning codes, but I will work to learn what is needed to be of service to the ZBA and will offer common sense. My interest is in Wellfleet's well-being as a community.

Committees/Boards of Interest: 1) Zoning Board of Appeals

2) _____

3) _____

APR 21 2016



TOWN OF WELLFLEET
APPLICATION FOR TOWN BOARDS & COMMITTEES MEMBERSHIP

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FILL OUT THE FORM BELOW and mail or bring it to:
Wellfleet Selectmen's Office, Town Hall, 300 Main Street, Wellfleet, MA 02667

Name John Cumber Date 4/15/2016

Mailing Address 380
~~308~~ Old Chyvesett Neck Rd
Wellfleet MA 02667

Phone (Home) 508 349 7228 (cell) 502-640-8937

E-mail Cumber @ Louisville . edu

Please describe briefly any work experience, including volunteer service, that you feel would be useful to the Town: Bike + Walkway Committee, Local history,
Volunteer Audubon Society

Please add any other information that you think may be useful, including education or other formal training, specialized courses, professional licenses or certifications, etc.:

I have a Ph.D. in economic & environmental
history. I have published 2 books on
environmental studies.

- Committees/Boards of Interest: 1) Board of Health Board
2) Zoning Board
3) Housing





TOWN OF WELLFLEET
APPLICATION FOR TOWN BOARDS & COMMITTEES MEMBERSHIP

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FILL OUT THE FORM BELOW and mail it to:

Wellfleet Selectmen's Office, Town Hall, 300 Main Street, Wellfleet, MA 02667

Name Hannelore Vanderschmidt Date 4/15/16
15/4/16

Mailing Address Box 509 Wellfleet 02667

Phone (Home) 508 349 9516 (cell) 617 733 5561

E-mail hvanders@bun.edu

Please describe briefly any work experience, including volunteer service, that you feel would be useful to the Town:

Faculty Boston University School of Public Health
10 years to Health board 1990-2000 Wellfleet

Please add any other information that you think may be useful, including education or other formal training, specialized courses, professional licenses or certifications, etc.:

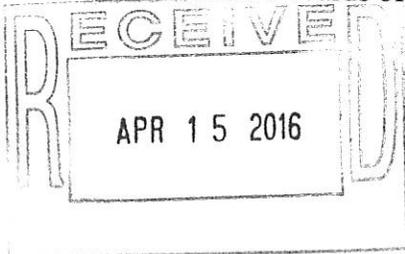
Ph.D in behavioral psychology

Committees/Boards of Interest: 1)

Board of Health

2) _____

3) _____



**TOWN OF WELFLEET
APPLICATION FOR PERMIT TO USE TOWN-OWNED PROPERTY**

Applicant: Wellfleet SPAT, 501(c)(3) Corporation
Wellfleet Shellfish Promotion and Tasting, Inc.

Affiliation or Group: Wellfleet OysterFest

Telephone Number: 508-349-3499
info@wellfleetoysterfest.org

Mailing Address: Wellfleet SPAT
P.O. Box 2156
Wellfleet, MA, 02667

Purpose:

SPAT is requesting the use of town property to host its annual Wellfleet OysterFest on October 15 & 16, 2016. This two day public street festival is geared to benefit the local community and promote Wellfleet Shellfishing and Aquaculture, the town's primary industry.

Town Property to be used (include specific area):

- Town Hall and WPH Parking Lots
- Main Street from Bank St. to Howland St. at the Wellfleet Public Library, inclusive (*please note that vendors booth will be located one side of the street only*)
- Bank Street to Commercial St.
- Approximately 10 spaces in the Mayo Beach Parking Lot will be reserved for cars with a handicap plaque
- Town Hall Conference room for limited use by Event Organizers and Emergency Response Team
- Conference Room on the lower level Town Hall for administrative duties

Town property dates & hours of use:

- 12:00AM TUESDAY 10/11/2016 THROUGH 12:00AM TUESDAY 10/18/2016: Town Hall Lot (from North side of Town Hall Building towards Squire's Pond) WILL BE CLOSED TO PUBLIC AND NO PARKING ALLOWED DURING INFRASTRUCTURE SET UP. HANDICAPPED AND ADMINISTRATIVE STAFF PARKING WILL BE AVAILABLE ON TUESDAY AND WEDNESDAY, OCTOBER 11 & 12, 2016.
- 12:00AM THURSDAY 10/13/2016 THROUGH 12:00AM TUESDAY 10/18/2016: All of Town Hall Lot (from Main Street toward Squire's Pond) WILL BE CLOSED AND ABSOLUTELY NO PARKING WILL BE ALLOWED AS CARS SEVERLY IMPEDE SET-UP. *Please note that the handicapped ramp in the rear of Town Hall will be kept free and clear from event equipment during business hours (weekdays, 8am – 4pm) and we will accommodate special parking needs.*
- 12:00AM THURSDAY 10/13/2016 THROUGH 12:00AM MONDAY 10/17/2016: Main St. Parking Lot across from Wellfleet Preservation Hall WILL BE CLOSED AND NO PARKING ALLOWED - TOWING SIGNS POSTED. *Please note that in consideration to Preservation Hall and their programs we will permit limited parking in the lot on Friday afternoon and evening.*
- 3:00AM SATURDAY 10/15/2016 THROUGH 6:00PM SUNDAY 10/16/2016 Main St. inclusive from Holbrook Ave. to Bank St. – NO STREET PARKING. *We request that the Wellfleet Police Department monitor this and tow any cars lot by 5am each morning that have parked overnight in either parking lot or on the street.*
- 9:00AM WEDNESDAY 10/12/2016 THROUGH 5:00PM MONDAY 10/17/2016 – Lower level Conference Room of Town Hall. USED FOR STORAGE AND ADMINISTRATIVE DUTIES
- 7:00AM SATURDAY 10/15/2016 THROUGH 6:00PM SUNDAY 10/16/2016- Town Hall Conference Room USED FOR POLICE, FIRE, SAFETY AND EVENT ORGANIZER HEAD QUARTERS

- SUNDAY 10/16/2016 7:00AM – 11:00AM – 5K ROAD RACE AND KIDS RACE sponsored by the Wellfleet Recreation Department, exact route still to be determined.

Describe activity including purpose, number of persons involved, equipment to be used, parking arrangements, food/beverage service, etc. Also please indicate if fees will be charged by applicant.

- Wellfleet OysterFest, a two day public street festival, will include food vendors, craft vendors, raw bars, kid's area entertainment, beer and wine, main stage activities and music including the shucking contest, cooking demos at Wellfleet Preservation Hall, educational talks at the public library, walking tours on Cannon Hill, grant tours at the Town Pier and Oyster Restoration site, etc.
- All hand sinks, portable restrooms, fire safety equipment and water located at the event site outlined within the permit application will be provided by SPAT and inspected by town agencies.
- SPAT requests the support of the DPW to prepare event site (by mowing lawns and delivering equipment to be determined at a logistical planning meeting with Town Department Heads and SPAT staff) and cleaning up from event (by picking up specified equipment and sweeping the street and parking lots).

Fees:

Admission fee for Adults is \$5 per person per day in advance, \$10 per person per day at the gate and children 12 and under will be admitted free. Wellfleet resident and non-resident taxpayers will be admitted free with proof of residency to be determined among Wellfleet Administration and SPAT staff.

Permits to be obtained:

- Building (Tents and stage)
- BOH (Temp Food and Sanitation)
- Electric (Power)

Additional:

Planning with all Town Department Heads
 Planning with Fire Department and Public Safety - IAP will be in effect.

Action by the Board of Selectmen:

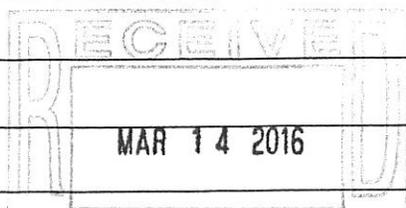
_____ Approved as submitted

_____ Approved with the following condition(s): _____

_____ Disapproved for following reason(s): _____

Signatures of the Board:

Date: _____



Processing Fee: _____

Fee: _____

APPLICANT IS RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND INSPECTIONS

Health/Cons. Agent Signature:
Comments/Conditions:
Permits/Inspections needed:
Temporary FOOD SERVICE

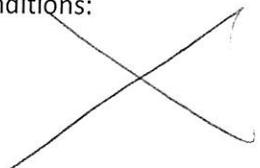
Inspector of Buildings Signature:
Comments/Conditions: 4-1-16
Permits/Inspections needed:
CHECK WITH ELECTRICAL SHOP AND PLUMB & GAS INSPECTOR FOR ANY REQ'D PERMIT

Police Dept. Signature: P/P 3/17/16
Comments/Conditions:
See attached letter

Fire Dept. Signature: R/P 3-15-2016
Comments/Conditions:
FIRE DEPARTMENT/EMS DETAIL WILL BE REQUIRED AS PAST YEARS

DPW Signature: Paul K...
Comments/Conditions: 3/24/16
DPW support pre and post event need to be defined.

Beach Dept. Signature: Com Serv. Dir.
Comments/Conditions: If SPAT is not providing shuttle busses, it makes charging at remote lots something we can not recommend. (See) 4/25/16

Shellfish Constable Signature:
Comments/Conditions:


Harbormaster Signature: Michael...
Comments/Conditions: 4/12

Recreation Dept. Signature:
Comments/Conditions:
Baker's field lot to be controlled by Rec. Dept as in past years.

Town Administrator:
Comments:
NEED COMMENTS FROM DIA. COMMUNITY SERVICES
NOTE SPAT NOT PROVIDING SHUTTLE BUSES
SEE POLICE DEPT. MEMO

Town of Wellfleet
Police Department

March 17, 2016

To: Board of Selectmen
From: Ronald L. Fisette, Chief of Police

Subject: Oyster Festival - 2016

This year the Oyster fest group is looking to make a couple of changes to the event. We will continue to work with the festival group as we have done in the past.

Possible changes for this year are as follows:

The event area would include West Main Street; from Briar Lane to Howland Lane (Library). This would mean that this section of the road will be shut down to motor vehicle traffic, allowing tents and pedestrian traffic on the road. We would be able to handle the motor vehicle traffic by placing a detail officer at the Howland Lane end and detouring traffic around the closed area. The concern is that homes and businesses within the proposed closed off area would be shut down. I have advised the festival group to do outreach to those affected and attempt to get their support.

The current proposal doesn't include the use of town beaches for satellite parking. In essence this responsibility would be turned over to the town to coordinate, pay for and manage the parking, buses, portable toilets, etc. Satellite parking and the management of festival attendees is an essential part of the event and this includes the referenced shuttle buses, portable toilets, people management, etc. Who is responsible for this part of the event, needs to be defined and understood.

My sign off on the use of property form is conditional on the continued meeting and cooperation with all parties as previous years; assigning police officers, security officers, staff, volunteers, etc and satisfactorily resolving the above referenced changes.

As always, please feel free to contact me if you have any questions or comments.

Respectfully submitted for your information and consideration.



Ronald L. Fisette,
Police Chief

cc: Michael Hurley, Lieutenant
Harry Terkanian, Town Administrator
Michelle Insley, Oyster Fest



Wellfleet Select Board
300 Main Street
Wellfleet, MA 02660

March 14, 2016

Dear Select Board Members,

Wellfleet SPAT respectfully submits the attached permit applications for the Use of Town property and a two-day Beer and Wine License for the organization's primary fundraising event, the Wellfleet OysterFest, to be held on October 15 & 16, 2016.

The event now attracts over 25,000 attendees to experience Wellfleet's vibrant, coastal community and attractive vacation destination. The 'Fest has become the premiere fall festival on the Cape and provides a venue for shellfishermen, local businesses, the Town of Wellfleet, as well as charitable and environmental organizations to generate awareness and critical end of season revenue. Conservative estimates project that over \$2 million tourism dollars are spent locally during the event.

Proceeds from the 'Fest are directly reinvested back into the community. In 2015 alone, SPAT awarded over \$213,000. Specifically:

- **\$3800** to Mass Audubon Wellfleet Bay Wildlife Sanctuary in support of their 5th Grade Coastal Ecology Program
- **\$10,000** to the Nauset Regional High School for an annual college scholarship program
- **\$15,000** toward the Benthic Mapping Study of Wellfleet Harbor
- **\$60,000** to create a Shellfish Loan Program in Collaboration with the Community Development Partnership
- **\$125,000** investment in the Aquaculture Research Corporation the source for 80% of the region's shellfish seed

Wellfleet SPAT is committed to ensuring the sustainability of the 'Fest to maintain this level of giving and community support. To that end, each year slight modifications are necessary in order to maintain a safe, enjoyable visitor experience and cost-efficiency. This year SPAT is proposing the following changes to the permit application:

- Admission will be \$5 pp. per day online in advance and \$10 pp. per day at the gate. No more two-day tickets will be offered.
- Wellfleet residents and non-resident taxpayers will be admitted free of charge with proof of residency.

Wellfleet Shellfish Promotion and Tasting, Inc. (SPAT) • P. O. Box 2156 • Wellfleet, MA
02667508.349.3499 • www.wellfleetoysterfest.org

- Vendors will extend on one side of the street from Main and Bank Streets to Main and Howland Streets, just down from the Wellfleet Public Library, as a way to increase the number of community booths and control traffic flow at the Holbrook/Briar/Main intersection.
- SPAT will relinquish any involvement in town parking or shuttle buses.
- No cars will be allowed to park in the Town Hall lot on Thursday and Friday as it severely hinders set-up. Special cases can be discussed.
- Only a limited number of cars will be allowed in the Town parking lot across from Wellfleet Preservation Hall on Friday for the same reason.

In an effort to remain relevant and support the community, SPAT will hold a few aquaculture grant tours this year. This type of eco-tourism program is very successful in communities such as Duxbury. Grant tours provide an opportunity for visitors to learn more about Wellfleet's unique environment and the often-romanticized shellfishing and aquaculture industries. Beach and Recreation Director, Suzanne Thomas, is very supportive of this program. It is something that the Beach and Shellfishing departments would like to offer but lack the staffing. Educational programs like this are aligned with the SPAT mission and are another way for SPAT to partner with the Town of Wellfleet. Dates and specific details are forthcoming.

On behalf of the Board of Directors for Wellfleet SPAT, I would like to thank the town of Wellfleet for its commitment to this organization and our primary fundraising event, the Wellfleet OysterFest.

Respectfully submitted,

Michele Insley
SPAT Executive Director

TOWN OF WELFLEET
APPLICATION FOR PERMIT TO USE TOWN OWNED PROPERTY

Applicant BRENDA WITHERS

Affiliation or Group HARBOR STAGE COMPANY

Telephone Number (516) 317-4842

Mailing Address PO BOX 3009

Email address brenda@harborstage.org

WELFLEET, MA 02667

Town Property to be used (include specific area)

TOWN LANDING (the grass strip next to the parking lot @ 15 KENDRICK / HARBOR STAGE)

Date(s) and hours of use: MON, JULY 25th, 4 PM - DARK

Describe activity including purpose, number of persons involved, equipment to be used, parking arrangements, food/beverage service, etc. Also please indicate if fees will be charged by applicant.

WE hope to host a fundraiser to celebrate & support the Harbor Stage Company. We will use the Town Landing to play Bocce & serve a casual BBQ dinner (provided by Mancani BBQ) (buffet style). We will likely charge a suggested donation of \$65 and host a silent auction inside the Harbor building. Parking will be offered in public lots used by patrons for our shows & proceeds will go towards supporting our Affordable Ticket Initiative.

Describe any Town services requested (police details, DPW assistance, etc.)

None, thank you! Our crowds are very tame!

We'd estimate up to 100 people may attend.

NOTE TO APPLICANTS: All applications must be accompanied by a non refundable \$20.00 processing fee. Applications must be received at least 30 days prior to the first event date to insure that all reviews can be completed prior to the event. This application is only for permission to use Town property. Any additional licenses, such as food service permit, etc., may be required and it is the applicant's responsibility to secure the same.

Action by the Board of Selectmen:

_____ Approved as submitted

_____ Approved with the following condition(s): _____

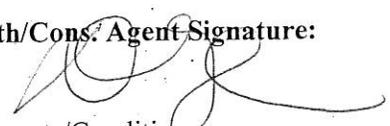
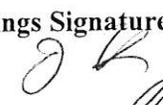
_____ Disapproved for following reason(s): _____

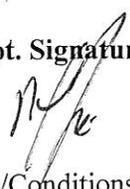
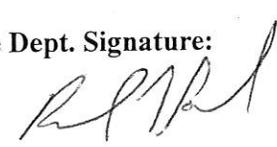
Date: MAR 29 2016

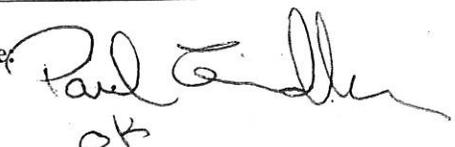
Processing Fee: 20.00 paid

Fee: _____

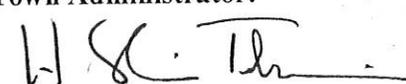
APPLICANT IS RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND INSPECTIONS

Health/Cons. Agent Signature:  Comments/Conditions: NO TENTS TO BE STAKED ON RAISED LEACH FIELD Permits/Inspections needed:	Inspector of Buildings Signature:  Comments/Conditions: Res 4.8.16 Permits/Inspections needed:
---	---

Police Dept. Signature:  3/31/16 Comments/Conditions: OK	Fire Dept. Signature:  4/1/16 Comments/Conditions: OK
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DPW Signature:  OK Comments/Conditions: 4/8/16	Beach Dept. Signature:  4/25/16 Comments/Conditions: OK - All trash and equipment to be removed by sponsored event.
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Shellfish Constable Signature: Comments/Conditions:	Harbormaster Signature: Comments/Conditions:
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Recreation Dept. Signature: Comments/Conditions:	Town Administrator:  Comments/Conditions: NOTE BEACH + HEALTH/CONS COMMENTS supports a community non profit; suggested no fee.
--	--

TOWN OF WELLFLEET
APPLICATION FOR PERMIT TO USE TOWN OWNED PROPERTY

Applicant Michael Baughart Affiliation or Group 349 Events (Solace)
Telephone Number (774) 216-0888 Mailing Address 53 Avery Ave
Email address mbaughart34@yahoo.com wellfleet ma 02607
Town Property to be used (include specific area) Band Stand end of town pier

Date(s) and hours of use: May 1 2016 - October 31 2016

Describe activity including purpose, number of persons involved, equipment to be used, parking arrangements, food/beverage service, etc. Also please indicate if fees will be charged by applicant.

Food truck serving food and beverages run by 3 employees from 1 PM - 9 PM closed wednesdays ~~fees include food truck application (\$50)~~ Utilizing Available parking at town pier.

Describe any Town services requested (police details, DPW assistance, etc.)

request permission to set up an Electrical Meter via local service provider

NOTE TO APPLICANTS: All applications must be accompanied by a non refundable \$20.00 processing fee. Applications must be received at least 30 days prior to the first event date to insure that all reviews can be completed prior to the event. This application is only for permission to use Town property. Any additional licenses, such as food service permit, etc., may be required and it is the applicant's responsibility to secure the same.

Action by the Board of Selectmen:

- _____ Approved as submitted
- _____ Approved with the following condition(s): _____
- _____ Disapproved for following reason(s): _____

Date: _____

MAR 30 2016

Processing Fee: 20.00 paid
Fee: _____

APPLICANT IS RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND INSPECTIONS

Health/Cons. Agent Signature: <i>OK</i> <i>[Signature]</i> Comments/Conditions: Permits/Inspections needed: <i>FOOD SERVICE INSPECTION</i>	Inspector of Buildings Signature: <i>[Signature]</i> Comments/Conditions: <i>5-30-16</i> Permits/Inspections needed:
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Police Dept. Signature: <i>[Signature]</i> <i>3/30/16</i> Comments/Conditions: <i>OK</i>	Fire Dept. Signature: <i>Captain Terreni</i> Comments/Conditions:
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DPW Signature: <i>[Signature]</i> <i>OK</i> <i>4/5/16</i> Comments/Conditions: <i>Trash, water and power is the responsibility of the vendor</i>	Beach Dept. Signature: <i>SG Thomas</i> <i>OK</i> Comments/Conditions: <i>Trash, water, power responsibility of vendor</i>
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Shellfish Constable Signature: Comments/Conditions: <i>X</i>	Harbormaster Signature: <i>[Signature]</i> Comments/Conditions: <i>Metered Power</i>
---	--

Recreation Dept. Signature: <i>[Signature]</i> Comments/Conditions: <i>will work w/ vendor on dates rec. issuing bandstand.</i>	Town Administrator: <i>CONCERN ABOUT DAYTIME MARINA PARKING DURING THE SUMMER. THIS SITE WAS NOT INCLUDED IN THE CONCESSION BIDS</i> <i>HS</i>
---	---

TOWN OF WELLFLEET
APPLICATION FOR PERMIT TO USE TOWN OWNED PROPERTY

Applicant Lisa Buchs Affiliation or Group N/A
Telephone Number (507) 317-0593 Mailing Address 2344 W School St. #3
Email address lisa.buchs@gmail.com Chicago IL 60618
Town Property to be used (include specific area) western side of Indian Neck Beach

Date(s) and hours of use: Saturday, June 18 from 5-6PM

Describe activity including purpose, number of persons involved, equipment to be used, parking arrangements, food/beverage service, etc. Also please indicate if fees will be charged by applicant.

- small wedding with 40 total attendees
- only equipment will be 5-10 folding chairs
- attendees will park at Indian Neck Beach parking lot after beach stroller hours

Describe any Town services requested (police details, DPW assistance, etc.)

N/A

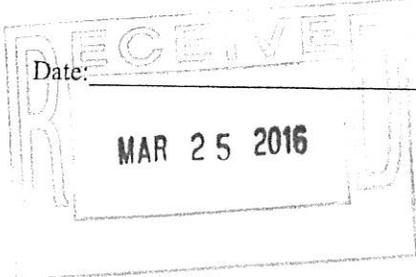
NOTE TO APPLICANTS: All applications must be accompanied by a non refundable \$20.00 processing fee. Applications must be received at least 30 days prior to the first event date to insure that all reviews can be completed prior to the event. This application is only for permission to use Town property. Any additional licenses, such as food service permit, etc., may be required and it is the applicant's responsibility to secure the same.

Action by the Board of Selectmen:

_____ Approved as submitted

_____ Approved with the following condition(s): _____

_____ Disapproved for following reason(s): _____



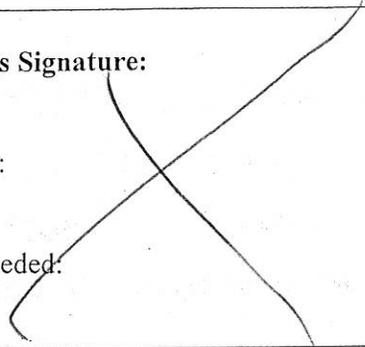
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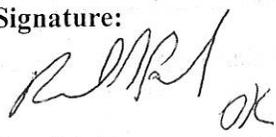
Processing Fee: 20.00 paid

Fee: _____

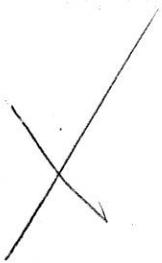
(over)

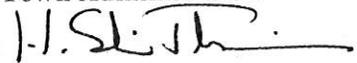
APPLICANT IS RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND INSPECTIONS

Health/Cons. Agent Signature:  Comments/Conditions: Permits/Inspections needed:	Inspector of Buildings Signature:  Comments/Conditions: Permits/Inspections needed:
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Police Dept. Signature:  <i>OK</i> Comments/Conditions: <i>3/29/16</i>	Fire Dept. Signature:  <i>OK</i> Comments/Conditions: <i>3/30/2016</i>
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DPW Signature:  <i>4/5/16 OK</i> Comments/Conditions	Beach Dept. Signature:  <i>4/18/16</i> Comments/Conditions: <i>OK -</i>
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Shellfish Constable Signature:  Comments/Conditions:	Harbormaster Signature:  Comments/Conditions:
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Recreation Dept. Signature:  Comments/Conditions:	Town Administrator:  Comments/Conditions: <i>no conditions</i> <i>suggest \$100 fee.</i> <i>MAR 25 2016</i>
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TOWN OF WELFLEET
APPLICATION FOR PERMIT TO USE TOWN OWNED PROPERTY

Applicant GARY KERSTEEN Affiliation or Group FAMILY & FRIENDS
Telephone Number 860-508-6505 CELL Mailing Address 25 HARRISON ST
Email address GARYKERSTEEN@COMCAST.NET WELFLEET MA 02667
Town Property to be used (include specific area) BAKERS FIELD TENT

Date(s) and hours of use: SUNDAY 6/26 2-5³⁰ PM (ALTERNATIVELY SAT 6/25)

Describe activity including purpose, number of persons involved, equipment to be used, parking arrangements, food/beverage service, etc. Also please indicate if fees will be charged by applicant.

PURPOSE: RETIREMENT PARTY FOR WIFE, HILARY, A HISTORY TEACHER AT
NAUSET HIGH. NO. OF PEOPLE: 50-60 INCL CHILDREN, PORTABLE PA FOR "SPEECHES".
PARKING AT MAYO BEACH AND PIER. FOOD: COMBO OF CATERED APPETIZERS & POT-LUCK
FOODS BROUGHT BY FRIENDS; SOFT DRINKS; NO ALCOHOL. NO FEES CHARGED.

Describe any Town services requested (police details, DPW assistance, etc.)

SIMPLE GET-TOGETHER, NOTHING NEEDED.

NOTE TO APPLICANTS: All applications must be accompanied by a non refundable \$20.00 processing fee. Applications must be received at least 30 days prior to the first event date to insure that all reviews can be completed prior to the event. This application is only for permission to use Town property. Any additional licenses, such as food service permit, etc., may be required and it is the applicant's responsibility to secure the same.

Action by the Board of Selectmen:

_____ Approved as submitted

_____ Approved with the following condition(s): _____

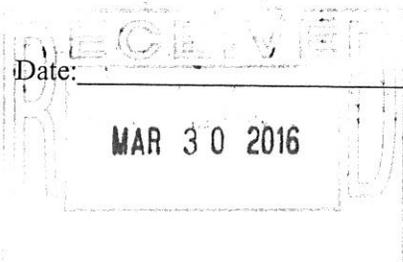
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Date: _____

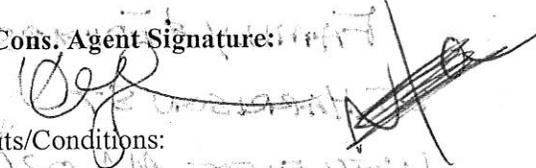
Processing Fee: 20.00 paid

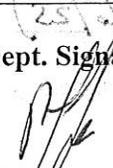
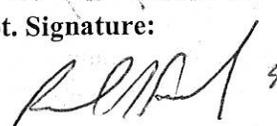
Fee: _____

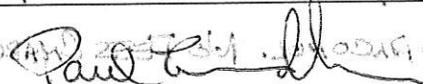
(over)

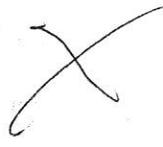


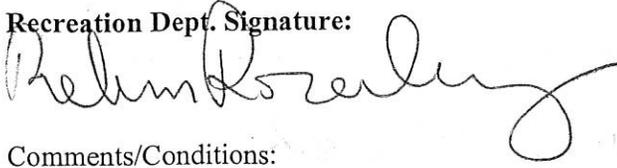
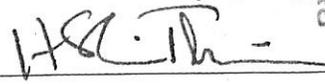
APPLICANT IS RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND INSPECTIONS

Health/Cons. Agent Signature: 	Inspector of Buildings Signature: 
Comments/Conditions: WEATHER WILL BE OK	Comments/Conditions: NO COMMENTS
Permits/Inspections needed: NONE	Permits/Inspections needed: NONE

Police Dept. Signature:  3/31/16	Fire Dept. Signature:  4/1/16
Comments/Conditions: OK	Comments/Conditions: OK

DPW Signature:  4/5/16	Beach Dept. Signature: 
Comments/Conditions: Trash and recycling to be removed by the responsible persons	Comments/Conditions: NO COMMENTS

Shellfish Constable Signature: 	Harbormaster Signature: 
Comments/Conditions: X	Comments/Conditions: X

Recreation Dept. Signature: 	Town Administrator: SAT 6/25 MAY NOT BE AVAILABLE SUGGEST SUN. 6/26 FOR NOW ALLOW A CHANGE TO 6/25 IF Comments/Conditions: REC. DEPT. EVENT NOT SCHEDULED
Comments/Conditions: OK	

TOWN OF WELLFLEET
APPLICATION FOR PERMIT TO USE TOWN OWNED PROPERTY

Applicant James Gallant and Natalie Hill Affiliation or Group _____
Telephone Number 508 255 2944 Mailing Address PO Box 1859
Email address forgedfilms@gmail.com Orleans, MA 02653
Town Property to be used (include specific area) Mayo Beach

Date(s) and hours of use: September 10, 2016 3:00 - 4:00pm

Describe activity including purpose, number of persons involved, equipment to be used, parking arrangements, food/beverage service, etc. Also please indicate if fees will be charged by applicant.

We would like to use a small portion of the beach for a brief wedding ceremony of approximately 30 minutes. There would be 60 people present to observe the ceremony and we do not intend to use any equipment other than a portable wooden arch to stand under. The reception will be held at the Holden Inn so guests will walk down or be shuttled from that venue to the carpark. No fees will be charged of any kind.

Describe any Town services requested (police details, DPW assistance, etc.)

We are requesting approval to hold our wedding ceremony at this location. No other services are being requested.

NOTE TO APPLICANTS: All applications must be accompanied by a non refundable \$20.00 processing fee. Applications must be received at least 30 days prior to the first event date to insure that all reviews can be completed prior to the event. This application is only for permission to use Town property. Any additional licenses, such as food service permit, etc., may be required and it is the applicant's responsibility to secure the same.

Action by the Board of Selectmen:

_____ Approved as submitted

_____ Approved with the following condition(s): _____

_____ Disapproved for following reason(s): _____

Date: _____

APR 11 2016

Processing Fee: \$20

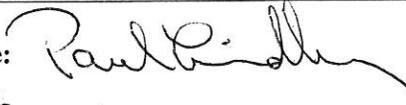
Fee: \$100 -

(over)

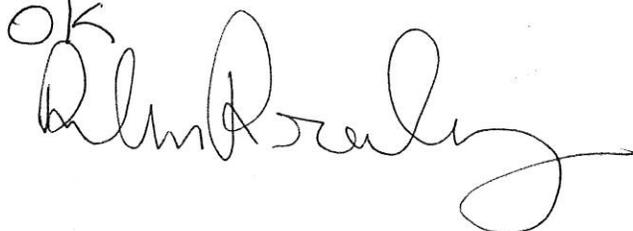
APPLICANT IS RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND INSPECTIONS

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<p>Police Dept. Signature:  4/13/16 Comments/Conditions: OK</p>	<p>Fire Dept. Signature:  4/16/16 Comments/Conditions: OK</p>
---	--

<p>DPW Signature:  4/22/16 OK Comments/Conditions: All equipment to be removed after ceremony including trash and recycling if applicable.</p>	<p>Beach Dept. Signature:  4/27/16 Comments/Conditions:</p>
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<p>Recreation: OK </p>	<p>Town Administrator:  Comments/Conditions: none</p>
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TOWN OF WELLFLEET
APPLICATION FOR PERMIT TO USE TOWN OWNED PROPERTY

Applicant Della Spring Cushing Affiliation or Group _____

Telephone Number 781-789-8725 Mailing Address 308 Commonwealth Ave

Email address dellaspring28@gmail.com Unit H
Boston, MA 02115

Town Property to be used (include specific area) Mayo Beach

on beach behind basketball court/shellfish dept bldg

Date(s) and hours of use: Tuesdays + Thursdays 8³⁰-9⁴⁵ July + Aug 2016

Describe activity including purpose, number of persons involved, equipment to be used, parking arrangements, food/beverage service, etc. Also please indicate if fees will be charged by applicant.

morning meditation + yoga on the beach. This
year my classes consisted of anywhere between 8-25
students. We use towels instead of mats, no other props.
I will charge \$10-12 pp. This year (2015) was \$10, which is
about half of what I charge in Boston (\$22-25).

Describe any Town services requested (police details, DPW assistance, etc.)

none needed

NOTE TO APPLICANTS: All applications must be accompanied by a non refundable \$20.00 processing fee. Applications must be received at least 30 days prior to the first event date to insure that all reviews can be completed prior to the event. This application is only for permission to use Town property. Any additional licenses, such as food service permit, etc., may be required and it is the applicant's responsibility to secure the same. I am fully covered by insurance + have added Town of Wellfleet additionally

_____ Approved as submitted

_____ Approved with the following condition(s): _____

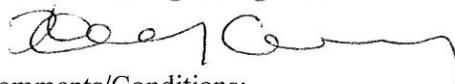
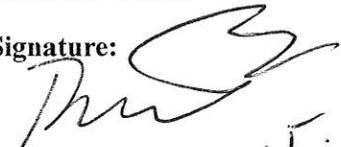
_____ Disapproved for following reason(s): _____

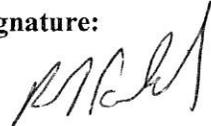
Date: AUG 26 2015

Processing Fee: 20.00 paid

Fee: _____

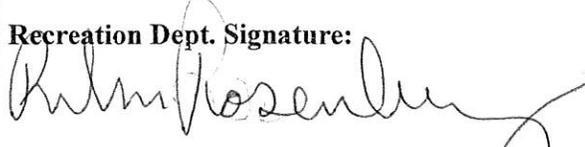
APPLICANT IS RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND INSPECTIONS

Health/Cons. Agent Signature:  Comments/Conditions: OK Permits/Inspections needed:	Inspector of Buildings Signature:  Comments/Conditions: 9.15.15 Permits/Inspections needed:
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Police Dept. Signature:  Comments/Conditions: OK 8/27/15	Fire Dept. Signature:  Comments/Conditions: OK 9/1/2015
--	--

DPW Signature:  Comments/Conditions: OK 9/10/15	Beach Dept. Signature: S.G. Thomas Comments/Conditions: OK as long as this program does not interfere with rec. programs.
---	---

Shellfish Constable Signature:  Comments/Conditions: 9/30/15	Harbormaster Signature:  Comments/Conditions: 9/30/15
---	---

Recreation Dept. Signature:  Comments/Conditions: Will not interfere with Rec. Programs	Town Administrator: H. S. Th... Comments/Conditions: Insurance, naming Town Commercial enterprise - fee to be Suggest written agreement
--	---

APPLICANT IS RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND INSPECTIONS

Health/Cons. Agent Signature: Comments/Conditions: Permits/Inspections needed:	Inspector of Buildings Signature: Comments/Conditions: Permits/Inspections needed:
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Police Dept. Signature:  9/16/15 Comments/Conditions: OK	Fire Dept. Signature: 9/15/15  Comments/Conditions: OK
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DPW Signature:  9/21/15 Comments/Conditions: Restrooms are closed Pre and post season. Events and competitions for 300 people will require event staff to remove trash and recycling	Beach Dept. Signature:  Comments/Conditions: Portable Toilets required for any event with more than 50 people.
---	--

Shellfish Constable Signature: Comments/Conditions:	Harbormaster Signature: Comments/Conditions:
---	--

Recreation Dept. Signature: Comments/Conditions:	 - Insurance naming Town - Require applicant to furnish portable toilets for events with more than 50 people - Suggest Winter agreement - Commercial enterprise fee TBD
--	---

Should we use an open proposal process rather than first come first served?

HIGH WATER MARK PROJECT

MEMORANDUM OF UNDERSTANDING

High Water Mark Project Memorandum of Understanding

Between the Federal Emergency Management Agency (FEMA) Region 1
and the community of Barnstable County, MA

This is a voluntary partnership agreement between Barnstable County, MA (*Community name*) and FEMA Region 1 in support of a High Water Mark (HWM) Project as part of FEMA's High Water Mark Initiative (HWMI). As part of participating in a HWM Project, Barnstable County, MA (*Community name*), in coordination with the FEMA Region, will host a high-profile HWM sign unveiling/launch event, develop continuous flood risk awareness and outreach activities around the signs and select and complete a specific mitigation action(s) that the community will take to reduce flood risk for residents. The mitigation action(s) will be:

Post HWM signs in prominent places in selected communities (Barnstable, Harwich, Sandwich, Yarmouth, Wellfleet, Provincetown, Orleans and Mashpee), Hold a high-profile launch event to unveil the signs, and Conduct ongoing education to build local awareness of flood risk, and complete mitigation actions to build community resilience against future flooding.

This memorandum of understanding (MOU) reflects the mutual desire of both parties to collaborate and develop the strategy behind the launch event, awareness activities and the mitigation action(s). The community will immediately assume lead responsibility for following the HWM project strategy, while the FEMA Region is committed to providing time and resources, as needed, to help the community achieve its goals. The responsibilities of each party—the FEMA Region and the community—are summarized below.

Community *Responsibilities*

- Provide subject matter expertise as needed.
- Coordinate with the FEMA Region to schedule a kick-off meeting with local, State, and Federal participants to garner widespread support and collaboration for the project.
- Schedule post-launch event meetings in the community and provide brief status reports, as needed.
- Appoint a representative as HWM Project Coordinator and notify the FEMA Region designee of any change in the designated liaison.
- Determine the date, time, and location of the HWM Launch Event, manage local logistics, and leverage media engagement and outreach and local partnerships.
- Determine and agree to the specific mitigation action(s) that will drive the theme and messaging of the HWM Launch Event and awareness activities.
- Hold a high-profile HWM sign unveiling/launch event to unveil the HWM signs and to announce the project to the public, inviting local, State, and Federal officials, the media, the public and other key entities.
- Determine locations of and post HWM signs in high-profile locations throughout the community.
- Conduct ongoing outreach to share details on how individuals can protect themselves and their property from flood risk.
- Following the HWM Launch Event, provide updates to the FEMA Region designee on the status of the mitigation action(s) the community is completing.

FEMA Region *Responsibilities*

- Appoint a HWM Regional Project Coordinator.
 - Facilitate HWM project development, which includes conducting an initial planning meeting to address HWM Project logistics and strategy with the community.
 - Work with the community to schedule a kick-off meeting with local, State, and Federal participants to garner widespread support and collaboration for the Project.
 - Provide tools, templates, best practices, and guidance to help the community plan the launch event and other activities.
 - Provide guidance and assistance in selecting and completing the mitigation action(s).
 - Lead strategic development of the HWM Project Plan including, where necessary, the identification of key milestones the community should meet.
 - Engage Federal agency representatives on behalf of the community to provide additional assistance to the project when necessary (with FEMA HQ support as needed).
 - Fund HWM sign development (through FEMA HQ).
 - Attend the HWM launch event.
- *The duration of post-launch event follow up will be determined in the project planning phase.

HIGH WATER MARK PROJECT

MEMORANDUM OF UNDERSTANDING



Other HWM Project Elements

Messaging, Communications and Outreach

- As a result of participation in the planning and execution of a HWM Launch Event and follow up actions, the community agrees to manage local outreach; including the use of social media, to increase awareness and engagement from the community.
- The FEMA Region agrees to help develop messaging and talking points in preparation for the HWM Launch Event as well as key messages for use in continued communications outreach as executed by the community.

High Water Mark Signs

- The community will determine the location and installation of the HWM signs.
- FEMA HQ agrees to fund the printing and development of the community's signs.

Ongoing Project Activities

- The community will conduct outreach to the public to build awareness about flood risk.
- The community will conduct mitigation action(s) to increase resiliency and will report actions and completed milestones to the FEMA Region.
- The FEMA Region will provide subject matter expertise and resources to the communities as agreed upon by both parties.
- The FEMA Region will coordinate quarterly or biannual meetings to touch base with the community.
- FEMA will post information and case studies about the community on the www.fema.gov/knowyourline website and other venues and take actions to increase the public's knowledge of the community's involvement with this beneficial project. This may include publishing articles or case studies to partner organization Websites or publications.

General Terms

- As a general principle of the HWM Project, each party to this agreement agrees to assume the good faith of the other party and to notify the other if any issues arise. Either party can terminate this agreement, without cause or penalty, and both will then cease to publicize the community's participation in the HWMI (must be submitted in writing).
- The community agrees that the activities it undertakes connected with this memorandum are not intended to provide services to the Federal Government and that the community will not submit a claim for compensation to any Federal agency/department.
- The community agrees that it will not claim or imply that its participation in the HWMI obligates FEMA beyond what's included in this MOU or endorses anything other than the community's commitment to the HWMI.

Period of Performance

- The awareness and mitigation action activities outlined in this agreement shall be continuous and ongoing, in order to sustain and enhance community resilience.



The undersigned officials execute this memorandum of understanding (MOU) on behalf of their parties.

FEMA Region

Designated HWM Project Coordinator (Name/Title): Marilyn Hilliard, Risk Analysis Branch Chief

Signature: MARILYN HILLIARD Digitally signed by MARILYN HILLIARD
DN: cn=US, o=U.S. Government, ou=Department of Homeland
Security, ou=FEMA, ou=People, ou=MARILYN HILLIARD,
0.9.2342.19200300.100.1.1=0505196419.FEMA.1
Date: 2016.04.13 14:03:29 -0400 Date: April 13, 2016

Email address: marilyn.hilliard@fema.dhs.gov Phone: 617-956-7536

Community

Community name: Town of Wellfleet

Authorized Representative (Name/Title): Harry Terkanian, Town Administrator

Signature: _____ Date: _____

Address: 300 Main Street Suite/Floor Number: _____

City: Wellfleet State: MA Zip: 02667

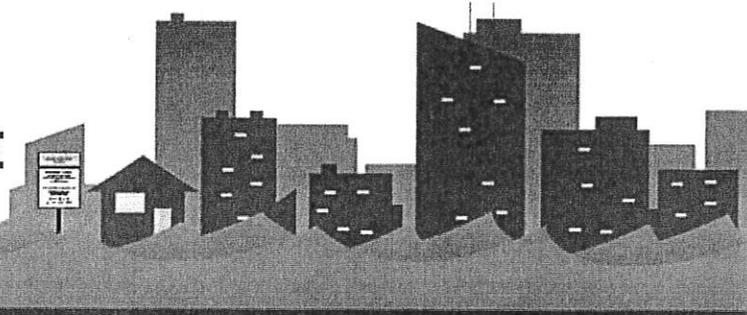
Phone: 508-349-0300 Fax Number: _____

E-mail Address: harry.terkanian@wellfleet-ma.gov

Community Web Site (if applicable): _____

Please return this signed MOU to:
Vincent Brown
FEMA
1800 S. Bell St.
Arlington, VA 20598
Or electronically to **Vincent.Brown@FEMA.DHS.GOV**

HIGH WATER MARK INITIATIVE



What is the High Water Mark Initiative?

As part of the National Flood Insurance Program (NFIP), the High Water Mark (HWM) Initiative is a community-based awareness program that increases local communities' awareness of flood risk and encourages action to mitigate that risk. As part of the project, communities post HWM signs in prominent places, hold a high-profile launch event to unveil the signs, conduct ongoing education to build local awareness of flood risk, and complete mitigation actions to build community resilience against future flooding.

What's the need for the HWM Initiative?

Flooding is the number one natural disaster in the United States. Large storms such as Hurricanes Sandy and Ivan, as well as countless others, have ravaged American communities; costing billions a year in recovery, restoration, and rebuilding. However, less than one-third (30%) of respondents to FEMA's national Flood Risk Awareness Survey believed their community was at risk of flooding. To address this challenge, the Federal Emergency Management Agency (FEMA) partnered with over seven Federal agencies to create the HWM Initiative to help improve the public's awareness of flood risk and encourage communities to take long-term action to address this risk.

How Do HWM Projects Work?

HWM communities work in close partnership with FEMA and other Federal partners on a HWM Project. The project has two parts:

1. Build flood risk awareness through a HWM Launch Event and other communications and outreach efforts and
2. Reduce risk through mitigation actions that help protect the community from future flooding.

FEMA Headquarters staff administer the HWM Initiative with leadership support from FEMA staff in the Regions. FEMA Regional staff work closely with the community to plan and manage a HWM Launch Event and begin discussions on mitigation actions. The Federal partners engage with the community and provide additional resources and support.

Federal Partners

- ▶ Federal Emergency Management Agency (FEMA)
- ▶ National Oceanic and Atmospheric Administration, National Weather Service (NOAA NWS)
- ▶ NOAA Coastal Service Center
- ▶ U.S. Army Corps of Engineers (USACE)
- ▶ U.S. Department of Agriculture, National Resources Conservation Service (USDA/NRCS)
- ▶ U.S. Department of Housing and Urban Development (HUD)
- ▶ U.S. Small Business Administration (SBA)
- ▶ U.S. Environmental Protection Agency (EPA)
- ▶ U.S. Department of Transportation (DOT)
- ▶ U.S. National Park Services (NPS), Center for Urban Ecology



FEMA

HWM Project Summary: Santa Rosa County, FL

Santa Rosa County, FL leveraged FEMA's HWM Initiative to encourage citizens in low-risk areas to buy flood insurance and increase awareness of efforts to update flood maps.

Santa Rosa County held an HWM Launch Event on December 8, 2014 with the support of the local flood mitigation task force, FEMA, and partner Federal agencies. The county unveiled a HWM sign at Navarre Beach State Park designed by the students from the Gulf Breeze High School Multimedia Academy.

As a result of the event, the sale of flood insurance policies increased by nine percent in the first month of the campaign. Furthermore, the Community Floodplain Manager has conducted two additional HWM Launch Events in adjacent towns and plans to erect signs in a total of 12 locations around the community

Join the HWM Initiative!

If your community is interested in participating, visit

<https://www.fema.gov/high-water-mark-initiative>

For more information, contact:

Vince Brown - vincent.brown@fema.dhs.gov

Mitigation Ideas for Communities

Integrating Hazard Mitigation into Local Planning: Case Studies and Tools for Community Officials

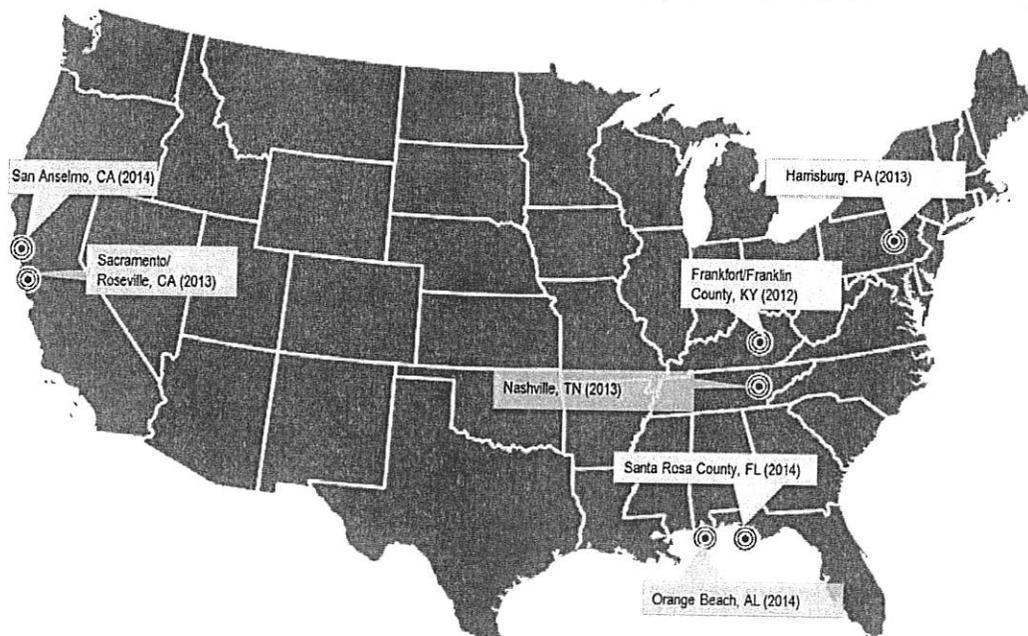
This document provides practical guidance on how to incorporate risk reduction strategies into existing local plans, policies, codes, and programs that guide community development or redevelopment patterns.

<https://www.fema.gov/media-library/assets/documents/31372>

Mitigation Ideas: A Resource for Reducing Risk to Natural Hazards

This document is a resource for communities looking to identify and evaluate a range of potential mitigation actions for reducing risk to natural hazards and disasters.

<http://www.fema.gov/media-library/assets/documents/30627>



HWM Pilots and Projects Nationwide



TOWN OF WELLFLEET

300 MAIN STREET WELLFLEET MASSACHUSETTS 02667
Tel (508) 349-0300 Fax (508) 349-0305
www.wellfleetma.org

To: Board of Selectmen
From: Harry Sarkis Terkanian, Town Administrator
Subject: Recreation Department Sign at Town Hall
Date: May 6, 2016
CC:

The Recreation Department would like to place a sign behind Town Hall as more fully described in the email from the Director of Community Services excerpted below. The sign would be available to other Town departments when not used by Recreation.

I would like to place this type of signboard behind Town Hall in the hosta bed that parallels the handicapped ramp. It could accommodate a full size poster advertising that week's Recreation concerts/events and give those programs a promo in the center of Town without using the dreaded A-frame signs on Town Hall lawn. It would be locked and accessible only to Rec staff members. Becky has the money in her budget. There is no upkeep to the material and we would only need help from the DPW to install it initially. I'd like to talk to the BOS about it given the past discussions about signs around Town Hall.
Suzanne



Overall dimensions: 78" tall by 52" wide. Viewing area 42" high by 28.25" wide.



community development partnership

Creating opportunities for people to live, work, & thrive on the Lower Cape

Harry Sarkis Terkanian
Town Administrator
300 Main Street
Wellfleet, MA 02667



April 7, 2016

Dear Mr. Terkanian,

Enclosed is an Affordable Housing Rental Restriction, for Melissa Shantz's property at 100 Old Chequessett Neck Road, which needs to be signed by the Chairman of the Board of Selectman and notarized. Ms. Shantz was given a housing rehab loan through HECH in February of 2013. This property has a rental unit and, as such, an Affordable Housing Rental Restriction is part of the loan terms. In the process of performing the annual audit it was discovered that this document was never executed.

I am requesting that you please forward this document to the Chairman of the Board of Selectman so that he/she may sign and have this document notarized. Once completed, please return the document in the enclosed self-addressed stamped envelope.

Please direct any questions regarding this request to Abigail Chapman at 508-240-7873 ext 23. I thank you for your assistance in this matter.

Sincerely,

Christine Henault
Records Manager

3 Main Street Mercantile, Unit 7 Eastham, MA 02642
P 508.240.7873 F 508.240.5085 E contact@capecdp.org

www.capecdp.org



**Community Development Partnership Housing Rehabilitation Program
Affordable Housing Rental Restriction**

This Agreement is entered into this 26th day of February between Melissa Shantz whose address is 100 Old Chequessett Neck Road, Wellfleet, MA 02667, and her successors, heirs, and assigns (hereinafter referred to as "Owner") and undersigned Town of Wellfleet, acting through the Board of Selectmen of the Town of Wellfleet whose address is 300 Main Street, Wellfleet, MA 02667 and its successors and designees (hereinafter called "Town").

WHEREAS, the Owner's execution of this Restriction is a condition of approval for a Deferred Payment Loan (hereinafter called the "Loan") in the amount of **Twenty-Nine Thousand Seven Hundred Seventy-One Dollars and Zero Cents, (\$29,771.00)** for the rehabilitation of the residential property located at 100 Chequessett Neck Road, Wellfleet MA 02667, MA which has or will have residential dwelling units after rehabilitation (hereinafter called the "Property");

For legal description, see Exhibit A attached hereto and incorporated herewith.

WHEREAS, property contains one residential unit occupied by the Owner, and one residential unit which shall be rented to a tenant or tenants as provided below (the "Affordable Unit");

WHEREAS, the Owner understands and agrees that the Affordable Unit shall be restricted as provided below; and

WHEREAS, Lower Cape Cod Community Development Corporation d/b/a the Community Development Partnership, with an address of 3 Main Street Mercantile Unit 7, Eastham, MA (hereinafter called "Monitoring Agent") is the Monitoring Agent for the Town in connection with the Loan;

NOW, THEREFORE, in consideration of the Loan to Owner, the parties hereby agree as follows:

With respect to the Affordable Unit, Owner hereby agrees to the following for a period of fifteen years from the date of the completion of the Property rehabilitation (the "term"):

1. Owner agrees during the term to furnish each tenant at the time of execution or renewal of any lease, or upon initial occupancy if there is no lease, with a written notice in the following form:

"The rents charged tenants in this building are subject to a Regulatory Agreement between the landlord and the Town of Wellfleet for a period of fifteen years from the date of the Loan Closing by and between the Owner and the Town of Truro financed in whole or in part by a loan under Massachusetts Community Development Block Grant – Housing Rehab Loan Program. One copy of this Agreement will be made available to each tenant by the landlord with a Rent Schedule for the unit to be occupied by said tenant."

The inclusion of the foregoing language in any lease, prominently displayed, shall be conclusive evidence of its receipt by the tenant. If there is no lease, Owner shall maintain a file copy of each such notice delivered to each tenant, with a signed acknowledgment of receipt by the tenant.

The Owner shall provide a signed tenant acknowledgement of receipt of the aforementioned Agreement and Rent Schedule to the Monitoring Agent.

2. The gross monthly rental charge for the Affordable Unit at the time of Owner's application for participation in the Community Development Partnership Housing Rehabilitation Program shall, for the purposes of this Restriction, constitute the Base Rent. The Base Rent for the Affordable Unit is to be documented on Attachment 1 - Rent Schedule. Increases in rent shall be limited to those specified in the rent schedule which is attached hereto and which is made part of this Restriction.

Rents for units vacant at the time of Owner's application to the Community Development Partnership Housing Rehabilitation Program shall be calculated taking into consideration the operating expenses the Owner incurs for the unit as well as the Owner's share of the rehabilitation cost. However, in no event shall the base rent of vacant units exceed the **Fair Market Rents for Barnstable County** as published periodically by the U.S. Department of Housing and Urban Development. Except that where the tenant is responsible for paying for some or all utility costs, the base rent will be reduced according to the Utility Allowance Schedule as published by the U.S. Department of Housing and Urban Development. (Attachment 2 – Current Fair Market Rent).

If the Affordable Unit becomes vacant during the term of this Restriction, then the rent shall be determined as of the time of occupancy, but in no case shall rents exceed Fair Market Rents as described above.

The foregoing gross monthly rent will include the following utilities or other facilities or services for all tenants, members of their families who regularly reside with such tenants, and guest thereof as permitted by the terms of the lease (if any) except as otherwise specified below:

(List the utilities, services, and facilities normally included in rent and any exceptions thereto).

(Attachment 3 – Utility Allowance Schedule)

3. Owner agrees that units that are vacant at the time of Owner's application to the Community Development Partnership Housing Rehabilitation Program or become vacant during the term of this Restriction shall be made available to, and rented to, only those persons who are defined as Low and Moderate Income as established by the Income Limits published periodically by

the U.S. Department of Housing and Urban Development for the Barnstable County Area for use in its Section 8 Existing Housing Program. In any case, Owner shall agree to notify the Town of the availability of units and shall not refuse to rent to tenants holding Section 8 Existing Housing Certificates, Chapter 707 Certificates, or other recognized housing voucher certificate except for due cause.

4. Owner agrees that during the term of this Restriction to limit rental increases to the rate allowed by **Fair Market Rents for Barnstable County** published periodically by the U.S. Department of Housing and Urban Development for use in its Section 8 Existing Housing Program. Owner further agrees that such rental increases shall be limited as follows:
 - a. If there is no existing lease, rents can be increased according to the AAF only upon completion of the rehabilitation, the date of which shall be evidenced by the date of the Certification of Final Inspection as executed by the Rehabilitation Specialist under the Home Improvement Program.
 - b. If the unit is under lease, rental increases cannot occur until the expiration of that lease.
 - c. If a vacant unit is rented pursuant to Section 3 of this Agreement, a rental increase can occur one (1) year from the date of the new lease. Therefore, additional rental increases during the term of this extension shall occur only at yearly intervals, and that increase shall be limited to the **Fair Market Rents for Barnstable County** as noted above.
5. Owner agrees to notify the Monitoring Agent in writing of each rent increase no less than thirty (30) days before the effective date of the rent increase. Such notification shall be deemed made when personally delivered or mailed by the Owner to the Monitoring Agent and to the Town at the addresses specified above.
6. At the request of the Monitoring Agent, the Owner shall furnish periodic occupancy reports and shall give specific answers to questions upon which information is desired from time to time relative to income, assets, liabilities, contracts, operation, and condition of the Affordable Unit. (Attachment 4 - Annual Certification of Compliance with the Rent Regulatory Agreement)
7. The invalidity of any paragraph or provision of this Restriction shall not affect the validity of the remaining paragraphs and provisions thereof.
8. Upon a violation of any provision of this Restriction by the Owner, the Town may give written notice thereof to the Owner by registered or certified mail, addressed to the Owner at the address specified above. If such violation is not corrected to the satisfaction of the Town within thirty days after the date such notice is mailed, the Town may declare a default under this

Restriction and under the mortgage from Owner to the Harwich Ecumenical Council for the Homeless, Inc. securing the Loan, and may proceed to initiate any or all remedies at law or in equity provided in the event of a default.

9. This Restriction shall be effective for a period of fifteen calendar years from the date of the loan closing for the rehabilitation of the Property. This Restriction shall automatically terminate at the expiration of this fifteen-year period.

10. If suit is instituted by the Town to enforce this Restriction, the Owner agrees to pay all costs of such collection, including a reasonable attorney's fee and court costs.

11. This Restriction is a covenant running with the land and is binding upon the Owner and her successors and assigns.

Executed as a sealed instrument as of the date first above written.

OWNER:

TOWN OF WELLFLEET

Melissa Shantz
Melissa Shantz

By: _____
Chairman of the Board of Selectmen,
Duly Authorized

MONITORING AGENT:

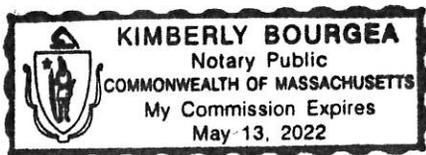
Lower Cape Cod Community Development Corporation
d/b/a Community Development Partnership

By: _____
Duly Authorized: Jay Coburn, Executive Director, Community Development Partnership

COMMONWEALTH OF MASSACHUSETTS

Barnstable, ss.

On this 26th day of February, before me, the undersigned notary public, personally appeared Melissa Shantz, proved to me through satisfactory evidence of identification, which were: MA Drivers License 354282437, to be the person whose name is signed on the preceding or attached document and acknowledged to me that he/she/they signed it voluntarily for its stated purpose.



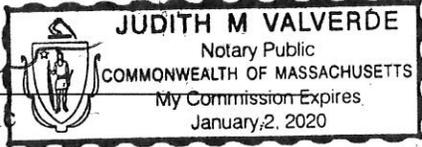
Kimberly E. Bourgea
Notary Public
My Commission Expires: 5-13-2022

COMMONWEALTH OF MASSACHUSETTS

Barnstable, ss.

On this 26th DAY OF MARCH, before me, the undersigned notary public, personally appeared Jay Coburn, proved to me through satisfactory evidence of identification, which were, PERSONALLY KNOWN, to be the person whose name is signed on the preceding or attached document and acknowledged to me that he/she/they signed it voluntarily for its stated purpose.

Judith M Valverde
Notary Public
My Commission Expires: _____



COMMONWEALTH OF MASSACHUSETTS

Barnstable, ss.

On this _____ day of _____, 2015, before me, the undersigned notary public, personally appeared _____, proved to me through satisfactory evidence of identification, which were, _____, to be the person whose name is signed on the preceding or attached document and acknowledged to me that he/she/they signed it voluntarily for its stated purpose.

Notary Public
My Commission Expires: _____

**Community Development Partnership Housing Rehabilitation Program
Affordable Housing Rental Restriction**

Exhibit A

Commencing at the Northwest corner of the premises at a concrete bound by land of Warren & Marilyn Dyer, as shown on a plan hereinafter mentioned; thence

N 66°15'32" E by land of said Dyer, as shown on said plan, forty and 00/100 (40.00) feet, to a concrete bound; thence

S 47°03'14" E by said Lot E 1B, as shown on said plan, one hundred seventy-seven and 28/100 (177.28) feet to a concrete bound; thence

S00°08'13" E by said Lot E 1B, as shown on said plan, one hundred twenty-five and 86/100 (125.86) feet to a concrete bound; thence

S67°49'20"W by a private way as shown on said plan, eighty-two and 86/100 (82.86) feet to a concrete bound; thence

Northwesterly by Old Chequessett Neck Road, a town way, as shown on said plan, by two courses a total distance of one hundred two and 59/100(102.59) feet; thence

N 02°21'43" W by land of Charles F. and Matilda Amsler, as shown on said plan, two hundred and 46/100 (200.46) feet to the point of beginning.

Together with the right to use the ways as shown on said plan in common with all others legally entitled thereto.

Being Lot E 1A, containing 32,871 square feet, more or less, shown on the plan entitled: "Division Plan of Land in Wellfleet made for Avram Noam and Carol D. Chomsky, being a division of Lot E as shown on a plan recorded in Plan Book 278, Page 60, Scale 1 in = 40 ft., July 1977, Slade Associated Registered Land Surveyors, East Main Street at Route 6, Wellfleet, MA 02667 recorded in Plan Book 316, Page 30.



Housing Rehabilitation Loan Program

community development partnership

ATTACHMENT 1 Rent Schedule

This Rent Schedule shall be completed for each applicable unit and attached to the Rental Agreement.

1. Case Number: _____

2. Property Address: 100 Old Chequessett Neck Wellfleet, MA
RD.

3. Total units covered by the Rent Agreement: 1

Total units in the structure: 1

4. Apartment # 100A

Bedrooms in Unit: 2

Monthly rent (at time of application) \$ 1,082.00 +

*972 mortgage + *110 Homeowner's Insurance

5. Is there an existing lease on this unit? (circle) Yes No

6. Current Rent (*Base Rent): \$ _____

7. Utilities included in the Rent: Utilities

Heat _____ Hot Water _____ Other _____
Gas _____ Electricity _____

8. Rental increases may occur only in accordance with the schedule set forth in this paragraph.

A. If there is a lease, rent may be increased to:

\$ _____ on the first anniversary of the lease on _____

And

B. If there is no lease, the rent may be increased to:

\$ _____ upon completion of the rehabilitation work on _____,

And

Tenant Acknowledges Receipt of Rent Schedule:

Melissa M. Shantz
Tenant Signature

3/9/16
Date

Tenant Signature

Date

**Note that the base rent must be affordable according to HUD's annual rent schedule for Barnstable County AND must either include utilities or the rent is lowered based upon the Barnstable County utility allowance.*



TOWN OF WELLFLEET

BEACH CONCESSION
Newcomb Hollow Beach
2016

This agreement is made this _____ day of _____, 2016, by and between the Town of Wellfleet and its Board of Selectmen, hereinafter referred to as the lessor, and **Murro Van Meter d/b/a The Leaside Café** with a mailing address of 105 Aunt Sally's Way, Wellfleet, MA 02667 and hereinafter referred to as the lessee; WITNESSETH:

The LESSOR agrees to let and lease to the LESSEE a 15' x 20' (300 sq. ft.) area, northeast corner of parking lot at Newcomb Hollow Beach for the sole purpose of operating a concession.

Concession Unit must meet all requirements including but not limited to those of the Board of Health, Building Inspector and Board of Selectmen (i.e. permits, roadworthy, safe, insured, sanitary).

The term of the lease shall be for the period **commencing May 28, 2016 and expiring November 1, 2016** and shall conform to the following specifications:

Specifications

1. The concession vehicle must meet the State Sanitary Code Chapter X Minimum Standards for Food Establishments, 105 CMR 590.009 Mobile Food Units and Pushcarts and be legally road worthy. Towed concession vehicles are permitted.
2. The Concession Unit must meet all local requirements including but not limited to those of the Board of Health. The lessee will need to complete a Beach Concession Food Permit Application and a separate Food Service Establishment Application.
3. The Concession Unit shall be large enough to meet the demand of the area that it intends to serve but in no case shall be larger than area described in property description.
4. This agreement authorizes Lessee to vend only in the area outlined in the property description and not in any other areas of the Town.
5. Lessee shall furnish electricity and other utilities. The Lessee shall have their electrical usage metered and cost to be paid directly by Lessee to the electric company for all electrical usage at the beach locations.
6. Lessee shall also furnish trash and provide recycling receptacles for customers. Lessee shall remove trash and recycling at the end of each day and shall **not** dispose of trash and recycling in the town barrels.
7. One parking space (in addition to the lessee location described above in "Property Description" shall be available to Lessee or his/her designated employee. Access to parking space for Lessee and concession unit shall be held open until 10:00a.m. After that time access will be dependent upon current parking situation.
8. Lessee **shall have service available** on all fair weather days during the contracted season as stipulated below. The Town Director of Community Services (or designee)

shall be called if there is a question about whether it is a "fair weather day." The Town's determination is final.

- a. Service is **optional** between May 28th and June 17th. The truck may be there between 10am and 4pm but may also elect to be there from 7am to 10am and from 4pm to 7pm.
 - b. Service is **required** between June 18th and Labor Day. The truck must be there between 10am and 4pm but may be there from 7am to 10am and from 4pm to 7pm.
 - c. Service is **optional** from September 6 through November 1st. The truck may be there between 10am and 4pm but may also elect to be there from 7am to 10am and from 4pm to 7pm.
9. The concession vehicle shall be removed at the end of the day.
 10. Lessee shall not sublet the concession without the prior written approval of the Town.
 11. All lessees must operate from a fixed food establishment.
 12. All lessee vehicles are subject to inspection by local officials.

At all times during the term of the lease, the Lessee shall carry Concessionaire's liability/products liability insurance in the amount of \$1,000,000 and worker's compensation insurance in the amount of \$500,000 with the Town named as an additional insured. Evidence of the insurance policies shall be provided to the LESSOR.

In consideration of the privileges extended to the LESSEE by this lease, the LESSEE shall pay to the LESSOR **\$5,200 for Newcomb Hallow.**

The LESSOR shall have the right to cancel the lease at any time for reasonable cause and the LESSEE shall forfeit the lease payment.

FOR THE LESSOR (Board of Selectmen):

FOR THE LESSEE (Murro Van Meter):



TOWN OF WELLFLEET

BEACH CONCESSION
Maguire Landing Beach
2016

This agreement is made this _____ day of _____, 2016, by and between the Town of Wellfleet and its Board of Selectmen, hereinafter referred to as the lessor, and **Michael Banghart d/b/a 349 Events/Solace** with a mailing address of PO BOX 3005, Wellfleet, MA 02667 and hereinafter referred to as the lessee; WITNESSETH:

The LESSOR agrees to let and lease to the LESSEE a 15' x 20' (300 sq. ft.) area, at the northeast corner of the parking lot, of Maguire Landing.

Concession Unit must meet all requirements including but not limited to those of the Board of Health, Building Inspector and Board of Selectmen (i.e. permits, roadworthy, safe, insured, sanitary).

The term of the lease shall be for the period **commencing May 28, 2016 and expiring November 1, 2016** and shall conform to the following specifications:

Specifications

1. The concession vehicle must meet the State Sanitary Code Chapter X Minimum Standards for Food Establishments, 105 CMR 590.009 Mobile Food Units and Pushcarts and be legally road worthy. Towed concession vehicles are permitted.
2. The Concession Unit must meet all local requirements including but not limited to those of the Board of Health. The lessee will need to complete a Beach Concession Food Permit Application and a separate Food Service Establishment Application.
3. The Concession Unit shall be large enough to meet the demand of the area that it intends to serve but in no case shall be larger than area described in property description.
4. This agreement authorizes Lessee to vend only in the area outlined in the property description and not in any other areas of the Town.
5. Lessee shall furnish electricity and other utilities. The Lessee shall have their electrical usage metered and cost to be paid directly by Lessee to the electric company for all electrical usage at the beach locations.
6. Lessee shall also furnish trash and provide recycling receptacles for customers. Lessee shall remove trash and recycling at the end of each day and shall **not** dispose of trash and recycling in the town barrels.
7. One parking space (in addition to the lessee location described above in "Property Description") shall be available to Lessee or his/her designated employee. Access to parking space for Lessee and concession unit shall be held open until 10:00a.m. After that time access will be dependent upon current parking situation.
8. Lessee **shall have service available** on all fair weather days during the contracted season as stipulated below. The Town Director of Community Services (or designee)

shall be called if there is a question about whether it is a "fair weather day." The Town's determination is final.

- a. Service is **optional** between May 28th and June 17th. The truck may be there between 10am and 4pm but may also elect to be there from 7am to 10am and from 4pm to 7pm.
 - b. Service is **required** between June 18th and Labor Day. The truck must be there between 10am and 4pm but may be there from 7am to 10am and from 4pm to 7pm.
 - c. Service is **optional** from September 6 through November 1st. The truck may be there between 10am and 4pm but may also elect to be there from 7am to 10am and from 4pm to 7pm.
9. The concession vehicle shall be removed at the end of the day.
 10. Lessee shall not sublet the concession without the prior written approval of the Town.
 11. All lessees must operate from a fixed food establishment.
 12. All lessee vehicles are subject to inspection by local officials.

At all times during the term of the lease, the Lessee shall carry Concessionaire's liability/products liability insurance in the about of \$1,000,000 and worker's compensation insurance in the amount of \$500,000 with the Town named as an additional insured. Evidence of the insurance policies shall be provided to the LESSOR.

In consideration of the privileges extended to the LESSEE by this lease, the LESSEE shall pay to the LESSOR **\$2,001 for Maguire Landing.**

The LESSOR shall have the right to cancel the lease at any time for reasonable cause and the LESSEE shall forfeit the lease payment.

FOR THE LESSOR (Board of Selectmen):

FOR THE LESSEE (Michael Banghart):



TOWN OF WELLFLEET

300 MAIN STREET WELLFLEET MASSACHUSETTS 02667

Tel (508) 349-0300 Fax (508) 349-0305

www.wellfleetma.org

To: Board of Selectmen
From: Harry Sarkis Terkanian, Town Administrator
Subject: Town Administrator's Report
Date: May 5, 2016

This report is for the period April 8, 2016 through May 4, 2016. Much of my time during this the first week of this period was devoted to budgets, the annual town meeting warrant and town administrator search. Since the warrant went to the printer on March 24th I have been able to turn my attention to other matters, principal among them are town meeting preparation, town administrator search, collective bargaining and contract negotiations. No that town meeting has completed work begins on the FY 2018 capital improvement plan.

1 Procurement and Public Works:

- a. Police Station Renovation. A schedule of meetings have been established for the Building Committee. A project subcommittee has been organized to meet more frequently. The most recent meeting was on April 25th. The designer is completing the schematic design which is expected to be ready for review on May 12th. Once complete, design development will begin. Analysis of the alternatives for quartering the police department during construction are under consideration and include trailer rental, refurbishment of the old COA building and a phased renovation while the department continues to occupy the building. The next scheduled meeting is on May 12th.
- b. Dredging permitting. The Dredging Working Group met on April 15, 2016. Bourne Consulting Engineering has filed the Environmental Notification Form ("ENF") in the Town's behalf on April 15, 2016. This is the first step in the process of obtaining the permits required for dredging the Town/State portion of the project and will also advance the approvals necessary for the Federal portion of the project. The next step is preparation of a plan of mitigation for possible individual takes of diamondback terrapins which might occur during dredging.
- c. Beach and Baker Field concessions. Requests for proposals for Town beaches and Baker Field have been released. Responses were due on April 29th.
- d. Water system expansion. This project is awaiting a determination by Outer Cape Health whether they will be able to develop an adequate water supply on site. I will be assisting the Board of Water Commissioners in preparing alternative proposals for recovery of construction costs should the project advance.

- e. Elementary School Roof. Submissions to close out the project have been made to the Mass. School Building Authority including a final request for reimbursement.
 - f. Purchase orders for two police cruisers have been signed for delivery after July 1.
- 2 Annual Town Meeting and Fiscal Matters
- a. The 2016 annual town meeting and annual town election have been completed. Preparation for town meeting is always time consuming and would not have been successful without the assistance of many people.
 - b. Work has begun on the fiscal 2018 capital improvement plan which is due on June 1st.
- 3 Town Administrator Search. The Committee met for a final time on April 18th and recommended a list of finalists to the Board of Selectmen. Members of the Committee should be commended for the diligence and insight they displayed throughout the process. On May 3rd department head interviews and public interviews before the selectmen were conducted.
- 4 Meetings
- a. April 8, 2016. Attended presentation by Plymouth County of their OPEB trust services.
 - b. April 12, 2016. Conducted collective bargaining sessions with Dispatchers and Wellfleet Employees Association.
 - c. April 13, 2016. Meeting shellfish constable about shellfish department operations.
 - d. April 14, 2016. Collective bargaining session with the permanent firefighters.
 - e. April 14, 2016. Attended Cape Cod Managers meeting.
 - f. April 15, 2016. Dredging working group meeting.
 - g. April 18, 2016. Final meeting of the Town Administrator Search Committee.
 - h. April 18, 2016. Attended Wellfleet Community Forum pre town meeting information meeting.
 - i. April 20, 2016. Planning meeting for the annual town meeting.
 - j. April 21, 2016. Status review with Barnstable County IT Department.
 - k. April 25 & 26, 2016. Annual Town Meeting
 - l. April 28, 2016. Personnel Board. Public hearing on employee manual.
 - m. May 2, 2016. Met with Barbara Brennessell and John Portnoy to discuss the permitting status of the clutching program.
 - n. May 2, 2016. Attended the Police Department – Citizens for Community Policing planning session for the summer officers orientation in late May.
 - o. May 3, 2016. Attended Mass School Building Authority Designer Selection Committee meeting to select finalists for designer services for the Cape Tech H. S. feasibility study. Interviews and final selection will take place during a meeting at the MSBA in May 17, 2016.
 - p. May 3, 2016. Met with department heads to interview two town administrator candidates (two sessions.)

- q. May 4, 2016. Met with Tim Callis and Trudy Verhermen about landscaping at the DPW building, Town Hall lawn and the Penny Patch property.
- 5 Complaints.
 - a. April 13, 2016. Met with taxpayer about over assessment claim. The taxpayer has never filed any abatement applications and all filing deadlines are long past.
- 6 Miscellaneous.
 - a. 15 Kendrick Ave Septic System. The septic system is on Town property with a portion under the Town's parking lot. Partial system failure has damaged the parking lot. Repairs are in progress under the supervision of the Board of Health on Title 5 issues and the DPW on paving issues. In discussing the issue with the owner's counsel I have learned that a license from the Town to maintain the septic system on Town property was under discussion when the system was originally installed but the process was never completed. A license agreement should be completed for this property to insure that the property owner and the Town are clear on their rights and obligations. I have requested a proposal from the property owner.
 - b. Special Municipal Employees. The last designation of positions as special municipal employees by the Board was in 1994. The list is out of date in that some positions are no longer eligible, some positions no longer exist and many more recently created positions have never been considered by the Board for designation. Attached is a listing of the 1994 designation with my recommendations and comments and a list of additional positions for the Board to consider designating as special municipal employees. I suggest placement on the May 24th agenda for the Board's consideration.
 - c. Herring River restoration project. The Board invited public comment on future status of High Toss Road at the March 22nd meeting. No action was taken, in part in anticipation of guidance from the town meeting. Does the Board wish to further consider its present position on High Toss Road at a future meeting?
- 7 Vacancies.
 - a. Assembly of Delegates. Ned Hitchcock has resigned, effective April 22, 2016. The Selectmen should prepare to fill the vacancy at the May 10th selectmen's meeting.
- 8 Personnel Matters:
 - a. Administrative actions (appointments are subject to disapproval by majority vote of the Board of Selectmen within 14 days; Charter section 5-4-1):
 - i. April 13, 2016. Appointed two Police Department Community Services Officers.
 - ii. April 15, 2016. Promoted Michael Cicale from DPW Equipment Operator to Transfer Station Foreman.
 - iii. April 15, 2016. Hired Jacob Delano as Transfer Station Gate Attendant.
 - iv. I am making the reappointments in the attached letter.

- b. Current employment vacancies (Charter 5-3-2 (i)):
 - i. None
- c. Collective Bargaining has been completed for all union contracts. Of five employees with expiring employment agreements, three have been completed. The negotiation of the contract for the town administrator must await the appointment of a successor. The DPW Director's contract remains in negotiation. Union Contracts expiring next year include the police officer contract and the three Wellfleet Employee Association contracts.
- d. Employee Handbook. The required public hearing on the Personnel Committee's employee handbook was on April 28th. At the hearing the Personnel Board voted to approve the manual with one change relating to the eligibility window for new employee participation in the sick leave bank. We will post the approved manual on the web site. ATA Carlson and I are planning a roll out of the manual to all employees in a series of meetings as an opportunity to educate employees on its contents. Following that we will begin working with department heads on scheduling personnel reviews for employees.



TOWN OF WELFLEET

300 MAIN STREET WELFLEET MASSACHUSETTS 02667

Tel (508) 349-0300 Fax (508) 349-0305

www.wellfleetma.org

May 10, 2016

Board of Selectmen
300 Main Street
Wellfleet, MA 02667

Joseph Powers, Town Clerk
300 Main Street
Wellfleet, MA 02667

BY HAND

RE: Town Administrator Appointments

Dear Members of the Board and Mr. Powers:

Pursuant to Wellfleet Town Charter provision 5-4-1 I have made the following reappointments, effective July 1, 2016 for a term of three years:

Inspector of Plumbing & Gas	Eric Olkkola
Alternate Inspector of Plumbing & Gas	Paul Dinsmore
Alternate Inspector of Plumbing & Gas	Michael Ramsdell
Inspector of Wires	Sean Donoghue
Alternate Inspector of Wires	G. Garrison Roosma
Inspector of Buildings	Richard Stevens
Alternate Inspector of Buildings	Thomas Wingard
Shellfish Constable	Andrew Koch
Deputy Shellfish Constable	Christopher Manulla
Assistant Shellfish Constable	John Mankevetch

Pursuant to Wellfleet Town Charter provision 5-4-1 I have made the following reappointments, effective July 1, 2016 for a term of one year:

Parking Control Officer	Nancy Vail
Parking Hearing Officer	Jennifer Kane
Veterans Agent	Edward Merigan
Veterans Agent	Robert Schultz

Veterans Agent (Wellfleet)

Wilfrid Remillard

Animal Control Officer

Susan Trasavage.

Pursuant to said section all such appointments are subject to disapproval by majority vote of the Board of Selectmen within fourteen (14) days.

Respectfully yours,

A handwritten signature in black ink, appearing to read "H. Sarkis Terkanian", with a long horizontal line extending to the right.

Harry Sarkis Terkanian,
Town Administrator

SPECIAL MUNICIPAL EMPLOYEES - as designated by the Wellfleet Board of Selectmen As of December, 1994

Position	TA Recommendation	Comments
Advisory Committees to Board of Selectmen	Delete	Cannot designate a category, must be a specific position
Animal Inspector	Delete	Appointed by MDAR position vacant
Assistant Building Inspector	Delete	Merged into the Director of Community Services, full time position
Assistant Wiring Inspector	Delete	Disolved?
Beach Administrator	Delete	Do any work more than 800 hours?
Beach Study Committee		
Board of Water Commissioners		
Call firefighters (previously "volunteer")		
Cape Cod Commission Coastal Resources Committee Representative		
Cape Cod Commission Representative		
Cape Cod Commission Shellfish Advisory Committee Representative		
Cape Cod National Seashore Park Advisory Committee Representative	Delete, not a municipal employee	Town nominates but Secretary of Interior appoints
Cape Cod Regional Technical High School Committee Member		
Comentery Commissioners	Delete	Disolved
Comission on Disabilities	Delete	All work full time; not eligible
Computer Study Committee	Delete	No such Committee
Cultural Council		
Deputy Shellfish Constables (part-time)		
Election Officer		
Emergency Planning Committee		
Forest Fire Warden		
Hearings Officer		
Historical Commission		
Library Trustees	Redesignate with correct Parking Hearings Officer name	

Lifeguards		
Marina Night watchmen (less than 800 hrs)		
Moderator		
Natural Resources Advisory Board		
Nauset Regional School Committee		
Parking Control Officers (less than 800 hrs)		
Parking/Traffic Committee		
Part-time Clerks/Secretaries (less than 800 hrs)		
Part-time Custodians (less than 800 hrs)		
Part-time School cafeteria Employees (less than 800 hrs annually)		
Part-time School Counselors (less than 800 hrs annually)		
Part-time School Therapists (less than 800 hrs annually)		
Personnel Board		
Planning Board		
Plumbing & Gas Inspector		
Police Matrons		
Recycling Commission		Redesignate with correct name
Regional Transit Authority Representative		
Registrars of Voters		
Seasonal laborers (less than 800hrs)		
Shellfish Advisory Committee		
Special Police Officers (less than 800 hrs)		
Town bylaw Committee		
Town Hall Building Committee		
Wiring Inspector		
Zoning Board of Appeals		Has this been dissolved?

Committees and Positions Missing or Not Designated

Alternate Inspector of Buildings			
Alternate Plumbing & gas inspectors			
Alternate Inspectors of wires			
Barnstable County Assembly of Delegates Member			
Barnstable Dcounty Home Consortium Member			
Beach Parking Task Force			
Bike and Walkways Committee			
Board of Assessors			
Board of Health			
Board of Selectmen (automatic in towns < 10,000)		no action needed	
Building and Needs Assessment Committee			
Bylaw Committee			
Cable Advisory Committee			
Cape Cod Water Protection Collaborative			
Cape Cod Water Protection Collaborative Techniacl Advisory Committee		no action needed	sub committee of WaterProtection Collaborative
Cape Light Compact Governing Board			
Charter Review Committee			
Citizens Economic Development Committee (if reconstituted)			
Community Preservation Committee			
Comprehensive Wastewater Management Planning Committee			Have not met recently, work is essentially completed Have not met recently, work is essentially completed
Comprehensive Wastewater Planning Ad Hoc Committee			
Conservation Commission			
Constables			
Council on Aging Advisory Board			
Energy Committee			
Finance Committee			
Health Care Campus Committee			
Herring River Restoration Committee			
Herring Warden			
Housing Authority members			
Library Assistants, Temporary			
Library Pages			
		no action needed	Disolved 12/7/2009
			Part time, \$2,500 stipend
			All work less than 800 hours. All work less than 800 hours.

Local Comprehensive Plan Working Group			
Local Comprehensive Planning Implementation Committee	no action needed	Disolved 7/8/14	
Local Housing Partnerships			
Marina Advisory Committee			
Mayo Creek Restoration Committee			
Open Space Committee	no action needed	advisory only	
Outer Cape Intermunicipal Committee			
Police Station Building Committee			
Recreation Committee			
Recreation Department Seasonal Employees		Work less than 800 hours	
School Committee			
School Council			
Senior Tax Workoff Coordinator		MGL c. 71 s. 59C	
Social and Human Services Committee		Unpaid, only occasional duties	
Taxation Aid Committee			
Town Administrator Search Committee		Temporary, unpaid, less than	
Union 54 School Committee		Unpaid, only occasional duties	
Veterans Tax Workoff Coordinator		Part time	
Veterans Agents			

Town of Wellfleet Committee Vacancies

Date: May 5, 2016
To: Harry Terkanian
From: Jeanne Maclauchlan
Re: Appointments to Town Boards

The following provides the appointing authority with a comprehensive view of vacant positions on each Town Board. Each identifies the amount and type of positions that are vacant, the authority for making the appointment, the length of the term and the number of applications requesting consideration to fill a vacancy.

Bike & Walkways Committee (5 Members)

Vacant Positions	Appointing Authority	Length of Term
2 Positions	Board of Selectmen	3 years
Requesting Appointment: No applications on file		

Board of Health (5 members)

Vacant Positions	Appointing Authority	Length of Term
1 Position	Board of Selectmen	3 years
Requesting Appointment: Two applications on file		

Board of Water Commissioners (5 members)

Vacant Positions	Appointing Authority	Length of Term
1 Position	Board of Selectmen	2018 - length of term
Requesting Appointment: Two applications on file		

Building and Needs Assessment Committee (5 Members)

Vacant Positions	Appointing Authority	Length of Term
2 Positions	Board of Selectmen	3 years
Requesting Appointment: No applications on file		

Cable Advisory Committee (5 Members)

Vacant Positions	Appointing Authority	Length of Term
2 Positions	Board of Selectmen	1 year
Requesting Appointment: No applications on file		

Cape Light Compact Governing Board (1 member, 1 alternate)

Vacant Positions	Appointing Authority	Length of Term
1 alternate position	Board of Selectmen	2 years
Requesting Appointment: No applications on file		

Commission on Disabilities (up to 7 Members)

Vacant Positions	Appointing Authority	Length of Term
4 Positions	Board of Selectmen	3 years

Requesting Appointment: No applications on file

Cultural Council (no more than 22 members)

Vacant Positions	Appointing Authority	Length of Term
11 positions	Board of Selectmen	3 years

Requesting Appointment: No applications on file

Energy Committee (11 members total)

Vacant Positions	Appointing Authority	Length of Term
2 Alternate Positions	Board of Selectmen	3 years

Requesting Appointment: No applications on file

Finance Committee (9 members, 2 alternate)

Vacant Positions	Appointing Authority	Length of Term
1 Alternate Position	Town Moderator	3 years

Requesting Appointment: No applications on file

Herring Warden (1 Warden, 1 Assistant Warden)

Vacant Positions	Appointing Authority	Length of Term
1 Assistant Position	Board of Selectmen	3 years

Requesting Appointment: No applications on file

Historical Commission (7 Members)

Vacant Positions	Appointing Authority	Length of Term
1 Position	Board of Selectmen	3 years

Requesting Appointment: **One application on file**

Planning Board (7 members)

Vacant Positions	Appointing Authority	Length of Term
1 Position	Board of Selectmen	5 years

Requesting Appointment: **One application on file**

Recreation Committee (5 members)

Vacant Positions	Appointing Authority	Length of Term
2 Position	Board of Selectmen	3 years

Requesting Appointment: No applications on file

Shellfish Advisory Board (7 Members, 2 Alternates)

Vacant Positions	Appointing Authority	Length of Term
1 Position	Board of Selectmen	3 years

1 Alternate Position
Requesting Appointment: No applications on file

Zoning Board of Appeals (5 Members, 4 Associates)

Vacant Positions	Appointing Authority	Length of Term
1 Associate Position	Board of Selectmen	1 year, 1 month to fill term

Requesting Appointment: **One application on file**



DRAFT
Wellfleet Board of Selectmen
Minutes of April 12, 2016
Wellfleet Senior Center

Present: Selectmen Dennis Murphy, Helen Miranda Wilson; Berta Bruinooge, Jerry Houk; Town Administrator Harry Sarkis Terkanian and Assistant Town Administrator Brian Carlson

Regrets: Paul Pilcher

Chairman Dennis Murphy called the meeting to order at 7:00 pm.

Announcements, Open Session and Public Comment

- Terkanian announced: 1) The Assembly of Delegates vacancy as a result of the resignation of Ned Hitchcock will be effective April 22 and needs to be filled no later than May 10.; 2) Absentee Ballots for the Annual Town Elections are available at Town Hall; 3) Candidates Night sponsored by the Wellfleet Forum will be on April 13 at 7 PM at the Council On Aging.; 4) Friends of Herring River will hold an informative session on April 14 at 7 PM at the Council On Aging; 5) The Moderator's guidelines for 2016 Annual Town Meeting slides are posted online.
- Chief Fisetta announced: 1) An event by the Independence House for victims of Sexual Abuse will be held on April 15 from noon to 5 PM at the Library. 2) The new and improved Police Department web site is up and running and encouraged everyone to visit it at www.wellfleetpd.org
- Curt Felix announced that he had attended a meeting with MEMA and FEMA about harbor dredging and oyster propagation. After the meeting MEMA had suggested for the Town to put a grant application which may potentially provide \$5-\$6M in grants for Harbor dredging.
- Moderator Dan Silverman explained the guidelines for Town Meeting presentation slides.

Public Hearing(s)

Murphy opened the public hearing(s) at 7:05 pm.

Proposed Fee increases of the Shellfish Department (*continued from March 22, 2016*)

The Shellfish Constable was attending another meeting and was not present for the hearing. Wilson felt that the increases to the fees are modest. Bruinooge recused herself.

MOTION 215-527: Houk moved and Wilson seconded to approve the Shellfish Department fees as presented. The motion passed 3-0-1 (Bruinooge).

Request for change of Manager of Slackman, Inc., dba Pearl Restaurant

Alison Hester presented the request for change of Management of Slackman, Inc. dba The Perla Restaurant.

MOTION 215-528: Houk moved and Bruinooge seconded to approve the request for change of Manager of Slackman, Inc., dba Pearl Restaurant from Kristi Wageman to Alison Hester. The motion passed 4-0.

Appointments/Reappointments

Marianne L. Nickerson to Town Collector

MOTION 215-529: Wilson moved and Bruinooge seconded to appoint Marianne L. Nickerson to Town Collector with term ending June 30, 2018. The motion passed 4-0.

Miriam Spencer to Board of Water Commissioners

Miriam Spencer presented her interest to serve as Water Commissioner. Wilson said that there is a conflict of interest that will be ongoing – Miriam Spencer is a customer of the Wellfleet Municipal Water System and less than 10% of the Town's residents are connected to the System, which creates a conflict that according to the State Ethics Commission gives rise to an ongoing conflict of interests.

MOTION 215-530: Houk moved to appoint Miriam Spencer to Board of Water Commissioners (BWC) with term ending June 30, 2018 and continue as secretary to the Board of Waters until a new secretary is hired. Murphy seconded the motion and discussion ensued. Bruinooge said that there is also a conflict of interest as a hired employee under the same Board. Terkanian said that the Town Counsel's opinion did not cover Spencer's connection status to the water system, because it has not been part of the opinion. Wilson responded to this comment and referred to the Conflict of Interest Law. Jeanne Machlauchlan asked if any other commissioners are connected to the System. Wilson said that Ms. Spencer can speak freely as a secretary and clerk to the BWC. Felix spoke about the conflict of interest as a salaried employee. Justina Carlson, Chair of the BWC recognized the service of Spencer as an excellent clerk and secretary and said that there is a lot of work remaining to be done, where Spencer can be of assistance. According to Carlson the appearance of the conflict of interest is a strong obstacle and for this reason she did not support the appointment. Spencer said that speaking as a secretary is contrary to the Parliamentary Procedures and she has been cleared by Town Counsel's opinion. Murphy said that it appears that the vote may be split and suggested that Spencer may want to come back when the Board of Selectmen has five members to avoid failing motion with a split vote. Houk withdrew his motion and Murphy withdrew his second.

SPAT OysterFest request for October 15, 2016 and October 16, 2016

Michelle Insley presented the SPAT request for 2016 Oystefest. Murphy said that the application has not been cleared by the Community Services Director Suzanne Grout Thomas and suggested postponing it until she returns from vacation and has a chance to review it. Insley expressed interest to have parts of the application reviewed, so SPAT can make a progress toward the event logistics. Discussion ensued about cost of transportation for buses, dates and times of the requested use of Town property and parking arrangements for Town employees. Insley said that there are no significant changes, but expressed preference to have all parking prohibited in the Town Hall parking lot on the Thursday and Friday before Oysterfest. Murphy wanted to know if alternative parking arrangements for Town staff have been made. Terkanian said that typically staff has parked on Main Street. He also explained that usually a Memorandum Oof Understanding is done to document the the exact venues and services provided and expected by the Town and the Town's cost. Insley discussed the change of proposed fees to be charged and explained that there will be a waiver of admission fee for Wellfleet residents. The Board discussed the requested extension of the area for activities down West Main Street to Howland Avenue. Houk wanted to know if there is a plan for dealing with private property owners. Chief Fisette spoke about the commercial nature of Main Street, but said that extending the event activities beyond West Main Street will cause interference with private residences. Insley said that the idea of the extended area is in attempt to distribute the crowds more evenly. Murphy said that he likes to see consent letters signed by the individual owners and presented to the Board by SPAT at the next meeting at which the application is reviewed. Houk said that the property owners should be made aware of the traffic implications. Janet Reinhart wanted to know if Briar Lane will also be closed. Wilson said that she prefers the more concentrated event on one place rather than extending the area. The transportation, the extended area of use and the requested consent letter signed by affected owners will be discussed at the next Board's meeting.

Tara Conklin to use Mayo Beach on August 13 from 3:30 pm – 5:00 pm for a wedding ceremony

MOTION 215-531: Bruinooge moved and Wilson seconded to approve the request of Tara Conklin to use Mayo Beach on August 13, 2016 from 3:30 pm – 5:00 pm for a wedding ceremony; Application fee paid; event fee due \$100. The motion passed 4-0.

Approval of proposed letter on electric supply grid modernization

Energy Committee Chair Dick Elkin and Maggie Downey of Cape Light Compact presented the request for approval of proposed electric supply grid modernization letter. Downey said that this will be paid by all rate payers.

MOTION 215-532: Wilson moved and Bruinooge seconded to authorize the vice chairman to sign the requested letter on electric supply grid modernization. The motion passed 4-0.

Reconsideration of filing deadline in Food Truck Licensing Regulations

Terkanian explained the need for the deadline reconsideration for the Food Truck Licensing Regulations. Curt Felix urged the Selectmen to reconsider inserting “on case by case” language. Wilson went over the reasons why the deadline was set based on last summer’s experience. Bruinooge agreed with Wilson and said since this is the first year it is considered a “test year” and will have the possibility for revision next year. Murphy said by not doing the proposed changed the Selectmen are giving up revenue for use of town property. Houk agreed with Murphy and said that some flexibility should be considered. Janet Reinhart said that the situation is similar to restaurant changing ownership in the middle of the summer and supported the idea of inserting “case-by-case” language. Bruinooge said that she has been convinced to change her mind about inserting “case-by-case” bases and see how it goes.

MOTION 215-533: Wilson moved and Houk seconded to strike the sentence that imposes the April 15 deadline. The motion passed 4-0.

Moderator’s request for awarding five resident beach stickers by random drawing at the end of town meeting

MOTION 215-534: Houk moved and Bruinooge seconded to approve the Moderator’s request for awarding of five resident beach stickers after the end of Town Meeting. The motion passed 4-0.

Town Administrator’s Report¹

Future Concerns

- Houk shared complains about political signs at Town Hall lawn. Terkanian will research it and get back to the Selectmen.
- Wilson wanted to know if all updated BOS policies are posted online.
- Wilson suggested a possible Selectmen meeting on May 3, 2016 to interview TA finalists and asked of the Board’s opinion on partially covering finalists travel expenses in excess of \$50 for the second interview. Bruinooge and Murphy disagreed.
- Wilson made the Board aware of correspondence from Jean Maclauchlan about Shellfish Constable Andrew Koch and penalty fees enforcement.

Correspondence² and Vacancy³ Report

Wilson – Conservation Commission correspondence about culch permitting for areas inside the Park.

MOTION 215-535: Bruinooge moved and Murphy seconded to approve the Minutes of March 15, 2016⁴. The motion passed 4-0.

MOTION 215-536: Wilson moved and Houk seconded to approve the Minutes of March 22, 2016⁵ with revisions by Wilson. The motion passed 3-1 (Bruinooge).

Executive session

Murphy read the purpose of the executive session and stated that discussing these items on open session may have a detrimental effect:

- A. To conduct strategy sessions in preparation for negotiations with nonunion personnel or to conduct contract negotiations with nonunion personnel (Department of Public Works Director.) [TA]
- B. To discuss strategy with respect to collective bargaining with Wellfleet Employees Association Units A, B & C, Permanent Fire Fighters, Teamsters Union and Communicators Union. [TA]
- C. Approval and consideration of public release of minutes from previous executive sessions.

Murphy also stated that the Board may reconvene in open session for possible vote to approve contract of employment for the Director of Public Works.

MOTION 215-537: The Selectmen took a roll call vote all saying “Aye” to enter in executive session at 9:10 pm for the above stated reasons and to possibly go back to open session.

The Board reconvened in open session at 9:57 pm, but did not have any other actionable item.

Adjournment

MOTION 215-538: Wilson moved and Bruinooge seconded to adjourn the public meeting at 9:57 pm. The motion passed 4-0.

Respectfully submitted,
Michaela Miteva, Executive Assistant

¹ Town Administrator’s Report of April 8, 2016

² Correspondence Report of April 12, 2016

³ Vacancy Report of April 8, 2016

⁴ Draft minutes of March 15, 2016

⁵ Draft minutes of March 22, 2016



DRAFT

**Wellfleet Board of Selectmen
Minutes of April 20, 2016
Wellfleet Town Hall**

Present: Selectmen Dennis Murphy, Helen Miranda Wilson; Berta Bruinooge. Also in attendance: Town Administrator Harry Sarkis Terkanian and Assistant Town Administrator Brian Carlson, Finance Committee Chairman Stephen Polowczyk, Town Clerk Joseph Powers, Town Moderator Daniel Silverman, Town Accountant Marilyn Crary, Community Preservation Committee Coordinator Mary Rogers and Attorney Carolyn Murray (by telephone)

Vice Chairman Dennis Murphy called the meeting to order at 10:03 am.

Briefing and preparation for 2016 Annual Town Meeting. Draft motions prepared by the Town Administrator and the annual town meeting warrant were reviewed along with discussion of articles which may require explanation at town meeting. Collective bargaining articles will be moved with funding where agreements have been reached. If no agreement has been reached the article for that contract will be indefinitely postponed. Community Preservation Act articles were discussed. Mary Rogers will move Article 21. The need for the Community Preservation Committee and project supporters to be prepared for questions was discussed regarding articles 21 – 24. On article 27, water system engineering, cost estimates have been requested but are not yet in hand and will be necessary for this proposal to be acted on. The proposed motion on article 28, snow removal, is to be revised by the Town Administrator to make clear that roads to be plowed must be approved by the Board. No information was available on proposed motion on article 31, fireworks, as that article was petitioned. Articles 36 – 38, acceptance of water betterment statutes, was discussed and a fuller explanation of the process to assess betterments should be given to the meeting. The history behind article 40, Council on Aging Advisory Board in the article summary was reviewed. The need to provide additional information on article 41, pesticide restrictions, was discussed. The need to have maps showing the location of the properties to be transferred to the Conservation Commission in articles 45 & 46 was reviewed. Under article 47, the history of the Gull Pond Road affordable housing project was reviewed as a rationale for the developer's request to amend the deed restrictions for the project. Article 47 is a petitioned article so no information is available on a proposed motion. Counsel was asked to comment on whether the meeting could require the selectmen to act and advised the board that a resolution would only be a "sense of the meeting" resolution. A possible amendment to the budget to provide additional funding for the Cultural Council was discussed. It was noted by the Town Administrator that the budget is the result of an eight month process involving many people and many evenings of meetings which, for whatever reason, the Cultural Council did not participate in. Meetings of both the Finance Committee and Selectmen have been posted for 6:00 PM on April 25th for final recommendations. As this was a briefing and discussion, no motions were offered or votes taken on this agenda item.

Approval of letter to Department of Environmental Protection supporting principal forgiveness of State Revolving Fund loans. The Town Administrator briefed the selectmen on the issue which is detailed in the draft letter.

MOTION 215-539: Wilson moved and Bruinooge seconded to approve as sign the proposed letter to Mr. McCurdy supporting the proposal to permit principal forgiveness on state revolving fund loans. The motion passed 3-0.

Adjournment

DRAFT

MOTION 215-540: Bruinooge moved and Wilson seconded to adjourn the public meeting at 11:20 am.
The motion passed 3-0.

Respectfully submitted,

Harry Sarkis Terkanian, Town Administrator

¹ Public Record Documents

¹ Annual town meeting warrant; Town Administrator's draft annual town meeting motions; and draft letter to Mr. Steven McCurdy.



DRAFT

Wellfleet Board of Selectmen
Minutes of April 25, 2016
Wellfleet Elementary School Principal's Conference Room

Present: Selectmen Dennis Murphy, Helen Miranda Wilson; Berta Bruinooge, Jerry Houk; Town Administrator Harry Sarkis Terkanian and Assistant Town Administrator Brian Carlson

Regrets: Paul Pilcher

Chairman Dennis Murphy called the meeting to order at 6:00 pm.

Announcements, Open Session and Public Comment

- Wilson discussed the possibility of asking the TA Search Committee to recommend additional applicants due to George King's withdrawal. Terkanian said that this may send the wrong message to the two remaining finalists and did not support the idea. Bruinooge and Murphy agreed with Terkanian. Houk said that he will not be attending the meetings between Department Heads and the TA Finalists. Bruinooge and Murphy also said that they would not attend and wait to meet the finalists during the Selectmen meeting at 7 pm on May 3, 2016. Wilson said that she will attend, but will not participate.

Appointments/Reappointments

Fire Chief Rich Pauley recommended the appointments of Benjamin Bartolini, Andrew Bond and Holly Kuhn as Call Fire Fighters.

MOTION 215-541: Houk moved and Wilson seconded to appoint Benjamin Bartolini, Andrew Bond and Holly Kuhn to On-Call Fire Fighters. The motion passed 4-0.

Business - Consideration of additional or amended recommendations for town meeting

Terkanian distributed the final article motions and went over the final changes to the 2016 ATM warrant. He specifically talked about articles #2 and #27. He said that the personnel-related articles will be discussed in executive session.

Executive session & Adjournment

Murphy read the purpose of the executive session in open session: To discuss strategy with respect to collective bargaining with Wellfleet Employees Association Units A, B & C, Permanent Fire Fighters, Teamsters Union and Communicators Union, and stated that discussing these matters in public meeting may have detrimental effect on the negotiations strategies.

MOTION 215-542: The Selectmen took a roll call vote by each Murphy, Wilson, Bruinooge and Houk saying "Aye" to enter in executive session at 6:10 pm for the above stated reasons and not reconvene in open session.

Respectfully submitted,
Michaela Miteva, Executive Assistant



DRAFT
Wellfleet Board of Selectmen
Minutes of May 3, 2016
Wellfleet Senior Center

Present: Selectmen Dennis Murphy, Helen Miranda Wilson; Berta Bruinooge, Janet Reinhart, Jerry Houk; Town Administrator Harry Sarkis Terkanian and Assistant Town Administrator Brian Carlson

Chairman Dennis Murphy called the meeting to order at 7:00 pm.

Reorganization of the Board of Selectmen

MOTION 215-543: Houk moved and Wilson seconded to nominate Dennis Murphy as the Chairman of the Board. The motion passed 5-0.

MOTION 215-544: Murphy moved and Wilson seconded to nominate Berta Bruinooge as Vice Chair. The motion passed 5-0.

MOTION 215-545: Reinhart moved and Wilson seconded to nominate Janet Reinhart to serve as a Clerk. The motion passed 5-0.

Murphy recognized Paul Pilcher for his service and introduced Janet Reinhart as the newest Board member.

Business - Interview of candidates for appointment as Town Administrator

1. Daniel Hoort introduced himself and was interviewed by the selectmen about his management style, experience and approach for the Town Administrator position.

Recess 7:40 pm-7:50 pm.

2. Paul Dauphinais – introduced himself and was interviewed by the selectmen about his management style, experience and approach for the Town Administrator position.

After the interviews the Selectmen discussed a time frame for making a decision on appointing a Town Administrator. A meeting was scheduled for Friday, May 6 at 4:30 pm at Town Hall Hearing Room to further consider the applications.

Adjournment

MOTION 215-546: Houk moved and Wilson seconded to adjourn the meeting at 8:32 pm. The motion passed 5-0.

Respectfully submitted,
Michaela Miteva, Executive Assistant

Public Record Documents:

1. TA Finalists resumes