



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street
Boston, MA 02114
www.mass.gov/abcc

ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 054000044

CITY OR TOWN HOLYOKE

APPLICATION FOR RENEWAL:

Seasonal

LICENSED FOR 2015

CLASS

YEAR

LICENSEE NAME: E.S. GOLF CORP

DOING BUSINESS AS JOLYOKE COUNTRY CLUB

ADDRESS NORTHAMPTON HWY.

CITY/TOWN: HOLYOKE

STATE: MA

ZIP CODE: 01040

MANAGER: SUHER, ERIC

TYPE OF LICENSE: Club

CATEGORY: All Alcohol

EMAIL ADDRESS:

YOUR EMAIL ADDRESS IS REQUIRED. PLEASE PRINT CLEARLY.

DESCRIPTION OF LICENSED PREMISES:

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

We the undersigned, attest that we are in possession (1) the certificate required by Chapter 304 of the Acts of 2004, signed by the building inspector and the head of the fire department for the above named license and (2) the certificate of liquor liability insurance required by Chapter 116 of the Acts of 2010.

Please Check Below:

APPROVED: ☐

DISAPPROVED: ☐

(If disapproved explain)

LOCAL LICENSING AUTHORITY

By:

DATE:

APPLICATION FOR RENEWAL MUST BE FILED BY LICENSEES DURING THE MONTH OF MARCH (M.G.L. Ch. 138 § 16A)



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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 054000102

CITY OR TOWN HOLYOKE

APPLICATION FOR RENEWAL:

Seasonal

LICENSED FOR 2015

CLASS

YEAR

LICENSEE NAME: HONG'S, INC.

DOING BUSINESS AS BAMBOO HOUSE RESTAURANT

ADDRESS 2223 NORTHAMPTON ST

CITY/TOWN: HOLYOKE

STATE: MA

ZIP CODE: 01040

MANAGER: WONG, NEAL

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

YOUR EMAIL ADDRESS IS REQUIRED. PLEASE PRINT CLEARLY.

DESCRIPTION OF LICENSED PREMISES:

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OFF-PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 054000109

CITY OR TOWN HOLYOKE

APPLICATION FOR RENEWAL:

Seasonal

LICENSED FOR 2015

CLASS

YEAR

LICENSEE NAME: SARABSON'S INC.

DOING BUSINESS AS SHOP N GO

ADDRESS 915 MAIN STREET

CITY/TOWN: HOLYOKE

STATE: MA

ZIP CODE: 01040

MANAGER: NAWAZ,
SAGHEER

TYPE OF LICENSE: Package Store

CATEGORY: All Alcohol

EMAIL ADDRESS:

YOUR EMAIL ADDRESS IS REQUIRED. PLEASE PRINT CLEARLY.

DESCRIPTION OF LICENSED PREMISES:

CONVENIENCE STORE, NO BASEMENT, FRONT & REAR EXITS

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 054000112

CITY OR TOWN HOLYOKE

APPLICATION FOR RENEWAL:

Seasonal

LICENSED FOR 2015

CLASS

YEAR

LICENSEE NAME: HAMEL'S CATERING, INC

DOING BUSINESS AS

ADDRESS 555 NORTHAMPTON ST

CITY/TOWN: HOLYOKE

STATE: MA

ZIP CODE: 01040

MANAGER: HAMEL,
MICHAEL R

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

YOUR EMAIL ADDRESS IS REQUIRED. PLEASE PRINT CLEARLY.

DESCRIPTION OF LICENSED PREMISES:

BANQUET HALL, LOUNGE AREA AND OUTDOOR PAVILION.

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OFF-PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 054000118

CITY OR TOWN HOLYOKE

APPLICATION FOR RENEWAL:

Seasonal

LICENSED FOR 2015

CLASS

YEAR

LICENSEE NAME: HECTOR ARCHILLA

DOING BUSINESS AS ARCHIE'S MINI MART

ADDRESS 81 N. BRIDGE STREET

CITY/TOWN: HOLYOKE

STATE: MA

ZIP CODE: 01040

MANAGER: ARCHILLA,
HECTOR

TYPE OF LICENSE: Package Store

CATEGORY: Wine and
Malt Regular

EMAIL ADDRESS:

YOUR EMAIL ADDRESS IS REQUIRED. PLEASE PRINT CLEARLY.

DESCRIPTION OF LICENSED PREMISES:

RETAIL FOOD W/ TWO ENTRANCES.

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TELEPHONE NUMBER:

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 054000122

CITY OR TOWN HOLYOKE

APPLICATION FOR RENEWAL:

Seasonal

LICENSED FOR 2015

CLASS

YEAR

LICENSEE NAME: J. D. Wal, Inc

DOING BUSINESS AS Dino's Pizza Restaurant

ADDRESS 615 Homestead Ave

CITY/TOWN: HOLYOKE

STATE: MA

ZIP CODE: 01040

MANAGER: Patel, Sanjay P.

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

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DESCRIPTION OF LICENSED PREMISES:

2500 sq ft bldg. One entrance and exit

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OFF-PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 054000125

CITY OR TOWN HOLYOKE

APPLICATION FOR RENEWAL:

Seasonal

LICENSED FOR 2015

CLASS

YEAR

LICENSEE NAME: A & A SHELL LLC

DOING BUSINESS AS A & A SHELL

ADDRESS 820 HIGH STREET

CITY/TOWN: HOLYOKE

STATE: MA

ZIP CODE: 01040

MANAGER: AKMAN, JOHN

TYPE OF LICENSE: Package Store

CATEGORY: All Alcohol

EMAIL ADDRESS:

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DESCRIPTION OF LICENSED PREMISES:

GASOLINE SERVICE STATION AND CONVENIENCE STORE

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 054000126

CITY OR TOWN HOLYOKE

APPLICATION FOR RENEWAL:

Seasonal

LICENSED FOR 2015

CLASS

YEAR

LICENSEE NAME: THE LOG CABIN BANQUET AND MEETING HOUSE INC.

DOING BUSINESS AS WYCKOFF BANQUET

ADDRESS 233B EASTHAMPTON ROAD

CITY/TOWN: HOLYOKE

STATE: MA

ZIP CODE: 01040

MANAGER: ROSSKOTHEN,
PETER

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

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DESCRIPTION OF LICENSED PREMISES:

BANQUET ROOM WITH BAR

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EMPLOYER IDENTIFICATION NUMBER:

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 054000127

CITY OR TOWN HOLYOKE

APPLICATION FOR RENEWAL:

Seasonal

LICENSED FOR 2015

CLASS

YEAR

LICENSEE NAME: ELMWOOD PROP. ASSOCIATION

DOING BUSINESS AS THE DAM CAFÉ

ADDRESS 2014 NORTHAMPTON STREET

CITY/TOWN: HOLYOKE

STATE: MA

ZIP CODE: 01040

MANAGER: LONG, CELEST
PRAY

TYPE OF LICENSE: Restaurant

CATEGORY: Wine and
Malt Cordials

EMAIL ADDRESS:

YOUR EMAIL ADDRESS IS REQUIRED. PLEASE PRINT CLEARLY.

DESCRIPTION OF LICENSED PREMISES:

CAFÉ/OFFICE HOUSE APPROX. 2000 SQ FT, 1 FLOOR, STREET LEVEL WITH OPEN CONCEPT

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 054000131

CITY OR TOWN HOLYOKE

APPLICATION FOR RENEWAL:

Seasonal

LICENSED FOR 2015

CLASS

YEAR

LICENSEE NAME: CHANNEL HALL LLC

DOING BUSINESS AS CHANNEL HALL

ADDRESS 26A HADLEY MILL ROAD

CITY/TOWN: HOLYOKE

STATE: MA

ZIP CODE: 01040

MANAGER: QUINONES, SONIA TYPE OF LICENSE: General on
premise

CATEGORY: All Alcohol

EMAIL ADDRESS:

YOUR EMAIL ADDRESS IS REQUIRED. PLEASE PRINT CLEARLY.

DESCRIPTION OF LICENSED PREMISES:

APPROX 2300 SQ FT ON FIRST FLOOR WITH A DINING ROOM, BATHROOMS AND A SERVICE
AREA..FRONT AND REAR EXITS

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 054000132

CITY OR TOWN HOLYOKE

APPLICATION FOR RENEWAL:

Seasonal

LICENSED FOR 2015

CLASS

YEAR

LICENSEE NAME: GCA LLC

DOING BUSINESS AS GATEWAY CITY ARTS

ADDRESS 92 RACE STREET

CITY/TOWN: HOLYOKE

STATE: MA

ZIP CODE: 01040

MANAGER: KRUTA, VITEK

TYPE OF LICENSE: General on
premise

CATEGORY: Wine and
Malt Regular

EMAIL ADDRESS:

YOUR EMAIL ADDRESS IS REQUIRED. PLEASE PRINT CLEARLY.

DESCRIPTION OF LICENSED PREMISES:

HANDICAP ACCESSIBLE..TWO EVENT SPACES..2450 SQ FT AND 1824 SQ FT...ONE
KITCHENETTE..BATHROOMS...STAFF ROOM..STORAGE..

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