



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: 106600008

CITY OR TOWN SALISBURY

APPLICATION FOR RENEWAL:

Seasonal

LICENSED FOR 2015

CLASS

YEAR

LICENSEE NAME: NORMANDY INC.

DOING BUSINESS AS NORMANDY LOUNGE & HOTEL

ADDRESS 16 BROADWAY

CITY/TOWN: SALISBURY

STATE: MA

ZIP CODE: 01952

MANAGER: Roberge, Louise

TYPE OF LICENSE: General on
premise

CATEGORY: All Alcohol

EMAIL ADDRESS:

YOUR EMAIL ADDRESS IS REQUIRED. PLEASE PRINT CLEARLY.

DESCRIPTION OF LICENSED PREMISES:

COCKTAIL LOUNGE AND SERVICE BAR ON FIRST FLOOR; STORAGE ON WEST SIDE, EXITS ON NORTH SIDE. SECOND FLOOR COCKTAIL LOUNGE, BALCONIES, SERVICE BAR, EXITS ON EAST AND WEST SIDES

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: 106600025

CITY OR TOWN SALISBURY

APPLICATION FOR RENEWAL:

Seasonal

LICENSED FOR 2015

CLASS

YEAR

LICENSEE NAME: ATLANTIC HOSPITALITY GROUP

DOING BUSINESS AS Surfside 5

ADDRESS 25 BROADWAY

CITY/TOWN: SALISBURY

STATE: MA

ZIP CODE: 01952

MANAGER: CAPOLUPO,
WAYNE

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

YOUR EMAIL ADDRESS IS REQUIRED. PLEASE PRINT CLEARLY.

DESCRIPTION OF LICENSED PREMISES:

MASONRY AND STEEL FRAME BUILDING CONSISTING OF BAR, LOUNGE, STORAGE AND UTILITY ROOMS, RESTROOMS AND DECK ALL ON SAME ENTIRE FLOOR.

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2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
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DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 106600057

CITY OR TOWN SALISBURY

APPLICATION FOR RENEWAL:

Seasonal

LICENSED FOR 2015

CLASS

YEAR

LICENSEE NAME: THE SALISBURY PUB, LLC

DOING BUSINESS AS THE SHORE CLUB

ADDRESS 3 BROADWAY

CITY/TOWN: SALISBURY

STATE: MA

ZIP CODE: 01952

MANAGER: ALLEN, PAUL

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

YOUR EMAIL ADDRESS IS REQUIRED. PLEASE PRINT CLEARLY.

DESCRIPTION OF LICENSED PREMISES:

SINGLE STORY BUILDING. DINING ROOM, BAR, KITCHEN, ADJ ROOM WITH POOL TABLE AND RESTROOMS. 4700 SF WITH APPROX 120 SEATS

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OFF-PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 106600084

CITY OR TOWN SALISBURY

APPLICATION FOR RENEWAL:

Seasonal

LICENSED FOR 2015

CLASS

YEAR

LICENSEE NAME: 5-YOGI CONVENIENCE STORE INC.

DOING BUSINESS AS GULF EXPRESS

ADDRESS 5 BRIDGE ROAD

CITY/TOWN: SALISBURY

STATE: MA

ZIP CODE: 01952

MANAGER: PATEL,
TUSHARKUMAR

TYPE OF LICENSE: Package Store

CATEGORY: Wine and
Malt Regular

EMAIL ADDRESS:

YOUR EMAIL ADDRESS IS REQUIRED. PLEASE PRINT CLEARLY.

DESCRIPTION OF LICENSED PREMISES:

60 X 40 CONVENIENCE STORE AND GAS STATION LOCATED AT 5 BRIDGE ROAD

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Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

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LICENSE NUMBER: 106600087

CITY OR TOWN SALISBURY

APPLICATION FOR RENEWAL:

Seasonal

LICENSED FOR 2015

CLASS

YEAR

LICENSEE NAME: THE DECK, LLC

DOING BUSINESS AS THE DECK

ADDRESS 177 BRIDGE STREET

CITY/TOWN: SALISBURY

STATE: MA

ZIP CODE: 01952

MANAGER: AUDETTE, MARK TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

YOUR EMAIL ADDRESS IS REQUIRED. PLEASE PRINT CLEARLY.

DESCRIPTION OF LICENSED PREMISES:

THE FORMER FISHTALE DINER, CONTAINING SQ.FT. THERE IS 567 GSF INTERIOR SPACE AND 691 NSF EXTERIOR SPACE

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 106600089

CITY OR TOWN **SALISBURY**

APPLICATION FOR RENEWAL:

Seasonal

LICENSED FOR **2015**

CLASS

YEAR

LICENSEE NAME: **GRACIE'S NAR AND GRILLE, LLC**

DOING BUSINESS AS

ADDRESS **5 BRAODWAY**

CITY/TOWN: **SALISBURY**

STATE: **MA**

ZIP CODE: **01952**

MANAGER: **GRACE, LISA**

TYPE OF LICENSE: **Restaurant**

CATEGORY: **All Alcohol**

EMAIL ADDRESS:

YOUR EMAIL ADDRESS IS REQUIRED. PLEASE PRINT CLEARLY.

DESCRIPTION OF LICENSED PREMISES:

RESTAURANT/BAR TO BE OPERATED SEASONALLY, CONSISTING OF COMBINATION DINING AREA/ BAR (1,110 SQ.FT.) APPRX. 80 PEOPLE INSIDE (MAX INDORR 98). ADDITIONALLY THERE IS AN OUTSIDE PATIO IN REAROF BUILDING (55522 SQ.FT.) THAT WILL SEAT APPROX. 20, AND AN OUTDOOR SEATING IN FRONT OF BUILDING. (200 SQ.FR.) THAT WILL SEAT APPRX. 10-15 THERE WILL BE ONLY 1 ENTRANCE UTILITEZ, BUT 4 EGRESSES AVAILABLE. BLDG. ALSO CONSISTS OF A KITCHEN AREA (420 SQ.FR.) AND THREE RESTROOMS ONE WHICH IS HP ACCESSIBLE.

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