

## FRANKLIN TOWN COUNCIL

### Agenda & Meeting Packet

October 18, 2023

Meeting will be held at the **Municipal Building**

2nd floor, Council Chambers

355 East Central Street

**7:00 PM**

**A NOTE TO RESIDENTS:** All citizens are welcome to attend public board and committee meetings in person. Meetings are also live-streamed (and archived) by Franklin TV on the [Franklin Town Hall TV YouTube channel](#). Meetings are also shown live and on repeat on Comcast Channel 9 and Verizon Channel 29. In an effort to maximize citizen engagement opportunities, citizens can participate remotely via phone OR Zoom.

Link to access meeting via Zoom for the October 18, 2023 Town Council meeting:

- Zoom Link [HERE](#) -- Then click "Open Zoom".
- Or copy and paste this URL into your browser: <https://us02web.zoom.us/j/85818356372>
- Call-In Phone Number: Call 1-929-205-6099 and enter **Meeting ID # 858 1835 6372** --Then press #
- Please be sure to include your name in order to be identified and let into the meeting.
- You will automatically be muted upon "entering" the meeting. In order to speak, you will need to "raise your hand" on the Zoom platform and request to be unmuted.

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### 1. ANNOUNCEMENTS FROM THE CHAIR

- This meeting is being recorded by Franklin TV and shown on Comcast channel 9 and Verizon Channel 29. This meeting may be recorded by others.*
- Chair to identify members participating remotely.*

### 2. CITIZEN COMMENTS

- Citizens are welcome to express their views for up to three minutes on a matter that is not on the agenda. The Council will not engage in a dialogue or comment on a matter raised during Citizen Comments. The Town Council will give remarks appropriate consideration and may ask the Town Administrator to review the matter.*

### 3. APPROVAL OF MINUTES - None Scheduled.

### 4. PROCLAMATIONS / RECOGNITIONS - None Scheduled.

### 5. APPOINTMENTS

- Police Department - Swearing In of New Patrol Officers
  - Officer Parker Luther
  - Officer Joseph Medina
  - Officer Robert Young
  - Officer Martin Zimei
- Police Department - Introductions
  - Kallie Montagano, Co-Response Program Manager
  - Frankie, Therapy Dog

**6. PUBLIC HEARINGS - 7:00 PM**

- a. [New Section 19B\(n\) Farmer-Winery Pouring Permit and Approval of Robert Vozzella as the Manager - La Cantina Winery Company. Located at 341 Union Street](#)
  - i. License Transaction #7a.
- b. [New Section 19C\(n\) Farmer-Brewery Pouring Permit and Approval of Robert Vozzella as the Manager - La Cantina Winery Company. Located at 341 Union Street](#)
  - i. License Transaction #7b.
- c. [License Modification: Alteration of Premises to combine Section 19B\(n\) Farmer-Winery Pouring Permit and Section 19C\(n\) Farmer-Brewery Pouring Permit to create a Section 19H Farmer-Winery / Farmer-Brewery Pouring Permit and Approval of Robert Vozzella as the Manager - La Cantina Winery Company. Located at 341 Union Street](#)
  - i. License Transaction #7c.

**7. LICENSE TRANSACTIONS**

- a. [New Section 19B\(n\) Farmer-Winery Pouring Permit and Approval of Robert Vozzella as the Manager - La Cantina Winery Company. Located at 341 Union Street](#)
- b. [New Section 19C\(n\) Farmer-Brewery Pouring Permit and Approval of Robert Vozzella as the Manager - La Cantina Winery Company. Located at 341 Union Street](#)
- c. [License Modification: Alteration of Premises to combine Section 19B\(n\) Farmer-Winery Pouring Permit and Section 19C\(n\) Farmer-Brewery Pouring Permit to create a Section 19H Farmer-Winery / Farmer-Brewery Pouring Permit and Approval of Robert Vozzella as the Manager - La Cantina Winery Company. Located at 341 Union Street](#)

**8. PRESENTATIONS / DISCUSSION**

- a. Discussion: SAFE Coalition - Jennifer Knight-Levine, SAFE Coalition CEO & Co-Founder

**9. LEGISLATION FOR ACTION**

- a. [Resolution 23-57: Gift Acceptance - Veterans' Services Department \(\\$3,205\)](#)  
*(Motion to Approve Resolution 23-57 - Majority Vote)*

**10. TOWN ADMINISTRATOR'S REPORT**

- a. Migrant Housing Update

**11. SUBCOMMITTEE & AD HOC COMMITTEE REPORTS**

- a. Capital Budget Subcommittee
- b. Economic Development Subcommittee
- c. Budget Subcommittee
- d. Master Plan Committee
- e. Davis-Thayer Reuse Advisory Committee
- f. Police Station Building Committee
- g. GATRA Advisory Board

**12. FUTURE AGENDA ITEMS**

**13. COUNCIL COMMENTS**

**14. EXECUTIVE SESSION - None Scheduled.**

**15. ADJOURN**

*Note: Two-Thirds Vote: requires 6 votes*

*Majority Vote: requires majority of members present and voting*

## **NOTICE OF PUBLIC HEARING FRANKLIN, MA**

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### **New Section 19B(n) Farmer-Winery Pouring Permit La Cantina Winery Company**

The Franklin Town Council will hold a Public Hearing on an application by La Cantina Winery Company, located at 341 Union Street, Franklin, MA for a new Section 19B(n) Farmer-Winery Pouring Permit. This hearing will take place during the Town Council's public meeting on Wednesday, October 18th, 2023, beginning at 7:00 PM and will provide an open forum for discussion. Location: Municipal Building, 2nd floor Council Chambers, 355 E. Central St., Franklin and will also be available via the "ZOOM" platform. Residents can visit the Town website ([Franklinma.gov](http://Franklinma.gov)) calendar on and after October 13, 2023 for updated meeting information. For questions, please call the Town Administrator's Office at (508) 520-4949.



The Commonwealth of Massachusetts  
 Alcoholic Beverages Control Commission  
 95 Fourth Street, Suite 3, Chelsea, MA 02150-2358  
 www.mass.gov/abcc

RETAIL ALCOHOLIC BEVERAGES LICENSE APPLICATION  
 MONETARY TRANSMITTAL FORM

APPLICATION FOR A NEW LICENSE

APPLICATION SHOULD BE COMPLETED ON-LINE, PRINTED, SIGNED, AND SUBMITTED TO THE LOCAL LICENSING AUTHORITY.

ECRT CODE: RETA

Please make \$200.00 payment here: [ABCC PAYMENT WEBSITE](#)

PAYMENT MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP, OR INDIVIDUAL AND INCLUDE THE PAYMENT RECEIPT

ABCC LICENSE NUMBER (IF AN EXISTING LICENSEE, CAN BE OBTAINED FROM THE CITY)

ENTITY/ LICENSEE NAME

ADDRESS

CITY/TOWN  STATE  ZIP CODE

For the following transactions (Check all that apply):

- |                                                                        |                                                                                                   |                                                                           |                                                                       |
|------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------------------|
| <input checked="" type="checkbox"/> New License                        | <input type="checkbox"/> Change of Location                                                       | <input type="checkbox"/> Change of Class (i.e. Annual / Seasonal)         | <input type="checkbox"/> Change Corporate Structure (i.e. Corp / LLC) |
| <input type="checkbox"/> Transfer of License                           | <input type="checkbox"/> Alteration of Licensed Premises                                          | <input type="checkbox"/> Change of License Type (i.e. club / restaurant)  | <input type="checkbox"/> Pledge of Collateral (i.e. License/Stock)    |
| <input type="checkbox"/> Change of Manager                             | <input type="checkbox"/> Change Corporate Name                                                    | <input type="checkbox"/> Change of Category (i.e. All Alcohol/Wine, Malt) | <input type="checkbox"/> Management/Operating Agreement               |
| <input type="checkbox"/> Change of Officers/<br>Directors/LLC Managers | <input type="checkbox"/> Change of Ownership Interest<br>(LLC Members/ LLP Partners,<br>Trustees) | <input type="checkbox"/> Issuance/Transfer of Stock/New Stockholder       | <input type="checkbox"/> Change of Hours                              |
|                                                                        | <input type="checkbox"/> Other <input type="text"/>                                               |                                                                           | <input type="checkbox"/> Change of DBA                                |

THE LOCAL LICENSING AUTHORITY MUST SUBMIT THIS APPLICATION ONCE APPROVED VIA THE ePLACE PORTAL:

Alcoholic Beverages Control Commission  
 95 Fourth Street, Suite 3  
 Chelsea, MA 02150-2358

# Payment Confirmation

**YOUR PAYMENT HAS PROCESSED AND THIS IS YOUR RECEIPT**

Your account has been billed for the following transaction. You will receive a receipt via email and via text message.



**Transaction Processed Successfully.**

**INVOICE #: 7f5faff3-c029-45ff-8648-6cf08bd6e218**

Description	Applicant, License or Registration Number	Amount
FILING FEES-RETAIL	La Cantina Winery FW-LIC- <del>00363</del> Pouring Permit <i>000218</i>	\$200.00
		<b>\$200.00</b>

Total Convenience Fee: **\$0.35**

Date Paid: **9/22/2023 11:29:31 AM EDT**

Total Amount Paid: **\$200.35**

### Payment On Behalf Of

**License Number or Business Name:**

La Cantina Winery FW-LIC-~~00363~~ Pouring Permit

*000218*

**Fee Type:**

FILING FEES-RETAIL

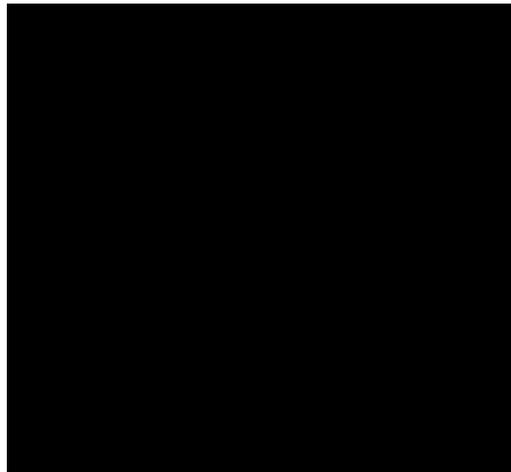
### Billing Information

**First Name:**

Robert

**Last Name:**

Vozzella





*The Commonwealth of Massachusetts*  
**Alcoholic Beverages Control Commission**  
 95 Fourth Street, Suite 3, Chelsea, MA 02150-2358  
 www.mass.gov/abcc

**APPLICATION FOR A NEW LICENSE**

Municipality

**1. LICENSE CLASSIFICATION INFORMATION**

ON/OFF-PREMISES	TYPE	CATEGORY	CLASS
<input type="text" value="On-Premises-12"/>	<input type="text" value="Farmer Series Pouring Permit"/>	<input type="text" value="Wines"/>	<input type="text" value="Annual"/>

Please provide a narrative overview of the transaction(s) being applied for. On-premises applicants should also provide a description of the intended theme or concept of the business operation. Attach additional pages, if necessary.

This application for a Farmer Series Pouring Permit for Wine 19B. La Cantina Winery holds a Farmer series license FW-LIC-00218. La Cantina Winery will offer wine produced and bottled on site by the glass.

Is this license application pursuant to special legislation?  Yes  No Chapter  Acts of

**2. BUSINESS ENTITY INFORMATION**

The entity that will be issued the license and have operational control of the premises.

Entity Name	<input type="text" value="La Cantina Winery Company"/>	FEIN	<input type="text" value="REDACTED"/>
DBA	<input type="text"/>	Manager of Record	<input type="text" value="Robert Vozzella"/>
Street Address	<input type="text" value="341 Union St Franklin MA 02038"/>		
Phone	<input type="text" value="REDACTED"/>	Email	<input type="text" value="REDACTED"/>
Alternative Phone	<input type="text"/>	Website	<input type="text" value="www.lacantinawinery.com"/>

**3. DESCRIPTION OF PREMISES**

Please provide a complete description of the premises to be licensed, including the number of floors, number of rooms on each floor, any outdoor areas to be included in the licensed area, and total square footage. You must also submit a floor plan.

The building located at 341 Union St in Franklin MA is a 1 story building of block construction. The location is identified as A for the Winery Farmer Series Permit. This locations consist of 3 main interior rooms; Tasting Room, Storage/Brewery Production, and Winery Production totaling 7500 SQ/FT. The space also has an outdoor patio that is only accessed from the main entrance of the building and is fenced in. The tasting room and patio space will be 50% dedicated for the malt pouring

Total Square Footage:	<input type="text" value="7500"/>	Number of Entrances:	<input type="text" value="2"/>	Seating Capacity:	<input type="text" value="180"/>
Number of Floors	<input type="text" value="1"/>	Number of Exits:	<input type="text" value="2"/>	Occupancy Number:	<input type="text" value="180"/>

**4. APPLICATION CONTACT**

The application contact is the person whom the licensing authorities should contact regarding this application.

Name:	<input type="text" value="Robert Vozzella"/>	Phone:	<input type="text" value="REDACTED"/>
Title:	<input type="text" value="Owner"/>	Email:	<input type="text" value="REDACTED"/>

## APPLICATION FOR A NEW LICENSE

### 5. CORPORATE STRUCTURE

Entity Legal Structure	<input type="text" value="Corporation"/>	Date of Incorporation	<input type="text" value="2017"/>
State of Incorporation	<input type="text" value="Massachusetts"/>	Is the Corporation publicly traded? <input type="radio"/> Yes <input checked="" type="radio"/> No	

### 6. PROPOSED OFFICERS, STOCK OR OWNERSHIP INTEREST

List all individuals or entities that will have a direct or indirect, beneficial or financial interest in this license (E.g. Stockholders, Officers, Directors, LLC Managers, LLP Partners, Trustees etc.). Attach additional page(s) provided, if necessary, utilizing Addendum A.

- The individuals and titles listed in this section must be identical to those filed with the Massachusetts Secretary of State.
- The individuals identified in this section, as well as the proposed Manager of Record, must complete a CORI Release Form.
- Please note the following statutory requirements for Directors and LLC Managers:
  - On Premises (E.g. Restaurant/ Club/Hotel) Directors or LLC Managers** - At least 50% must be US citizens;
  - Off Premises (Liquor Store) Directors or LLC Managers** - All must be US citizens and a majority must be Massachusetts residents.
- If you are a Multi-Tiered Organization, please attach a flow chart identifying each corporate interest and the individual owners of each entity as well as the Articles of Organization for each corporate entity. Every individual must be identified in Addendum A.

Name of Principal	Residential Address	SSN	DOB
<b>Robert Vozzella</b>	[REDACTED]	[REDACTED]	[REDACTED]
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
President, Treasurer, Director	50	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
			MA Resident
			<input checked="" type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<b>Ana Vozzella</b>	[REDACTED]	[REDACTED]	[REDACTED]
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
Sceretary, Director	50	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
			MA Resident
			<input checked="" type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
[REDACTED]	[REDACTED]	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
			MA Resident
			<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
[REDACTED]	[REDACTED]	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
			MA Resident
			<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
[REDACTED]	[REDACTED]	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
			MA Resident
			<input type="radio"/> Yes <input type="radio"/> No

Additional pages attached?  Yes  No

#### CRIMINAL HISTORY

Has any individual listed in question 6, and applicable attachments, ever been convicted of a State, Federal or Military Crime? If yes, attach an affidavit providing the details of any and all convictions.

Yes  No

## APPLICATION FOR A NEW LICENSE

### 6A. INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Does any individual or entity identified in question 6, and applicable attachments, have any direct or indirect, beneficial or financial interest in any other license to sell alcoholic beverages? Yes  No  If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality
La Cantina Winery Co	Farmer Brewery	FB-LIC-000363	

### 6B. PREVIOUSLY HELD INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Has any individual or entity identified in question 6, and applicable attachments, ever held a direct or indirect, beneficial or financial interest in a license to sell alcoholic beverages, which is not presently held? Yes  No  If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality

### 6C. DISCLOSURE OF LICENSE DISCIPLINARY ACTION

Have any of the disclosed licenses listed in question 6A or 6B ever been suspended, revoked or cancelled? Yes  No  If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Date of Action	Name of License	City	Reason for suspension, revocation or cancellation

## 7. OCCUPANCY OF PREMISES

Please complete all fields in this section. Please provide proof of legal occupancy of the premises.

- If the applicant entity owns the premises, a deed is required.
- If leasing or renting the premises, a signed copy of the lease is required.
- If the lease is contingent on the approval of this license, and a signed lease is not available, a copy of the unsigned lease and a letter of intent to lease, signed by the applicant and the landlord, is required.
- If the real estate and business are owned by the same individuals listed in question 6, either individually or through separate business entities, a signed copy of a lease between the two entities is required.

Please indicate by what means the applicant will occupy the premises

Own

Landlord Name

Landlord Phone

Landlord Email

Landlord Address

Lease Beginning Date

Rent per Month

Lease Ending Date

Rent per Year

Will the Landlord receive revenue based on percentage of alcohol sales?

Yes  No

# 10. MANAGER APPLICATION

## A. MANAGER INFORMATION

The individual that has been appointed to manage and control the licensed business and premises.

Proposed Manager Name  Date of Birth  SSN

Residential Address

Email  Phone

Please indicate how many hours per week you intend to be on the licensed premises

## B. CITIZENSHIP/BACKGROUND INFORMATION

Are you a U.S. Citizen?\*  Yes  No \*Manager must be a U.S. Citizen  
 If yes, attach one of the following as proof of citizenship US Passport, Voter's Certificate, Birth Certificate or Naturalization Papers.

Have you ever been convicted of a state, federal, or military crime?  Yes  No  
 If yes, fill out the table below and attach an affidavit providing the details of any and all convictions. Attach additional pages, if necessary, utilizing the format below.

Date	Municipality	Charge	Disposition

## C. EMPLOYMENT INFORMATION

Please provide your employment history. Attach additional pages, if necessary, utilizing the format below.

Start Date	End Date	Position	Employer	Supervisor Name
1999	2019	Professor	Wentworth Institute of Technology	
2010	2016	Manager	TE Connectovity	Ray Frigault
2016	2018	Manager	Globe Composite Solutions	Michael Dyson
2018	Present	Manager	MGB US INC	Yves Roda

## D. PRIOR DISCIPLINARY ACTION

Have you held a beneficial or financial interest in, or been the manager of, a license to sell alcoholic beverages that was subject to disciplinary action?  Yes  No If yes, please fill out the table. Attach additional pages, if necessary,utilizing the format below.

Date of Action	Name of License	State	City	Reason for suspension, revocation or cancellation

I hereby swear under the pains and penalties of perjury that the information I have provided in this application is true and accurate:

Manager's Signature  Date

**APPLICANT'S STATEMENT**

I, Robert Vozzella the:  sole proprietor;  partner;  corporate principal;  LLC/LLP manager  
Authorized Signatory

of La Cantina Winery Company  
Name of the Entity/Corporation

hereby submit this application (hereinafter the "Application"), to the local licensing authority (the "LLA") and the Alcoholic Beverages Control Commission (the "ABCC" and together with the LLA collectively the "Licensing Authorities") for approval.

I do hereby declare under the pains and penalties of perjury that I have personal knowledge of the information submitted in the Application, and as such affirm that all statements and representations therein are true to the best of my knowledge and belief. I further submit the following to be true and accurate:

- (1) I understand that each representation in this Application is material to the Licensing Authorities' decision on the Application and that the Licensing Authorities will rely on each and every answer in the Application and accompanying documents in reaching its decision;
- (2) I state that the location and description of the proposed licensed premises are in compliance with state and local laws and regulations;
- (3) I understand that while the Application is pending, I must notify the Licensing Authorities of any change in the information submitted therein. I understand that failure to give such notice to the Licensing Authorities may result in disapproval of the Application;
- (4) I understand that upon approval of the Application, I must notify the Licensing Authorities of any change in the ownership as approved by the Licensing Authorities. I understand that failure to give such notice to the Licensing Authorities may result in sanctions including revocation of any license for which this Application is submitted;
- (5) I understand that the licensee will be bound by the statements and representations made in the Application, including, but not limited to the identity of persons with an ownership or financial interest in the license;
- (6) I understand that all statements and representations made become conditions of the license;
- (7) I understand that any physical alterations to or changes to the size of the area used for the sale, delivery, storage, or consumption of alcoholic beverages, must be reported to the Licensing Authorities and may require the prior approval of the Licensing Authorities;
- (8) I understand that the licensee's failure to operate the licensed premises in accordance with the statements and representations made in the Application may result in sanctions, including the revocation of any license for which the Application was submitted; and
- (9) I understand that any false statement or misrepresentation will constitute cause for disapproval of the Application or sanctions including revocation of any license for which this Application is submitted.
- (10) I confirm that the applicant corporation and each individual listed in the ownership section of the application is in good standing with the Massachusetts Department of Revenue and has complied with all laws of the Commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting of child support.

Signature: Robert Vozzella

Date: 9/22/23

Title: Owner





# Robert A. Vozzella

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**Objective** Utilize strong successful managerial experience to build a lean manufacturing environment. Establish safety, quality and financial operational standards to produce a positive impact on overall performance of the organization.

**Education** 1994 – 1998 Wentworth Institute of Technology Boston, MA  
**Bachelor of Science in Manufacturing Engineering Technology**

**Professional Experience** December 2017 – Present MGB US INC Franklin, MA  
**VP Of Operations**

- Manage US operations of a multinational organization.
- Increased sales in year one to 35%.
- Achieved AS9100:D Aerospace QMS certification in 9 months.
- Manage cash flow and projections for sustained probability.
- Manage HR responsibilities and hiring.
- Manage KPI's to world class standards of 98%.
- Manage quoting, sales, and direct customer relations for the US operations.

July 2016 – December 2017 Globe Composite Solutions Stoughton, MA  
**VP of Operations**

- Member of executive team that developed the five-year strategic plan and presented plan to the Investment Team.
- Created annual operating and capital expenditure budgets and managed performance to budget.
- Led the implementation of a quality improvement initiative to track and improve first pass yield from 50% to consistently ranging between 80% and 95%, across all operations.
- Led the implementation of visual management, including team boards and day-by-hour boards to drive improvements in throughput between 15% and 35%.
- Manage lean improvement efforts and cross functional teams that directly eliminate waste and improve safety, quality, delivery and cost.

May 2010 – July 2016 TE Connectivity Norwood, MA  
**Manufacturing Manager**

- Manage operations and personnel that support a global machining operation with 140 pieces of equipment and 120 associates.
- Led teams that focus on Safety, Quality, Delivery, and Cost.
- Manage lean improvement efforts to achieve Star 5 standards across functional teams that directly eliminate waste and improve the process throughout the facility.
- Review budgetary earning numbers and meet quarterly demands.
- Improved on time delivery by 25% by streamlining the production flow.
- Improved average cycle times by 10% by leading innovation teams.
- Led migration efforts that involved a transfer of 35 machines, at a rate of 4 machines a month.

January 2006 – April 2010 Cole Hersee Company

Boston, MA

### **Manufacturing Engineering and Facilities Manager**

- Manage a team of Manufacturing Engineers at the Boston and Mexico facility to continuously improve on time delivery, reduce manufacturing cost, improve quality, reduce waste, and develop new products.
- Transferred all of manufacturing operations at the Mexico facility.
- Transferred all Warehouse Distribution to Texas.
- Manage the Maintenance Department in applying a system that rebuilds and repairs equipment prior to breakdown. Improving the skills of the staff by training.
- Managing facility maintenance and managing contractors.
- Manage the Electro-Plating Department. Testing chemicals, training operators in Hazardous Waste, and improving the flow of material in order to reduce scrap, rework and improve lead-time.

April 2001 – January 2006

Cole Hersee Company

Boston, MA

### **Sr. Manufacturing Engineer**

- Trained production associates in Lean Manufacturing, 5S, Team Building, Documentation, SPC, Problem Solving, and IPC Solder training.
- Led cross functional new product development teams for manufacture.
- Trained office personnel in Lean Principals and 5S. Developed a “How To” manual for the Customer Service and Order Entry Departments.
- Improved setup throughput by 35% in the Screw Machine Department.
- Assist in managing maintenance personnel. Performed 5S events in the department. Setup a spare parts system for all equipment.
- Lead member in the safety committee. Perform safety walks throughout the plant with the insurance company
- Relocated the Distribution Department into the main building. Included complete building renovation. Managed temporary employees to assist in the move.
- Assisting the company in relocating to Mexico. Rebuilding manufacturing cells, tools, and equipment to ship to Mexico. Training Mexico employees in Lean and Continuous Improvement. Provide support to the Mexico facility daily. Frequent travel to Mexico to assist in transformations.

October 1998 – April 2001

Cole Hersee Company

Boston, MA

### **Manufacturing Engineer**

- Studied Lean Manufacturing principals, designed and built cells, led continuous improvement teams and Kaizen events.
- Transformed the Distribution Department to Lean Principals
- Attended Lean Thinking Seminars, Hazardous Waste Certifications, Ergonomic Principals, IPC Solder Certification and Fire Safety training.

## **Instructor Experience**

Sept. 1998 – 2019

Wentworth Institute of Technology

Boston, MA

### **Instructor of a Machine Tool Setup and Operation Course**

- Developed a 5 level machining manufacturing course.
- Instruct adult students in a fifteen-week course on setup and operation of CNC lathes and milling machines in a continuing education program, at the college level.
- Course covers: hands on machining operations, safety, blueprint reading, speeds, feeds, elements of quality control, and an introduction to computer numerical control machining.

January 2005–2019

Wentworth Institute of Technology

Boston, MA

**Instructor of a Manufacturing Processes Course**

- A fifteen week 4 credit college level course covers all aspects of Manufacturing Processes. Topics covered are machining, welding, casting, sheet metal, and computer numerical control machining.
- Instruct 20+ college students in both classroom lectures and hands on applications. Including exams, practical applications, homework, and counseling.



Commonwealth of Massachusetts  
Office of the State Treasurer  
Alcoholic Beverages Control Commission

**FARMER-WINERY LICENSE**

**M.G.L. c. 138, § 19B**

This Farmer-Winery License authorizes the following licensee to produce, rectify, blend, or fortify, keep and expose for sale and to sell wine containing not more than twenty-four percent alcohol by weight:

**LA CANTINA WINERY Company**

341 Union St A  
Franklin, MA 02038

Approved by the Alcoholic Beverages Control Commission on September 17, 2023

*Jean M. Lorigio*  
Jean Lorigio, Chairman

*Crystal Matthews*  
Crystal Matthews, Commissioner

*Deborah A. Baglio*  
Deborah Baglio, Commissioner

License Number: FW-LIC-000218  
Record Number: 2023-000008-FW-APP  
Capacity: 5K Gallons or Less

**THIS LICENSE WILL EXPIRE DECEMBER 31, 2023 UNLESS REVOKED OR CANCELLED DURING THIS PERIOD**  
THIS LICENSE SHALL BE DISPLAYED ON THE PREMISES IN A CONSPICUOUS PLACE WHERE IT CAN BE EASILY READ



Commonwealth of Massachusetts  
Alcoholic Beverages Control Commission  
239 Causeway Street, First Floor  
Boston, MA 02114

CORI REQUEST FORM

DEBORAH B. GOLDBERG  
TREASURER AND RECEIVER GENERAL

JEAN M. LORIZIO, ESQ.  
CHAIRMAN

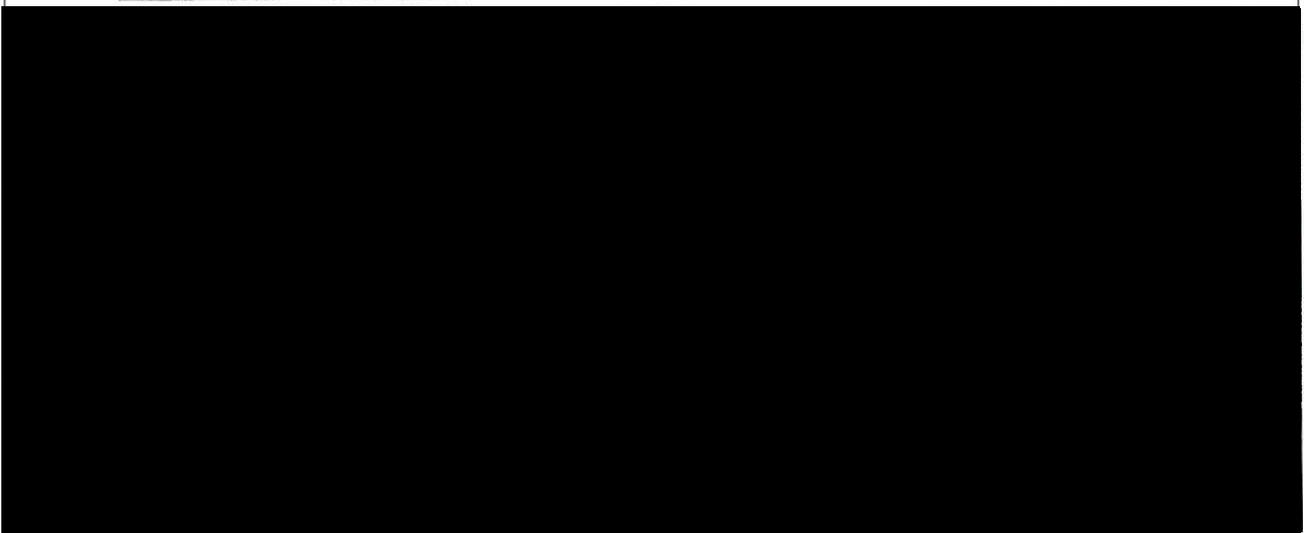
The Alcoholic Beverages Control Commission ("ABCC") has been certified by the Criminal History Systems Board to access conviction and pending Criminal Offender Record Information ("CORI"). For the purpose of approving each shareholder, owner, licensee or applicant for an alcoholic beverages license, I understand that a criminal record check will be conducted on me, pursuant to the above. The information below is correct to the best of my knowledge.

ABCC LICENSE INFORMATION

ABCC NUMBER: <small>(IF EXISTING LICENSE)</small>	LICENSEE NAME: La Cantina Winery Company	CITY/TOWN: Franklin
------------------------------------------------------	------------------------------------------	---------------------

APPLICANT INFORMATION

LAST NAME: Vozzella	FIRST NAME: Robert	MIDDLE NAME: A
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PRINT AND SIGN

PRINTED NAME: Robert A Vozzella	APPLICANT/EMPLOYEE SIGNATURE: <i>Robert A Vozzella</i>
---------------------------------	--------------------------------------------------------

NOTARY INFORMATION

On this 10<sup>th</sup> of August, 2023 before me, the undersigned notary public, personally appeared Robert A. Vozzella  
(name of document signer), proved to me through satisfactory evidence of identification, which were Valid Drivers License  
to be the person whose name is signed on the preceding or attached document, and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose.

**IVONNE L. BOULAY**  
Notary Public, Commonwealth of Massachusetts  
My Commission Expires August 29, 2026

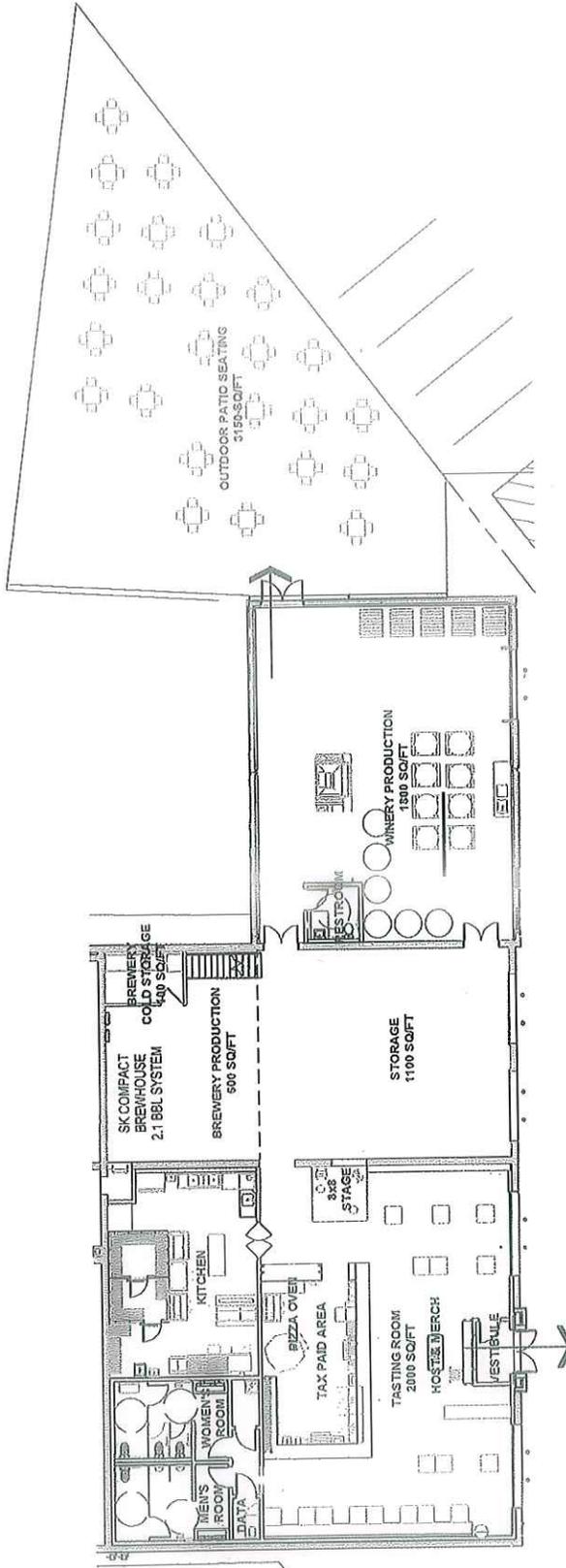
*Ivonne L. Boulay*  
NOTARY

DIVISION USE ONLY

REQUESTED BY: <small>SIGNATURE OF CORI AUTHORIZED EMPLOYEE</small>
-----------------------------------------------------------------------

The DCI Identity Theft Index PIN Number is to be completed by those applicants that have been issued an Identity Theft PIN Number by the DCI. Certified agencies are required to provide all applicants the opportunity to include this information to ensure the accuracy of the CORI request process. All CORI request forms that include this field are required to be submitted to the DCI via mail or by fax to (617) 650-4614.





# For Information

drawing scale 1/16" = 1'-0" 1/16" = 1'-0"

LA CANTINA WINERY EXPANSION

FLOOR PLAN

341 UNION STREET, FRANKLIN, MA 02038



La Cantina Winery Company  
357 Union Street, Franklin, MA 02038



CERTIFICATE OF COMPLIANCE WITH STATE LAWS

Pursuant to M.G.L Chapter 62C, Sec 49A, and M.G.L. Ch. 151A, Section 19A, the undersigned acting on behalf on the License Holder, certifies under the penalty of perjury that, to the best of the undersign's knowledge and belief, the License Holder is in compliance with all laws of the Commonwealth of Massachusetts relating to taxes, reporting of employees and contractors, and withholding and remitting child support\*.

*Robert Vozzella*

\*\* Signature of Individual or Corporate License Holder (Mandatory)

[REDACTED]

\*\*\* License Holder's Social Security Number/or Federal Identification Number

By: Robert Vozzella

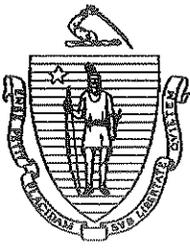
Date: 9/25/23

Corporate Officer  
(Mandatory, if applicable)

\*The provision in the Attestation of relating to child support applies only when the License Holder is an individual.

\*\*Approval of or a renewal of a license will not be granted unless this certification clause is signed by the applicant. For all corporations, a certified copy of the vote of the Board of Directors must be provided.

\*\*\* Your social security number will be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing or tax payment obligations. Providers who fail to correct their non-filing or delinquency will not have a license or other agreement issued, renewed or extended. This request is made under the authority of Massachusetts General Laws, Chapter 62C, section 49A.



The Commonwealth of Massachusetts  
 Department of Industrial Accidents  
 Office of Investigations  
 600 Washington Street  
 Boston, MA 02111  
 www.mass.gov/dia

Workers' Compensation Insurance Affidavit: General Businesses

Applicant Information

Please Print Legibly

Business/Organization Name: La Cantina Winery Company

Address: 341 Union St

City/State/Zip: Franklin MA 02038 Phone #: [REDACTED]

<p>Are you an employer? Check the appropriate box:</p> <p>1. <input checked="" type="checkbox"/> I am an employer with <u>10</u> employees (full and/or part-time).*</p> <p>2. <input type="checkbox"/> I am a sole proprietor or partnership and have no employees working for me in any capacity. [No workers' comp. insurance required]</p> <p>3. <input type="checkbox"/> We are a corporation and its officers have exercised their right of exemption per c. 152, §1(4), and we have no employees. [No workers' comp. insurance required]**</p> <p>4. <input type="checkbox"/> We are a non-profit organization, staffed by volunteers, with no employees. [No workers' comp. insurance req.]</p>	<p>Business Type (required):</p> <p>5. <input type="checkbox"/> Retail</p> <p>6. <input type="checkbox"/> Restaurant/Bar/Eating Establishment</p> <p>7. <input type="checkbox"/> Office and/or Sales (incl. real estate, auto, etc.)</p> <p>8. <input type="checkbox"/> Non-profit</p> <p>9. <input type="checkbox"/> Entertainment</p> <p>10. <input type="checkbox"/> Manufacturing</p> <p>11. <input type="checkbox"/> Health Care</p> <p>12. <input checked="" type="checkbox"/> Other <u>Winery</u></p>
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

\*Any applicant that checks box #1 must also fill out the section below showing their workers' compensation policy information.

\*\*If the corporate officers have exempted themselves, but the corporation has other employees, a workers' compensation policy is required and such an organization should check box #1.

*I am an employer that is providing workers' compensation insurance for my employees. Below is the policy information.*

Insurance Company Name: AM Trust North America

Insurer's Address: 800 Superior Avenue East, Lower Level

City/State/Zip: Cleveland, OH 44114

Policy # or Self-ins. Lic. # [REDACTED] Expiration Date: 4/19/24

**Attach a copy of the workers' compensation policy declaration page (showing the policy number and expiration date).**

Failure to secure coverage as required under Section 25A of MGL c. 152 can lead to the imposition of criminal penalties of a fine up to \$1,500.00 and/or one-year imprisonment, as well as civil penalties in the form of a STOP WORK ORDER and a fine of up to \$250.00 a day against the violator. Be advised that a copy of this statement may be forwarded to the Office of Investigations of the DIA for insurance coverage verification.

*I do hereby certify, under the pains and penalties of perjury that the information provided above is true and correct.*

Signature: Ralph [Signature] Date: 9/25/23

Phone #: [REDACTED]

*Official use only. Do not write in this area, to be completed by city or town official.*

City or Town: \_\_\_\_\_ Permit/License # \_\_\_\_\_

Issuing Authority (circle one):

1. Board of Health 2. Building Department 3. City/Town Clerk 4. Licensing Board 5. Selectmen's Office

6. Other \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone #: \_\_\_\_\_

La Cantina Winery Menu – In development stage

- Various salads with chicken, beef, seafood
- Meat and cheese boards
- Pizza with various toppings



**Town of Franklin, MA**  
Nancy Danello, CMC  
Town Clerk  
355 East Central Street, Franklin, MA 02038

Date Issued: September  
26, 2023  
Record #: 126660  
Certificate #: 23-152

## BUSINESS VERIFICATION CERTIFICATE

In conformity with the provisions of Chapter 110, Section 5 of the General Laws, as amended, the undersigned hereby declare(s) that a business under the title of:

La Cantina Winery is conducted at: 341 UNION ST

by the following person:

**FULL NAME**

Robert Vozzella

**RESIDENCE**

355 Union St, Franklin, MA 02038

A certificate issued in accordance with this section shall be in force and effect for four years from the date of issue and shall be renewed each four years thereafter so long as such business shall be conducted and shall lapse and be void unless so renewed.

**Expiration Date:** September 26, 2027

Business Owner Signature #1

Business Owner Signature #2

A True Attest Copy

Nancy Danello, CMC

Town Clerk

To learn more, scan this barcode or visit [franklinma.viewpointcloud.com/#/records/160757](https://franklinma.viewpointcloud.com/#/records/160757)



## **NOTICE OF PUBLIC HEARING FRANKLIN, MA**

---

### **New Section 19B(n) Farmer-Winery Pouring Permit La Cantina Winery Company**

The Franklin Town Council will hold a Public Hearing on an application by La Cantina Winery Company, located at 341 Union Street, Franklin, MA for a new Section 19B(n) Farmer-Winery Pouring Permit. This hearing will take place during the Town Council's public meeting on Wednesday, October 18th, 2023, beginning at 7:00 PM and will provide an open forum for discussion. Location: Municipal Building, 2nd floor Council Chambers, 355 E. Central St., Franklin and will also be available via the "ZOOM" platform. Residents can visit the Town website ([Franklinma.gov](http://Franklinma.gov)) calendar on and after October 13, 2023 for updated meeting information. For questions, please call the Town Administrator's Office at (508) 520-4949.



# 341 UNION ST - 300' ABUTTERS & 500' REVIEW

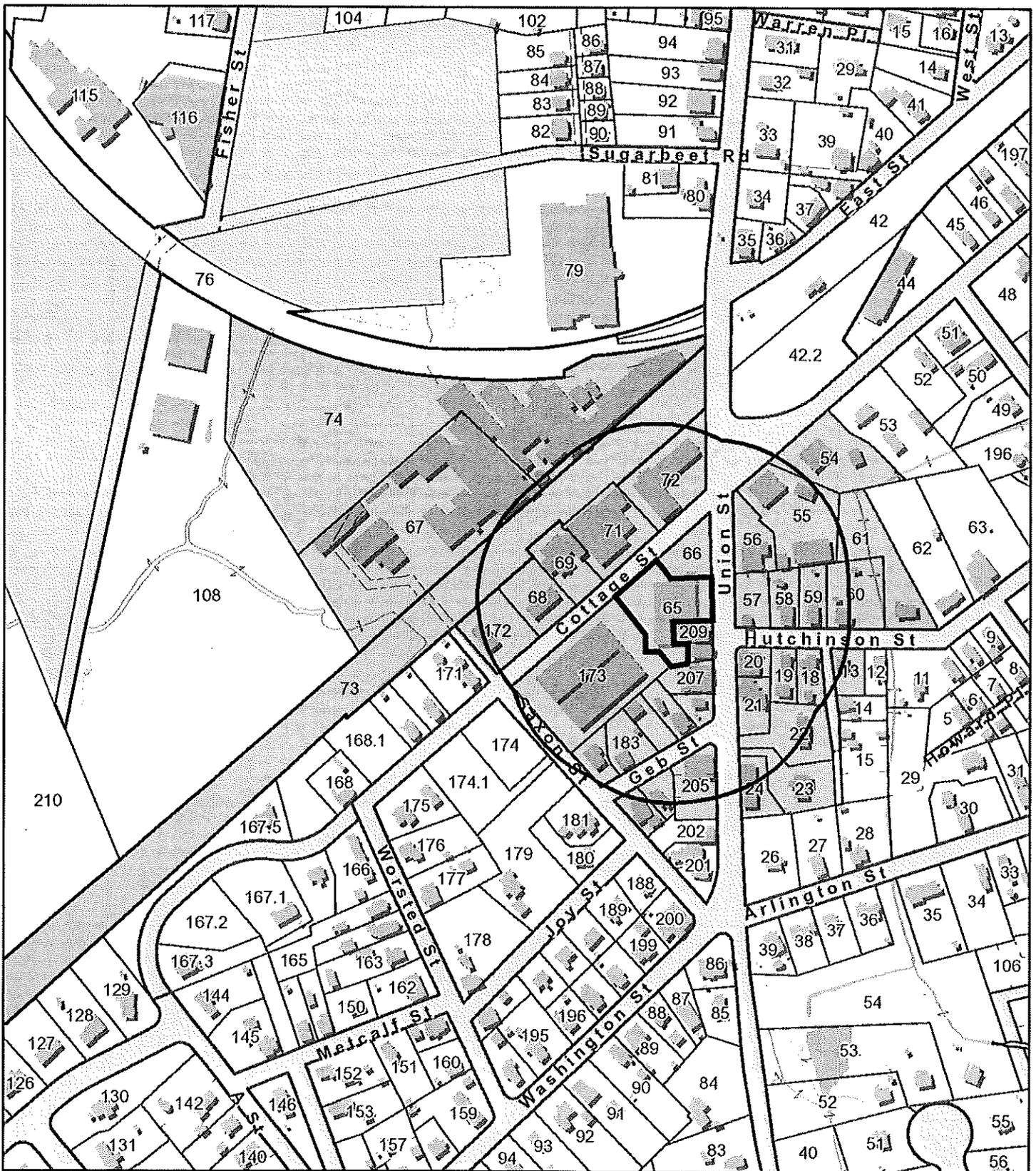
Franklin, MA



September 27, 2023

1 inch = 300 Feet

www.cai-tech.com



This information is believed to be correct but is subject to change and is not warranted.



# 300 foot Abutters List Report

Franklin, MA  
September 27, 2023

## Subject Property:

Parcel Number: 287-065-000  
CAMA Number: 287-065-000-000  
Property Address: 341 UNION ST

Mailing Address: 341 CANTINA REAL ESTATE LLC  
355 UNION STREET  
FRANKLIN, MA 02038

---

## Abutters:

Parcel Number: 287-054-000  
CAMA Number: 287-054-000-000  
Property Address: 178 COTTAGE ST

Mailing Address: STANISCIA MARK S, TR OLIVE RLTY TRUST  
178 COTTAGE ST  
FRANKLIN, MA 02038

Parcel Number: 287-055-000  
CAMA Number: 287-055-000-000  
Property Address: 326 UNION ST

Mailing Address: KOTSIPOULOS CHARLES  
KOTSIPOULOS ANGELA  
35 COREY ST  
EVERETT, MA 02149

Parcel Number: 287-056-000  
CAMA Number: 287-056-000-000  
Property Address: 338 UNION ST

Mailing Address: 338 UNION ST LLC  
12 HEMLOCK LN  
FRANKLIN, MA 02038

Parcel Number: 287-057-000  
CAMA Number: 287-057-000-000  
Property Address: 346 UNION ST

Mailing Address: DEBENEDICTIS ROBERT L  
22 JORDAN RD  
FRANKLIN, MA 02038

Parcel Number: 287-058-000  
CAMA Number: 287-058-000-000  
Property Address: 65 HUTCHINSON ST

Mailing Address: COSTELLO ROBERT COSTELLO  
PAMELA  
65 HUTCHINSON ST  
FRANKLIN, MA 02038

Parcel Number: 287-059-000  
CAMA Number: 287-059-000-000  
Property Address: 61 HUTCHINSON ST

Mailing Address: TALAMINI VALEDA F  
61 HUTCHINSON ST  
FRANKLIN, MA 02038

Parcel Number: 287-060-000  
CAMA Number: 287-060-000-000  
Property Address: 57 HUTCHINSON ST

Mailing Address: GIANETTI RONALD J & RITA M TRS 57  
HUTCHINSON ST REALTY TRUST  
557 UNION ST  
FRANKLIN, MA 02038

Parcel Number: 287-061-000  
CAMA Number: 287-061-000-000  
Property Address: 49 HUTCHINSON ST

Mailing Address: KENNEDY PETER SCOTT KENNEDY  
BETH ANN  
49 HUTCHINSON ST  
FRANKLIN, MA 02038

Parcel Number: 287-065-000  
CAMA Number: 287-065-000-000  
Property Address: 341 UNION ST

Mailing Address: 341 CANTINA REAL ESTATE LLC  
355 UNION STREET  
FRANKLIN, MA 02038

Parcel Number: 287-066-000  
CAMA Number: 287-066-000-000  
Property Address: 327 UNION ST

Mailing Address: BORRELLI ANTHONY M  
6 STRATFORD LN  
FRANKLIN, MA 02038



www.cai-tech.com

This information is believed to be correct but is subject to change and is not warranted.



# 300 foot Abutters List Report

Franklin, MA  
September 27, 2023

Parcel Number: 287-067-000  
CAMA Number: 287-067-000-000  
Property Address: 259 COTTAGE ST

Mailing Address: FRANKLIN PAINT CO  
259 COTTAGE ST  
FRANKLIN, MA 02038

Parcel Number: 287-068-000  
CAMA Number: 287-068-000-000  
Property Address: 241 COTTAGE ST

Mailing Address: 241 AND 245 COTTAGE STREET LLC  
572 EAST STREET  
WEYMOUTH, MA 02189

Parcel Number: 287-069-000  
CAMA Number: 287-069-000-000  
Property Address: 235 COTTAGE ST

Mailing Address: MAGS REALTY TRUST C/O BARRY  
MAGERMAN, TR  
235 COTTAGE ST  
FRANKLIN, MA 02038

Parcel Number: 287-071-000  
CAMA Number: 287-071-000-000  
Property Address: 231 COTTAGE ST

Mailing Address: FSM REALTY LLC  
8 VILLAGE ROAD  
LAKEVILLE, MA 02347

Parcel Number: 287-072-000  
CAMA Number: 287-072-000-000  
Property Address: 317 UNION ST

Mailing Address: 317 UNION STREET LLC  
455 BEDFORD ST  
BRIDGEWATER, MA 02324

Parcel Number: 287-073-000  
CAMA Number: 287-073-000-000  
Property Address: UNION ST

Mailing Address: NEW YORK CENTRAL LINES LLC C/O  
CSX TRANSPORTATION TAX  
DEPARTMENT  
500 WATER ST (C 910)  
JACKSONVILLE, FL 32202

Parcel Number: 287-074-000  
CAMA Number: 287-074-000-000  
Property Address: 305 UNION ST

Mailing Address: MURRAY LEO J COMPANY  
305 UNION ST  
FRANKLIN, MA 02038

Parcel Number: 296-013-000  
CAMA Number: 296-013-000-000  
Property Address: 58 HUTCHINSON ST

Mailing Address: PISANI EDMUND  
58 HUTCHINSON ST  
FRANKLIN, MA 02038

Parcel Number: 296-018-000  
CAMA Number: 296-018-000-000  
Property Address: 62 HUTCHINSON ST

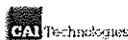
Mailing Address: MOLLA FRANCIS A MOLLA PAULA A  
62 HUTCHINSON ST  
FRANKLIN, MA 02038

Parcel Number: 296-019-000  
CAMA Number: 296-019-000-000  
Property Address: 66 HUTCHINSON ST

Mailing Address: CARLUCCI ALBINO G & ELIZABETH F L/E  
CARLUCCI FAMILY REALTY TRUST  
CARLUCCI, NICHOLAS A  
358 UNION ST  
FRANKLIN, MA 02038

Parcel Number: 296-020-000  
CAMA Number: 296-020-000-000  
Property Address: 354 UNION ST

Mailing Address: VECCHIO ALAN VECCHIO MARY K  
7620 NW 87TH WAY  
TAMARAC, FL 33321



www.cai-tech.com

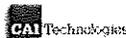
This information is believed to be correct but is subject to change and is not warranted.



# 300 foot Abutters List Report

Franklin, MA  
September 27, 2023

Parcel Number: 296-021-000 CAMA Number: 296-021-000-000 Property Address: 358 UNION ST	Mailing Address: CARLUCCI ELIZABETH F &ALBINO G L/E CARLUCCI FAM REALTY TRUST CARLUCCI, ANTHONY 358 UNION ST FRANKLIN, MA 02038
Parcel Number: 296-022-000 CAMA Number: 296-022-000-000 Property Address: 362 UNION ST	Mailing Address: QUIJADA MEDARDO FLAMENCO GISELA 362 UNION ST FRANKLIN, MA 02038
Parcel Number: 296-023-000 CAMA Number: 296-023-000-000 Property Address: 366-368 UNION ST	Mailing Address: POND PLACE CONDOMINIUMS C/O NOONAN PAUL S 366 UNION ST FRANKLIN, MA 02038
Parcel Number: 296-023-000 CAMA Number: 296-023-000-001 Property Address: 366 UNION ST	Mailing Address: NOONAN PAUL S NOONAN MICHELLE L 366 UNION ST FRANKLIN, MA 02038
Parcel Number: 296-023-000 CAMA Number: 296-023-000-002 Property Address: 368 UNION ST	Mailing Address: COLLINS JOSEPH COLLINS JULIA 368 UNION ST UT B FRANKLIN, MA 02038
Parcel Number: 296-024-000 CAMA Number: 296-024-000-000 Property Address: 374-378 UNION ST	Mailing Address: 374 UNION LLC 23 NEWELL DR FRANKLIN, MA 02038
Parcel Number: 296-172-000 CAMA Number: 296-172-000-000 Property Address: 245 COTTAGE ST	Mailing Address: 241 AND 245 COTTAGE STREET LLC 572 EAST STREET WEYMOUTH, MA 02189
Parcel Number: 296-173-000 CAMA Number: 296-173-000-000 Property Address: 238-258 COTTAGE ST	Mailing Address: RJF PROPERTY HOLDINGS LLC 140 MAPLE ST FRANKLIN, MA 02038
Parcel Number: 296-182-000 CAMA Number: 296-182-000-000 Property Address: 30 SAXON ST	Mailing Address: MAINALI HARI RAJ UPRETI SHARMILA 30 SAXON ST FRANKLIN, MA 02038
Parcel Number: 296-183-000 CAMA Number: 296-183-000-000 Property Address: 19 GEB ST	Mailing Address: O'BRIEN ALISSA M 19 GEB ST FRANKLIN, MA 02038
Parcel Number: 296-184-000 CAMA Number: 296-184-000-000 Property Address: 11 GEB ST	Mailing Address: JONES TIMOTHY PO BOX 934 WRENTHAM, MA 02093
Parcel Number: 296-185-000 CAMA Number: 296-185-000-000 Property Address: 5 GEB ST	Mailing Address: DAVIES REALTY LLC 7 GAINESBORO DR BUZZARDS BAY, MA 02532



www.cai-tech.com

This information is believed to be correct but is subject to change and is not warranted.

9/27/2023

Page 3 of 4



# 300 foot Abutters List Report

Franklin, MA  
September 27, 2023

Parcel Number: 296-186-000  
CAMA Number: 296-186-000-000  
Property Address: 18 GEB ST

Mailing Address: GARRIGAN LAURA  
18 GEB ST  
FRANKLIN, MA 02038

Parcel Number: 296-187-000  
CAMA Number: 296-187-000-000  
Property Address: 22 GEB ST

Mailing Address: SACCO NORMA P SACCO JULIA A  
22 GEB ST  
FRANKLIN, MA 02038

Parcel Number: 296-205-000  
CAMA Number: 296-205-000-000  
Property Address: 371 UNION ST

Mailing Address: RUELAS JESUS GUTIERREZ YADIRA  
80 ELLERY ST  
WRENTHAM, MA 02093

Parcel Number: 296-206-000  
CAMA Number: 296-206-000-000  
Property Address: 357 UNION ST

Mailing Address: CARLUCCI GINO JR, MARY ANN HAGAN,  
CARLUCCI FAMILY REVOCABLE  
AMENDOLA, KATHLEEN TRS  
1 TONI LN  
FRANKLIN, MA 02038

Parcel Number: 296-207-000  
CAMA Number: 296-207-000-000  
Property Address: 355 UNION ST

Mailing Address: VOZZELLA ROBERT A  
355 UNION ST  
FRANKLIN, MA 02038

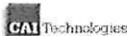
Parcel Number: 296-208-000  
CAMA Number: 296-208-000-000  
Property Address: 353 UNION ST

Mailing Address: WEST WILLIAM S TR UNION STREET  
REALTY TRUST  
353 UNION ST #2  
FRANKLIN, MA 02038

Parcel Number: 296-209-000  
CAMA Number: 296-209-000-000  
Property Address: 349 UNION ST

Mailing Address: SOLDANI LOUIS M III  
PO BOX 72  
MANSFIELD, MA 02048

*Kevin W. Doyle, 9-27-2023  
I reviewed abutters beyond 300'  
and up to 500' and determined  
there were no additional schools,  
churches, etc. K.W.D.*



www.cai-tech.com

This information is believed to be correct but is subject to change and is not warranted.

9/27/2023

Page 4 of 4

## **NOTICE OF PUBLIC HEARING FRANKLIN, MA**

---

### **New Section 19C(n) Farmer-Brewery Pouring Permit La Cantina Winery Company**

The Franklin Town Council will hold a Public Hearing on an application by La Cantina Winery Company, located at 341 Union Street, Franklin, MA for a new Section 19C(n) Farmer-Brewery Pouring Permit. This hearing will take place during the Town Council's public meeting on Wednesday, October 18th, 2023, beginning at 7:00 PM and will provide an open forum for discussion. Location: Municipal Building, 2nd floor Council Chambers, 355 E. Central St., Franklin and will also be available via the "ZOOM" platform. Residents can visit the Town website ([Franklinma.gov](http://Franklinma.gov)) calendar on and after October 13, 2023 for updated meeting information. For questions, please call the Town Administrator's Office at (508) 520-4949.



The Commonwealth of Massachusetts  
 Alcoholic Beverages Control Commission  
 95 Fourth Street, Suite 3, Chelsea, MA 02150-2358  
 www.mass.gov/abcc

RETAIL ALCOHOLIC BEVERAGES LICENSE APPLICATION  
 MONETARY TRANSMITTAL FORM

APPLICATION FOR A NEW LICENSE

APPLICATION SHOULD BE COMPLETED ON-LINE, PRINTED, SIGNED, AND SUBMITTED TO THE LOCAL LICENSING AUTHORITY.

ECRT CODE: RETA

Please make \$200.00 payment here: [ABCC PAYMENT WEBSITE](#)

PAYMENT MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP, OR INDIVIDUAL AND INCLUDE THE PAYMENT RECEIPT

ABCC LICENSE NUMBER (IF AN EXISTING LICENSEE, CAN BE OBTAINED FROM THE CITY)

ENTITY/ LICENSEE NAME

ADDRESS

CITY/TOWN  STATE  ZIP CODE

For the following transactions (Check all that apply):

- |                                                                        |                                                                                                   |                                                                           |                                                                       |
|------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------------------|
| <input checked="" type="checkbox"/> New License                        | <input type="checkbox"/> Change of Location                                                       | <input type="checkbox"/> Change of Class (i.e. Annual / Seasonal)         | <input type="checkbox"/> Change Corporate Structure (i.e. Corp / LLC) |
| <input type="checkbox"/> Transfer of License                           | <input type="checkbox"/> Alteration of Licensed Premises                                          | <input type="checkbox"/> Change of License Type (i.e. club / restaurant)  | <input type="checkbox"/> Pledge of Collateral (i.e. License/Stock)    |
| <input type="checkbox"/> Change of Manager                             | <input type="checkbox"/> Change Corporate Name                                                    | <input type="checkbox"/> Change of Category (i.e. All Alcohol/Wine, Malt) | <input type="checkbox"/> Management/Operating Agreement               |
| <input type="checkbox"/> Change of Officers/<br>Directors/LLC Managers | <input type="checkbox"/> Change of Ownership Interest<br>(LLC Members/ LLP Partners,<br>Trustees) | <input type="checkbox"/> Issuance/Transfer of Stock/New Stockholder       | <input type="checkbox"/> Change of Hours                              |
|                                                                        |                                                                                                   | <input type="checkbox"/> Other <input type="text"/>                       | <input type="checkbox"/> Change of DBA                                |

THE LOCAL LICENSING AUTHORITY MUST SUBMIT THIS APPLICATION ONCE APPROVED VIA THE ePLACE PORTAL:

Alcoholic Beverages Control Commission  
 95 Fourth Street, Suite 3  
 Chelsea, MA 02150-2358

# Payment Confirmation

**YOUR PAYMENT HAS PROCESSED AND THIS IS YOUR RECEIPT**

Your account has been billed for the following transaction. You will receive a receipt via email.



**Transaction Processed Successfully.**

**INVOICE #: 4bd683c8-8235-45a6-8a1c-65255aa6b5e4**

Description	Applicant, License or Registration Number	Amount
FILING FEES-RETAIL	La Cantina Winery FB-LIC-000363 Pouring Permit	\$200.00
		<b>\$200.00</b>

Total Convenience Fee: **\$0.35**

Total Amount Paid: **\$200.35**

Date Paid: **9/22/2023 11:36:36 AM EDT**

### Payment On Behalf Of

**License Number or Business Name:**

La Cantina Winery FB-LIC-000363 Pouring Permit

**Fee Type:**

FILING FEES-RETAIL

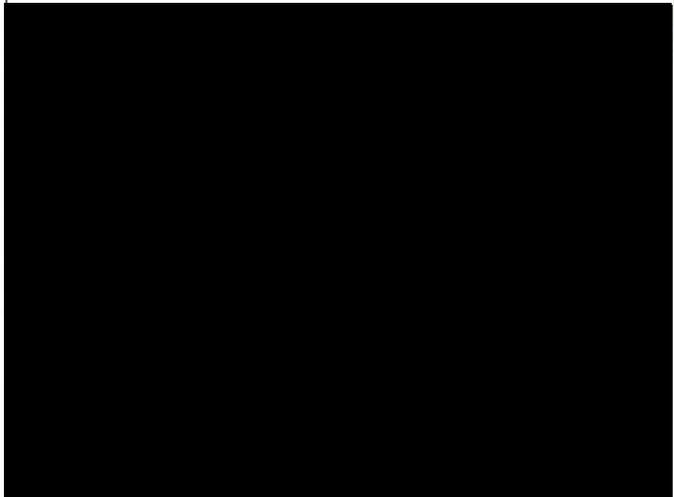
### Billing Information

**First Name:**

Robert

**Last Name:**

Vozzella





The Commonwealth of Massachusetts  
 Alcoholic Beverages Control Commission  
 95 Fourth Street, Suite 3, Chelsea, MA 02150-2358  
 www.mass.gov/abcc

APPLICATION FOR A NEW LICENSE

Municipality

**1. LICENSE CLASSIFICATION INFORMATION**

ON/OFF-PREMISES	TYPE	CATEGORY	CLASS
On-Premises-12	Farmer Series Pouring Permit	Malt	Annual

Please provide a narrative overview of the transaction(s) being applied for. On-premises applicants should also provide a description of the intended theme or concept of the business operation. Attach additional pages, if necessary.

This application for a Farmer Series Pouring Permit for Wine 19C. La Cantina Winery holds a Farmer series license FB-LIC-00363. La Cantina Winery will offer malt beverages produced and bottled on site by the glass.

Is this license application pursuant to special legislation?  Yes  No Chapter  Acts of

**2. BUSINESS ENTITY INFORMATION**

The entity that will be issued the license and have operational control of the premises.

Entity Name	La Cantina Winery Company	FEIN	<input type="text"/>
DBA	<input type="text"/>	Manager of Record	Robert Vozzella
Street Address	341 Union St Franklin MA 02038		
Phone	<input type="text"/>	Email	<input type="text"/>
Alternative Phone	<input type="text"/>	Website	www.lacantinawinery.com

**3. DESCRIPTION OF PREMISES**

Please provide a complete description of the premises to be licensed, including the number of floors, number of rooms on each floor, any outdoor areas to be included in the licensed area, and total square footage. You must also submit a floor plan.

The building located at 341 Union St in Franklin MA is a 1 story building of block construction. The location is identified as B for the Brewery Farmer Series Permit. This locations consist of 3 main interior rooms; Tasting Room, Storage/Brewery Production, and Winery Production totaling 7500 SQ/FT. The space also has an outdoor patio that is only accessed from the main entrance of the building and is fenced in. The tasting room and patio space will be 50% dedicated for the malt pouring

Total Square Footage:	7500	Number of Entrances:	2	Seating Capacity:	180
Number of Floors	1	Number of Exits:	2	Occupancy Number:	180

**4. APPLICATION CONTACT**

The application contact is the person whom the licensing authorities should contact regarding this application.

Name:	Robert Vozzella	Phone:	<input type="text"/>
Title:	Owner	Email:	<input type="text"/>

## APPLICATION FOR A NEW LICENSE

### 5. CORPORATE STRUCTURE

Entity Legal Structure	<input type="text" value="Corporation"/>	Date of Incorporation	<input type="text" value="2017"/>
State of Incorporation	<input type="text" value="Massachusetts"/>	Is the Corporation publicly traded? <input type="radio"/> Yes <input checked="" type="radio"/> No	

### 6. PROPOSED OFFICERS, STOCK OR OWNERSHIP INTEREST

List all individuals or entities that will have a direct or indirect, beneficial or financial interest in this license (E.g. Stockholders, Officers, Directors, LLC Managers, LLP Partners, Trustees etc.). Attach additional page(s) provided, if necessary, utilizing Addendum A.

- The individuals and titles listed in this section must be identical to those filed with the Massachusetts Secretary of State.
- The individuals identified in this section, as well as the proposed Manager of Record, must complete a CORI Release Form.
- Please note the following statutory requirements for Directors and LLC Managers:
  - On Premises (E.g. Restaurant/ Club/Hotel) Directors or LLC Managers** - At least 50% must be US citizens;
  - Off Premises (Liquor Store) Directors or LLC Managers** - All must be US citizens and a majority must be Massachusetts residents.
- If you are a Multi-Tiered Organization, please attach a flow chart identifying each corporate interest and the individual owners of each entity as well as the Articles of Organization for each corporate entity. Every individual must be identified in Addendum A.

Name of Principal	Residential Address	SSN	DOB
<input type="text" value="Robert Vozzella"/>	<input type="text" value="[REDACTED]"/>	<input type="text" value="[REDACTED]"/>	<input type="text" value="[REDACTED]"/>
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
<input type="text" value="President, Treasurer, Director"/>	<input type="text" value="50"/>	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
			MA Resident
			<input checked="" type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<input type="text" value="Ana Vozzella"/>	<input type="text" value="[REDACTED]"/>	<input type="text" value="[REDACTED]"/>	<input type="text" value="[REDACTED]"/>
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
<input type="text" value="Sceretary, Director"/>	<input type="text" value="50"/>	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
			MA Resident
			<input checked="" type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
<input type="text"/>	<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
			MA Resident
			<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
<input type="text"/>	<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
			MA Resident
			<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
<input type="text"/>	<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
			MA Resident
			<input type="radio"/> Yes <input type="radio"/> No

Additional pages attached?  Yes  No

#### CRIMINAL HISTORY

Has any individual listed in question 6, and applicable attachments, ever been convicted of a State, Federal or Military Crime? If yes, attach an affidavit providing the details of any and all convictions.

Yes  No

# APPLICATION FOR A NEW LICENSE

## 6A. INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Does any individual or entity identified in question 6, and applicable attachments, have any direct or indirect, beneficial or financial interest in any other license to sell alcoholic beverages? Yes  No  If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality
La Cantina Winery Co	Farmer Winery	FW-LIC-000218	

## 6B. PREVIOUSLY HELD INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Has any individual or entity identified in question 6, and applicable attachments, ever held a direct or indirect, beneficial or financial interest in a license to sell alcoholic beverages, which is not presently held? Yes  No  If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality

## 6C. DISCLOSURE OF LICENSE DISCIPLINARY ACTION

Have any of the disclosed licenses listed in question 6A or 6B ever been suspended, revoked or cancelled? Yes  No  If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Date of Action	Name of License	City	Reason for suspension, revocation or cancellation

## 7. OCCUPANCY OF PREMISES

Please complete all fields in this section. Please provide proof of legal occupancy of the premises.

- If the applicant entity owns the premises, a deed is required.
- If leasing or renting the premises, a signed copy of the lease is required.
- If the lease is contingent on the approval of this license, and a signed lease is not available, a copy of the unsigned lease and a letter of intent to lease, signed by the applicant and the landlord, is required.
- If the real estate and business are owned by the same individuals listed in question 6, either individually or through separate business entities, a signed copy of a lease between the two entities is required.

Please indicate by what means the applicant will occupy the premises

Own

Landlord Name

[REDACTED]

Landlord Phone

Landlord Email

[REDACTED]

Landlord Address

[REDACTED]

Lease Beginning Date

08/19/22

Rent per Month

[REDACTED]

Lease Ending Date

08/18/32

Rent per Year

[REDACTED]

Will the Landlord receive revenue based on percentage of alcohol sales?

Yes  No

# 10. MANAGER APPLICATION

## A. MANAGER INFORMATION

The individual that has been appointed to manage and control the licensed business and premises.

Proposed Manager Name  Date of Birth  SSN

Residential Address

Email  Phone

Please indicate how many hours per week you intend to be on the licensed premises

## B. CITIZENSHIP/BACKGROUND INFORMATION

Are you a U.S. Citizen?\*  Yes  No \*Manager must be a U.S. Citizen  
 If yes, attach one of the following as proof of citizenship US Passport, Voter's Certificate, Birth Certificate or Naturalization Papers.

Have you ever been convicted of a state, federal, or military crime?  Yes  No  
 If yes, fill out the table below and attach an affidavit providing the details of any and all convictions. Attach additional pages, if necessary, utilizing the format below.

Date	Municipality	Charge	Disposition

## C. EMPLOYMENT INFORMATION

Please provide your employment history. Attach additional pages, if necessary, utilizing the format below.

Start Date	End Date	Position	Employer	Supervisor Name
1999	2019	Professor	Wentworth Institute of Technology	
2010	2016	Manager	TE Connectivity	Ray Frigault
2016	2018	Manager	Globe Composite Solutions	Michael Dyson
2018	Present	Manager	MGB US INC	Yves Roda

## D. PRIOR DISCIPLINARY ACTION

Have you held a beneficial or financial interest in, or been the manager of, a license to sell alcoholic beverages that was subject to disciplinary action?  Yes  No If yes, please fill out the table. Attach additional pages, if necessary,utilizing the format below.

Date of Action	Name of License	State	City	Reason for suspension, revocation or cancellation

I hereby swear under the pains and penalties of perjury that the information I have provided in this application is true and accurate:  
 Manager's Signature  Date

APPLICANT'S STATEMENT

I, Robert Vozzella the:  sole proprietor;  partner;  corporate principal;  LLC/LLP manager  
Authorized Signatory

of La Cantina Winery Company  
Name of the Entity/Corporation

hereby submit this application (hereinafter the "Application"), to the local licensing authority (the "LLA") and the Alcoholic Beverages Control Commission (the "ABCC" and together with the LLA collectively the "Licensing Authorities") for approval.

I do hereby declare under the pains and penalties of perjury that I have personal knowledge of the information submitted in the Application, and as such affirm that all statements and representations therein are true to the best of my knowledge and belief. I further submit the following to be true and accurate:

- (1) I understand that each representation in this Application is material to the Licensing Authorities' decision on the Application and that the Licensing Authorities will rely on each and every answer in the Application and accompanying documents in reaching its decision;
- (2) I state that the location and description of the proposed licensed premises are in compliance with state and local laws and regulations;
- (3) I understand that while the Application is pending, I must notify the Licensing Authorities of any change in the information submitted therein. I understand that failure to give such notice to the Licensing Authorities may result in disapproval of the Application;
- (4) I understand that upon approval of the Application, I must notify the Licensing Authorities of any change in the ownership as approved by the Licensing Authorities. I understand that failure to give such notice to the Licensing Authorities may result in sanctions including revocation of any license for which this Application is submitted;
- (5) I understand that the licensee will be bound by the statements and representations made in the Application, including, but not limited to the identity of persons with an ownership or financial interest in the license;
- (6) I understand that all statements and representations made become conditions of the license;
- (7) I understand that any physical alterations to or changes to the size of the area used for the sale, delivery, storage, or consumption of alcoholic beverages, must be reported to the Licensing Authorities and may require the prior approval of the Licensing Authorities;
- (8) I understand that the licensee's failure to operate the licensed premises in accordance with the statements and representations made in the Application may result in sanctions, including the revocation of any license for which the Application was submitted; and
- (9) I understand that any false statement or misrepresentation will constitute cause for disapproval of the Application or sanctions including revocation of any license for which this Application is submitted.
- (10) I confirm that the applicant corporation and each individual listed in the ownership section of the application is in good standing with the Massachusetts Department of Revenue and has complied with all laws of the Commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting of child support.

Signature: Robert Vozzella

Date: 9/22/23

Title: Owner



Commonwealth of Massachusetts  
Office of the State Treasurer  
Alcoholic Beverages Control Commission

**FARMER-BREWERY LICENSE**

**M.G.L. c. 138, § 19C**

This Farmer-Brewery License authorizes the following licensee to manufacture and brew, keep and expose for sale and to sell in kegs, casks, barrels, bottles or other containers malt containing not more than twelve percent alcohol by weight:

**LA CANTINA WINERY Company**

341 Union St B  
Franklin, MA 02038

Approved by the Alcoholic Beverages Control Commission on September 20, 2023

*Jean M. Lorzio*  
Jean Lorzio, Chairman

*Crystal Matthews*  
Crystal Matthews, Commissioner

*Deborah A. Baglio*  
Deborah Baglio, Commissioner

License Number: **FB-LIC-000363**  
Record Number: **2023-000016-FB-APP**  
Capacity: **5K Barrels or Less**

**THIS LICENSE WILL EXPIRE DECEMBER 31, 2023 UNLESS REVOKED OR CANCELLED DURING THIS PERIOD**

THIS LICENSE MUST BE DISPLAYED ON THE PREMISES IN A CONSPICUOUS PLACE WHERE IT CAN BE EASILY READ

## **NOTICE OF PUBLIC HEARING FRANKLIN, MA**

---

### **New Section 19C(n) Farmer-Brewery Pouring Permit La Cantina Winery Company**

The Franklin Town Council will hold a Public Hearing on an application by La Cantina Winery Company, located at 341 Union Street, Franklin, MA for a new Section 19C(n) Farmer-Brewery Pouring Permit. This hearing will take place during the Town Council's public meeting on Wednesday, October 18th, 2023, beginning at 7:00 PM and will provide an open forum for discussion. Location: Municipal Building, 2nd floor Council Chambers, 355 E. Central St., Franklin and will also be available via the "ZOOM" platform. Residents can visit the Town website ([Franklinma.gov](http://Franklinma.gov)) calendar on and after October 13, 2023 for updated meeting information. For questions, please call the Town Administrator's Office at (508) 520-4949.

## **NOTICE OF PUBLIC HEARING FRANKLIN, MA**

---

### **Alteration of Premises to combine Section 19B(n) Farmer-Winery Pouring Permit and Section 19C(n) Farmer-Brewery Pouring Permit to create a Section 19H Farmer-Winery / Farmer-Brewery Pouring Permit La Cantina Winery Company**

The Franklin Town Council will hold a Public Hearing on an application by La Cantina Winery Company, located at 341 Union Street, Franklin, MA for an alteration of premises to combine their Section 19B(n) Farmer-Winery Pouring Permit and Section 19C(n) Farmer-Brewery Pouring Permit to create a Section 19H Farmer-Winery / Farmer-Brewery Pouring Permit. This hearing will take place during the Town Council's public meeting on Wednesday, October 18th, 2023, beginning at 7:00 PM and will provide an open forum for discussion. Location: Municipal Building, 2nd floor Council Chambers, 355 E. Central St., Franklin and will also be available via the "ZOOM" platform. Residents can visit the Town website ([Franklinma.gov](http://Franklinma.gov)) calendar on and after October 13, 2023 for updated meeting information. For questions, please call the Town Administrator's Office at (508) 520-4949.



The Commonwealth of Massachusetts  
 Alcoholic Beverages Control Commission  
 95 Fourth Street, Suite 3, Chelsea, MA 02150-2358  
 www.mass.gov/abcc

RETAIL ALCOHOLIC BEVERAGES LICENSE APPLICATION  
 MONETARY TRANSMITTAL FORM

APPLICATION FOR A NEW LICENSE

APPLICATION SHOULD BE COMPLETED ON-LINE, PRINTED, SIGNED, AND SUBMITTED TO THE LOCAL LICENSING AUTHORITY.

ECRT CODE: RETA

Please make \$200.00 payment here: [ABCC PAYMENT WEBSITE](#)

PAYMENT MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP, OR INDIVIDUAL AND INCLUDE THE PAYMENT RECEIPT

ABCC LICENSE NUMBER (IF AN EXISTING LICENSEE, CAN BE OBTAINED FROM THE CITY)

ENTITY/ LICENSEE NAME

ADDRESS

CITY/TOWN

STATE

ZIP CODE

For the following transactions (Check all that apply):

- New License
- Change of Location
- Change of Class (i.e. Annual / Seasonal)
- Change Corporate Structure (i.e. Corp / LLC)
- Transfer of License
- Alteration of Licensed Premises
- Change of License Type (i.e. club / restaurant)
- Pledge of Collateral (i.e. License/Stock)
- Change of Manager
- Change Corporate Name
- Change of Category (i.e. All Alcohol/Wine, Malt)
- Management/Operating Agreement
- Change of Officers/  
Directors/LLC Managers
- Change of Ownership Interest  
(LLC Members/ LLP Partners,  
Trustees)
- Issuance/Transfer of Stock/New Stockholder
- Change of Hours
- Other
- Change of DBA

THE LOCAL LICENSING AUTHORITY MUST SUBMIT THIS APPLICATION ONCE APPROVED VIA THE ePLACE PORTAL:

Alcoholic Beverages Control Commission  
 95 Fourth Street, Suite 3  
 Chelsea, MA 02150-2358

# Payment Confirmation

YOUR PAYMENT HAS PROCESSED AND THIS IS YOUR RECEIPT

Your account has been billed for the following transaction. You will receive a receipt via email.



Transaction Processed Successfully.

INVOICE #: f989e3f9-4644-4848-8e80-47f1a74451ea

Description	Applicant, License or Registration Number	Amount
FILING FEES-RETAIL	La Cantina Winery Company 19H	\$200.00
		<b>\$200.00</b>

Total Convenience Fee: **\$0.35**

Date Paid: **9/22/2023 1:06:20 PM EDT**

Total Amount Paid: **\$200.35**

**Payment On Behalf Of**  
**License Number or Business Name:**  
 La Cantina Winery Company 19H

**Fee Type:**  
 FILING FEES-RETAIL

**Billing Information**

**First Name:**  
 Robert

**Last Name:**  
 Vozzella





**AMENDMENT-Change or Alteration of Premises Information**

**Change of Location**

- Payment Receipt
- Monetary Transmittal Form
- Chg of Location/Alteration of Premises Application
- Financial Statement
- Vote of the Entity
- Supporting financial records
- Legal Right to Occupy
- Floor Plan
- Abutter's Notification
- Advertisement

**Alteration of Premises**

- Payment Receipt
- Monetary Transmittal Form
- Chg of Location/Alteration of Premises Application
- Financial Statement
- Vote of the Entity
- Supporting financial records
- Legal Right to Occupy
- Floor Plan
- Abutter's Notification
- Advertisement

**1. BUSINESS ENTITY INFORMATION**

Entity Name

Municipality

ABCC License Number

La Cantina Winery Company

Franklin MA

FB-LIC-000363/FW-LIC-000218

Please provide a narrative overview of the transaction(s) being applied for. Attach additional pages, if necessary.

This application is for approval for a 19H Farmer Series Pouring Permit. La Cantina Winery holds a farmer winery and farmer brewery permit.

**APPLICATION CONTACT**

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

Name	Title	Email	Phone
Robert Vozzella	Owner	[REDACTED]	[REDACTED]

**2. ALTERATION OF PREMISES**

**2A. DESCRIPTION OF ALTERATIONS**

Please summarize the details of the alterations and highlight any specific changes from the last-approved premises.

This application is to combine the 19B and 19C pouring permits for a single 19H permit.

**2B. PROPOSED DESCRIPTION OF PREMISES**

Please provide a complete description of the proposed premises, including the number of floors, number of rooms on each floor, any outdoor areas to be included in the licensed area, and total square footage. You must also submit a floor plan.

The building located at 341 Union St in Franklin MA is a 1 story building of block construction. The location separately identified as A for the Farmer Winery Series Permit and B for the Farmer Brewery Series Permit. This locations consist of 3 main interior rooms; Tasting Room, Storage/Brewery Production, and Winery Production totaling 7500 SQ/FT. The space

Total Sq. Footage	7500	Seating Capacity	180	Occupancy Number	180
Number of Entrances	2	Number of Exits	2	Number of Floors	1

# AMENDMENT-Change or Alteration of Premises Information

## 3. CHANGE OF LOCATION

### 3A. PREMISES LOCATION

Last-Approved Street Address

Proposed Street Address

### 3B. DESCRIPTION OF PREMISES

Please provide a complete description of the premises to be licensed, including the number of floors, number of rooms on each floor, any outdoor areas to be included in the licensed area, and total square footage. You must also submit a floor plan.

Total Sq. Footage

Seating Capacity

Occupancy Number

Number of Entrances

Number of Exits

Number of Floors

### 3C. OCCUPANCY OF PREMISES

Please complete all fields in this section. Please provide proof of legal occupancy of the premises. (E.g. Deed, lease, letter of intent)

Please indicate by what means the applicant has to occupy the premises

Own

Landlord Name

341 Cantina Real Estate LLC

Landlord Phone

Landlord Email

Landlord Address

Lease Beginning Date

8/19/22

Rent per Month

Lease Ending Date

8/19/32

Rent per Year

Will the Landlord receive revenue based on percentage of alcohol sales?

Yes  No

APPLICANT'S STATEMENT

I,  the:  sole proprietor;  partner;  corporate principal;  LLC/LLP manager  
Authorized Signatory

of   
Name of the Entity/Corporation

hereby submit this application (hereinafter the "Application"), to the local licensing authority (the "LLA") and the Alcoholic Beverages Control Commission (the "ABCC" and together with the LLA collectively the "Licensing Authorities") for approval.

I do hereby declare under the pains and penalties of perjury that I have personal knowledge of the information submitted in the Application, and as such affirm that all statements and representations therein are true to the best of my knowledge and belief. I further submit the following to be true and accurate:

- (1) I understand that each representation in this Application is material to the Licensing Authorities' decision on the Application and that the Licensing Authorities will rely on each and every answer in the Application and accompanying documents in reaching its decision;
- (2) I state that the location and description of the proposed licensed premises are in compliance with state and local laws and regulations;
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- (7) I understand that any physical alterations to or changes to the size of the area used for the sale, delivery, storage, or consumption of alcoholic beverages, must be reported to the Licensing Authorities and may require the prior approval of the Licensing Authorities;
- (8) I understand that the licensee's failure to operate the licensed premises in accordance with the statements and representations made in the Application may result in sanctions, including the revocation of any license for which the Application was submitted; and
- (9) I understand that any false statement or misrepresentation will constitute cause for disapproval of the Application or sanctions including revocation of any license for which this Application is submitted.
- (10) I confirm that the applicant corporation and each individual listed in the ownership section of the application is in good standing with the Massachusetts Department of Revenue and has complied with all laws of the Commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting of child support.

Signature:

Date:

Title:

## **NOTICE OF PUBLIC HEARING FRANKLIN, MA**

---

### **Alteration of Premises to combine Section 19B(n) Farmer-Winery Pouring Permit and Section 19C(n) Farmer-Brewery Pouring Permit to create a Section 19H Farmer-Winery / Farmer-Brewery Pouring Permit La Cantina Winery Company**

The Franklin Town Council will hold a Public Hearing on an application by La Cantina Winery Company, located at 341 Union Street, Franklin, MA for an alteration of premises to combine their Section 19B(n) Farmer-Winery Pouring Permit and Section 19C(n) Farmer-Brewery Pouring Permit to create a Section 19H Farmer-Winery / Farmer-Brewery Pouring Permit. This hearing will take place during the Town Council's public meeting on Wednesday, October 18th, 2023, beginning at 7:00 PM and will provide an open forum for discussion. Location: Municipal Building, 2nd floor Council Chambers, 355 E. Central St., Franklin and will also be available via the "ZOOM" platform. Residents can visit the Town website ([Franklinma.gov](http://Franklinma.gov)) calendar on and after October 13, 2023 for updated meeting information. For questions, please call the Town Administrator's Office at (508) 520-4949.

# LICENSE TRANSACTION



## New Section 19B(n) Farmer-Winery Pouring Permit

### La Cantina Winery Company

341 Union Street  
Franklin, MA 02038

La Cantina Winery Company located at 341 Union St., Franklin, MA 02038 is seeking approval for a New Section 19B(n) Farmer-Winery Pouring Permit and to approve the manager, Robert Vozzella.

**MOTION** to approve the request by La Cantina Winery Company for a New Section 19B(n) Farmer-Winery Pouring Permit and to approve Robert Vozzella as the manager.

---

**DATED:** \_\_\_\_\_, 2023

**VOTED:**

**UNANIMOUS:** \_\_\_\_\_

**A True Record Attest:**

**YES:** \_\_\_\_\_ **NO:** \_\_\_\_\_

**ABSTAIN:** \_\_\_\_\_

**ABSENT:** \_\_\_\_\_

**RECUSED:** \_\_\_\_\_

**Nancy Danello, CMC**  
**Town Clerk**

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**Glenn Jones, Clerk**  
**Franklin Town Council**

# LICENSE TRANSACTION



## New Section 19C(n) Farmer-Brewery Pouring Permit

### La Cantina Winery Company

341 Union Street  
Franklin, MA 02038

La Cantina Winery Company located at 341 Union St., Franklin, MA 02038 is seeking approval for a New Section 19C(n) Farmer-Brewery Pouring Permit and to approve the manager, Robert Vozzella.

**MOTION** to approve the request by La Cantina Winery Company for a New Section 19C(n) Farmer-Brewery Pouring Permit and to approve Robert Vozzella as the manager.

---

**DATED:** \_\_\_\_\_, 2023

**VOTED:**

**UNANIMOUS:** \_\_\_\_\_

**A True Record Attest:**

**YES:** \_\_\_\_\_ **NO:** \_\_\_\_\_

**ABSTAIN:** \_\_\_\_\_

**ABSENT:** \_\_\_\_\_

**RECUSED:** \_\_\_\_\_

**Nancy Danello, CMC**  
**Town Clerk**

---

**Glenn Jones, Clerk**  
**Franklin Town Council**

# LICENSE TRANSACTION



**Alteration of Premises to combine Section 19B(n) Farmer-Winery Pouring Permit and Section 19C(n) Farmer-Brewery Pouring Permit to create a Section 19H Farmer-Winery / Farmer-Brewery Pouring Permit**

**La Cantina Winery Company**  
341 Union Street  
Franklin, MA 02038

La Cantina Winery Company located at 341 Union St., Franklin, MA 02038 is seeking approval for an Alteration of Premises to combine Section 19B(n) Farmer-Winery Pouring Permit and Section 19C(n) Farmer-Brewery Pouring Permit to create a Section 19H Farmer-Winery / Farmer-Brewery Pouring Permit and to approve the manager, Robert Vozzella.

**MOTION** to approve the request by La Cantina Winery Company for an Alteration of Premises to combine Section 19B(n) Farmer-Winery Pouring Permit and Section 19C(n) Farmer-Brewery Pouring Permit to create a Section 19H Farmer-Winery / Farmer-Brewery Pouring Permit and to approve Robert Vozzella as the manager.

---

**DATED:** \_\_\_\_\_, 2023

**VOTED:**

**UNANIMOUS:** \_\_\_\_\_

**A True Record Attest:**

**YES:** \_\_\_\_\_ **NO:** \_\_\_\_\_

**ABSTAIN:** \_\_\_\_\_

**ABSENT:** \_\_\_\_\_

**RECUSED:** \_\_\_\_\_

**Nancy Danello, CMC**  
**Town Clerk**

---

**Glenn Jones, Clerk**  
**Franklin Town Council**

# Town of Franklin

355 East Central Street  
Franklin, Massachusetts 02038-1352



Phone: (508) 520-4949  
www.franklinma.gov

OFFICE OF THE TOWN ADMINISTRATOR

## Memorandum

October 13, 2023

To: Town Council  
From: Jamie Hellen, Town Administrator  
Amy Frigulietti, Deputy Town Administrator

**Re: Resolution 23-57: Gift Acceptance - Veterans' Services Department**

The Veterans' Services Department has received several generous donations in the total to be applied to the Franklin Municipal Veterans' Assistance Fund, to be used at the Department's discretion in support of local Veterans and their families.

We would like to thank everyone for their continued support of our local services.

### **Donation Summary:**

#### **1. VETERANS' SERVICES DEPARTMENT - MUNICIPAL VETERANS' ASSISTANCE FUND**

● Franklin Newcomers and Friends Club	\$1,400
● Knights of Columbus	\$1,000
● Michael and Beth McLaughlin	\$ 250
● Pat and Lori Doyle	\$ 100
● Steven & Lynda Moore	\$ 100
● Brian & Kathy Durand	\$ 100
● Elaine Anderson and Paul McFarland	\$ 50
● Gina Bryda	\$ 50
● David & Dorothy Nasuti	\$ 50
● Donna Coroniti	\$ 25
● Juli Kearney	\$ 25
● Marie Lamphere	\$ 25
● Madeleine Nasuti and Cynthia Sarapas	\$ 10
● William Regnier and Mary Callahan	\$ 10
● Jeanette Thornhill	\$ 10

**Donation Total: \$3,205**

Thank you to all who support our local Veterans!



**TOWN OF FRANKLIN  
RESOLUTION 23-57**

**Acceptance of Gifts - Veterans' Services Department**

**WHEREAS,** The Veterans' Services Department has received generous donations in the total amount of \$3,250.00 to be used at the discretion of the Department for programs and services, as follows:

**Donation Summary:**

**VETERANS' SERVICES DEPARTMENT**

- 1. Municipal Veterans' Assistance Fund - \$3,250 to be used in support of local Veterans and their families

List of all donors is included in the 10/18/2023 Town Council meeting agenda packet.

**Donation Total: \$3,250.00**

**NOW THEREFORE, BE IT RESOLVED THAT:**

The Town Council of the Town of Franklin on behalf of the Veterans' Services Department gratefully accepts these generous donations to be used at the discretion of the Department, as described above.

This resolution shall become effective according to the provisions of the Town of Franklin Home Rule Charter.

**DATED:** \_\_\_\_\_, 2023

**VOTED:** \_\_\_\_\_

**UNANIMOUS:** \_\_\_\_\_

**A TRUE RECORD ATTEST:**

**YES:** \_\_\_\_\_ **NO:** \_\_\_\_\_

**ABSTAIN:** \_\_\_\_\_ **ABSENT:** \_\_\_\_\_

**RECUSED:** \_\_\_\_\_

\_\_\_\_\_  
**Nancy Danello, CMC**  
**Town Clerk**

\_\_\_\_\_  
**Glenn Jones, Clerk**  
**Franklin Town Council**