

## FRANKLIN TOWN COUNCIL

### Agenda & Meeting Packet

June 23, 2021

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 now welcome to attend public board and committee meetings in person. Additionally, in an effort to maximize citizen engagement opportunities and comply with open meeting law regulations, citizens will be able to continue to dial into the meeting using the provided phone number (Cell phone or Landline Required) OR citizens can participate via Zoom by clicking on the attached [link](#) (Phone, Computer, or Tablet required). The meetings will also be [live-streamed by Franklin TV](#) and shown on Comcast Channel 11 and Verizon Channel 29.

- **Link to access meeting:** June 23, 2021 Town Council Meeting Link [HERE](#) -- Then click "Open Zoom"
  - Or copy and paste this URL into your browser: <https://us02web.zoom.us/j/83756011332>
  - **Call-In Phone Number:** Call 1-929-205-6099 and enter Meeting ID # **837 5601 1332** --Then press #

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#### 1. ANNOUNCEMENTS FROM THE CHAIR

- a. *This meeting is being recorded by Franklin TV and shown on Comcast channel 11 and Verizon Channel 29. This meeting may be recorded by others.*
- b. *Chair to identify Council Members participating remotely*

#### 2. CITIZEN COMMENTS

- a. *Citizens are welcome to express their views for up to five 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

- a. Police Department Recognition: Patrol Officer David Mellor
- b. Fire & Police Department Recognition: Winter Street Incident

#### 5. APPOINTMENTS

- a. Annual Reappointments

#### 6. HEARINGS - 7:10pm - None Scheduled

#### 7. LICENSE TRANSACTIONS

- a. S&J Restaurant, LLC d/b/a Sierra's Brick Oven Pizza & Pub, New Common Victualer All Alcohol License and Approval of Manager, located at 648 Old West Central Street, Franklin, MA 02038.
- b. Proof Restaurant, LLC d/b/a Proof, New Common Victualer All Alcohol License and Approval of Manager, located at 862 West Central Street, 2nd Floor, Franklin, MA 02038.

## 8. PRESENTATIONS/DISCUSSIONS

- a. Open Meeting Law (OML) Complaint from Patrick Higgins: Failure to approve Town Council meeting minutes in a timely manner.

## 9. SUBCOMMITTEE REPORTS

- a. Capital Budget Subcommittee
- b. Budget Subcommittee
- c. Economic Development Subcommittee

## 10. LEGISLATION FOR ACTION

- a. Resolution 21-33: Expenditure - Recreation Department Expenses, Fletcher Fund (**Motion to Approve Resolution 21-33 - Majority Vote**)
- b. Resolution 21-34: Appropriation - Franklin Downtown Zoning and Marketing Capital Account (**Motion to Approve Resolution 21-34 - Majority Vote**)
- c. Resolution 21-35: FY21 Appropriation Transfers (**Motion to Approve Resolution 21-35 - Majority Vote**)
- d. Resolution 21-36: Gift acceptance - Police, \$100 (**Motion to Approve Resolution 21-36 - Majority Vote**)
- e. Resolution 21-37: Termination of the Veteran's Services Agreement (**Motion to Approve Resolution 21-37 Majority Vote**)
- f. Resolution 21-26: Gift Acceptance - Historical Museum, \$100 (**Motion to Approve Resolution 21-26 - Majority Vote**)
- g. Zoning Bylaw Amendment 21-874: Amendment to CH. 185 Section 21 Parking, Loading, and Driveway Requirements - Referral to the Planning Board (**Motion to Refer Bylaw Amendment 21-874 to the Planning Board - Majority Vote**)

## 11. TOWN ADMINISTRATOR'S REPORT

## 12. FUTURE AGENDA ITEMS

## 13. COUNCIL COMMENTS

## 14. EXECUTIVE SESSION

- a. Exception #2: Contract negotiations with non-union personnel, namely: Town Administrator
- b. Exception #3: Strategy with respect to collective bargaining: all eight Town unions

## 15. RETURN TO OPEN SESSION

- a. Ratify collective bargaining agreements relative to Juneteenth holiday, subject to Executive Session outcome.
  - i. Legislation for action:
    1. Resolution 21-38: Ratify collective bargaining agreements relative to Juneteenth holiday (**Motion to Approve Resolution 21-38 Majority Vote**)
- b. Vote on approving Administrator contract, subject to Executive Session outcome
  - i. Legislation for action:
    1. Resolution 21-39: Approval of Town Administrator's Contract (**Motion to Approve Resolution 21-39 Majority Vote**)

## 16. ADJOURN

*Note:*

*Two-Thirds Vote: requires 6 votes*

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

# Town of Franklin

355 East Central Street  
Franklin, Massachusetts 02038-1352



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

OFFICE OF THE TOWN ADMINISTRATOR

## APPOINTED COMMITTEE MEMBERS

### June 2021

The Town Administrator has appointed the following individuals to serve to boards and committees:

#### **Agricultural Commission 3-year terms (5 members)**

Charles J Koshivas	887 Lincoln Street	June 30, 2024
Nick Hoffman	10 Hoffman Farm Road	June 30, 2022

#### **Agricultural Commission Associate Members 3-year term**

Nick Capoccia	398 Prospect Street	June 30, 2023 (New)
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#### **Charles River Pollution Control District 3-year term (3 members)**

Wolfgang Bauer	511 Union Street	June 30, 2023 (New)
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#### **Community Preservation Committee 1 and 2-year terms (9 members)**

Michael Giardino	18 Sherman Ave	June 30, 2023
Lisa Oxford	18 Lincoln Street	June 30, 2023
David McNeill	85 Cross Street	June 30, 2022
Monique Doyle	3 Greensfield Road	June 30, 2022
Christopher Feeley	5 Taft Drive	June 30, 2022
Joseph Halligan	1 Newell Drive	June 30, 2022
Phyllis Messere Malcom	37 Uncas Avenue	June 30, 2022
Wayne Simarrian	204 Jordan Road	June 30, 2022
Jeffrey Livingstone	68 Daniels Street	June 30, 2022

#### **Conservation Committee 3-year term (7 members)**

William Batchelor	24 Shayne Rd Apt 221	June 30, 2024
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#### **Council on Aging -3-year term (9 members)**

Ron Higginbottom	97 Highbank Road	June 30, 2024
Lester Quan	811 Franklin Crossing Blvd	June 30, 2024
Janet Jewett	20 Hawthorne Village Apt C	June 30, 2024

#### **Cultural District 3-year term (7 members)**

Nancy Schoen	13 Jackson Circle	June 30, 2024
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#### **Design Review Commission 3-year term (5 members)**

Mark Fitzgerald	13 Christine Avenue	June 30, 2024
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Chris Baryluk	25 Winterberry Drive	June 30, 2024
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**Finance Committee 3-year term (9 members)**

George Conley	7 Sherman Avenue	June 30, 2024
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John Grace	8 Ivy Lane	June 30, 2024
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**Franklin Cultural Council (2) 3-year term (9 members)**

Lilian Gould	69 Brook Street	June 30, 2024
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Karen Wellerson Juhl	222 Daniels Street	June 30, 2024
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Kaye Kelly	5 Calistoga Way	June 30, 2024
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**Franklin Disability Commission 3-year terms (7 members)**

Michael Furilla	129 Central Park Terrace	June 30, 2024
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**Historical Commission 3-year terms (7 members)**

Paul Pisani	1 Pond Place	June 30, 2024
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Colette Ferguson	41 Prospect Street	June 30, 2024
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Brock Leindecker	12 Flintlocke Road	June 30, 2024
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**Historical Commission Associate Members 1-year term**

Kai Olsson (AS)	149 West Central St	June 30, 2022
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Alan Earls (AS)	23 Marvin Ave	June 30, 2022
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**Library Board of Directors 3-year terms (5 members)**

Barbara Steele	9 Mountain Ash Lane	June 30, 2024
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Charleen Belcher	31 Meadowlark Lane	June 30, 2024
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**Municipal Affordable Housing Trust Fund Committee 1-year terms**

Judith Pond Pfeffer	37 Arlington Street	June 30, 2022
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Mary Anne Bertone	17 Grey Wolf Drive	June 30, 2022
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Christopher Vericker	63 Dean Avenue	June 30, 2022
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Maxine Kinhart	Municipal Building	June 30, 2022
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Christopher Feeley	5 Taft Drive	June 30, 2022
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Robert Keras	547 Union Street	June 30, 2022
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**Norfolk County Advisory Board 1-year term**

Peter Padula	14 Fort Apache Drive	June 30, 2022
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**OPEB Board of Trustees 3-year term (5 members)**

Peter Lounsbury	53 Oxford Drive	June 30, 2024
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Gregory McNeille	6 Vincent Way	June 30, 2024
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**Recreation Advisory Board 3-year term**

Kinjal Patel	41 Winterberry Drive	June 30, 2024
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Wayne Simarrian	204 Jordan Road	June 30, 2024
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**Zoning Board of Appeals 3-year term (5 members)**

Phillip Brunelli	26 James Street	June 30, 2024
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**Associate Members 1-year term**

Meghan Lee Whitmore	9 Downingwood Drive	June 30, 2022
Christopher Stickney	18 High Street	June 30, 2022

Motion to Ratify the Annual appointments to the following boards and commissions.

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**DATED:** \_\_\_\_\_

**VOTED:**

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

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

**A True Record Attest:**

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

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

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

**Nancy Danello, CMC  
Temporary Town Clerk**

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**Glenn Jones, Clerk  
Franklin Town Council**



## Town of Franklin MA

355 East Central Street

Franklin, MA 02038

Phone: 508-520-4949

### Volunteer Form

*Good Government Starts with You!*

**Date Submitted:** April 30, 2021

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**Name:** Nick Capoccia

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**Home Address:** 398 Prospect st  
FRANKLIN, MA 02038

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**Mailing Address:** 398 Prospect st  
FRANKLIN, MA 02038

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**Phone Number(s):**

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**Email Address:**

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**Current Occupation/Employer:** Excavation. J.hockman inc

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**Narrative:** Free time is always scarce but I am always willing to make time for something when needed. I have brief farming knowledge and plenty of equipment and tractor knowledge. I grew up around farms and construction and its always been an interest. I recently inherited my grandparents farm and property on prospect st.

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**Board(s) / Committee(s):** \_\_\_AGRICULTURAL COMMISSION

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## Town of Franklin MA

355 East Central Street

Franklin, MA 02038

Phone: 508-520-4949

### Volunteer Form

*Good Government Starts with You!*

**Date Submitted:** January 20, 2021

**Name:** Wolfgang Bauer

**Home Address:** 511 Union Street  
Franklin MA 02038

**Mailing Address:** 511 Union Street  
Franklin MA 02038

**Phone Number(s):**

**Email Address:**

**Current Occupation/Employer:** Retired

**Narrative:** Masters in Public Administration. 31 years in municipal government

**Board(s) / Committee(s):** \_\_\_ Charles River Pollution Control  
\_\_\_ COMMUNITY PRESERVATION COMMITTEE

# LICENSE TRANSACTION



**New Section 12 Restaurant All Alcoholic Beverages**

**S&J Restaurant, LLC d/b/a Sierra's Brick Oven Pizza & Pub**  
648 Old West Central Street  
Franklin, MA 02038

S&J Restaurant, LLC d/b/a Sierra's Brick Oven Pizza & Pub is seeking approval for a New Section 12 Restaurant All Alcoholic Beverages License and to approve the manager, Mabel Stefanidis.

All Departments have signed off on this application.

**MOTION** to approve the request by S&J Restaurant, LLC d/b/a Sierra's Brick Oven Pizza & Pub for a New Section 12 Restaurant All Alcoholic Beverages License and to approve Mabel Stefanidis as the manager.

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**DATED:** \_\_\_\_\_, 2021

**VOTED:**

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

**A True Record Attest:**

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

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

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

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

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

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



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="§12 Restaurant"/>	<input type="text" value="All Alcoholic Beverages"/>	<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.

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  FEIN

DBA  Manager of Record

Street Address

Phone  Email

Alternative Phon  Websit

**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.

Total Square Footage:  Number of Entrances:  Seating Capacity:

Number of Floors:  Number of Exits:  Occupancy Number:

**4. APPLICATION CONTACT**

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

Name:  Phone:

Title:  Email:

**APPLICATION FOR A NEW LICENSE**

**5. CORPORATE STRUCTURE**

Entity Legal Structure	<input type="text" value="LLC"/>	Date of Incorporation	<input type="text" value="Jan 22, 2019"/>
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			
<input type="text" value="Mabel D. Stefanidis"/>	<input type="text"/>			
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
<input type="text" value="Manager and Member"/>	<input type="text" value="100%"/>	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<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	MA Resident
<input type="text"/>	<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<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	MA Resident
<input type="text"/>	<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<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	MA Resident
<input type="text"/>	<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<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	MA Resident
<input type="text"/>	<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<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

**MANAGEMENT AGREEMENT**  
 Are you requesting approval to utilize a management company through a management agreement?  Yes  No  
 Please provide a copy of the management agreement.

## 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

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

Has any individual or entity identified 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

Lease

Landlord Name FRANKLIN GOLDFIELD PROPERTIES LLC

Landlord Phone  

Landlord Address c/o Keypoint Partners, LLC, One Burlington Woods Drive, Burlington, MA 01803

Lease Beginning Date January 11, 2019

Rent per Month \$6,696.00

Lease Ending Date May 31, 2025

Rent per Year \$80,352.00

Will the Landlord receive revenue based on percentage of alcohol sales?  Yes  No

**APPLICATION FOR A NEW LICENSE**

**8. FINANCIAL DISCLOSURE**

A. Purchase Price for Real Estate	N/A
B. Purchase Price for Business Assets	N/A
C. Other * (Please specify below)	\$169,478.13
D. Total Cost	\$169,478.13

\*Other Cost(s): (i.e. Costs associated with License Transaction including but not limited to: Property price, Business Assets, Renovations costs, Construction costs, Initial Start-up costs, Inventory costs, or specify other costs):"

**SOURCE OF CASH CONTRIBUTION**

Please provide documentation of available funds. (E.g. Bank or other Financial institution Statements, Bank Letter, etc.)

Name of Contributor	Amount of Contribution
Mabel D. Stefanidis	\$169,478.13
Total:	\$169,478.13

**SOURCE OF FINANCING**

Please provide signed financing documentation.

Name of Lender	Amount	Type of Financing	Is the lender a licensee pursuant to M.G.L. Ch. 138.
Eastern Bank	\$112,000.00	SBA Loan	<input type="radio"/> Yes <input checked="" type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No

**FINANCIAL INFORMATION**

Provide a detailed explanation of the form(s) and source(s) of funding for the cost identified above.

\*OTHER: TOOK OVER LEASE FOR SPACE, COSTS FOR BUILD OUT, EQUIPMENT, SUPPLIES AND TO START BUSINESS. SEE ATTACHED PROMISSORY NOTE, TOGETHER WITH SCHEDULE OF EXPENSES AND EASTERN BANK AND AMERICAN EXPRESS RECORDS PROVIDING BACKUP INFORMATION FOR PROMISSORY NOTE TO MABEL STEFANIDIS.

**9. PLEDGE INFORMATION**

Please provide signed pledge documentation.

Are you seeking approval for a pledge?  Yes  No

Please indicate what you are seeking to pledge (check all that apply)  License  Stock  Inventory

To whom is the pledge being made? Eastern Bank



# 10. MANAGER APPLICATION

## A. MANAGER INFORMATION

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

Proposed Manager Name

Residential Address

Email

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
		SEE ATTACHED SCHEDULE		

## 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

ABCC APPLICATION FOR  
NEW LIQUOR LICENSE  
S J RESTAURANT, LLC

**10(C) EMPLOYMENT INFORMATION**

Start Date	End Date	Position	Employer	Supervisor Name
2020	Present	Owner/Manager	Sierra's Brick Oven Pizza & Pub Franklin, MA	N/A - Self
2013	2016	Cashier/Food & Alcohol Server	Ken's NY Deli & Pizzeria Bedford, MA (Blackbeard Enterprises LLC)	James Garabedain John Cronin
1989	1990	Cashier	Brother's Deli Peabody, MA	Kiriako & Teddy
1988	1989	Cashier	Maria's Restaurant Burlington, MA	James Garabedain
2019	2019	Manager - Real Estate Business	Nashua, NH; Derry, NH; Andover, MA	N/A - Self
2011	2012	Apartment Rental Realtor	North Shore Realty Advisors Marblehead, MA	Dan Pouladian
1998	2000	Daycare owner/manager	Happy Tots Day Care Lynn, MA	N/A - Self
2004	2007	Sales - Partylite candles at home shows	Partylite Burlington, MA	
1988	1997	Administrative Assistant	Massachusetts Financial Services Boston, MA	Pat Houston
1983	1988	Quality Control Inspector	Sertech Salem, MA	Brian

**APPLICANT'S STATEMENT**


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

of S & J Restaurant, LLC  
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: 

Date: May 21, 2021

Title: Manager

**CORPORATE VOTE**

The ~~Board of Directors or~~ LLC Managers of  Entity Name

duly voted to apply to the Licensing Authority of  City/Town and the Commonwealth of Massachusetts Alcoholic Beverages Control Commission on  Date of Meeting

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

"VOTED: To authorize  Name of Person

to sign the application submitted and to execute on the Entity's behalf, any necessary papers and do all things required to have the application granted."

"VOTED: To appoint  Name of Liquor License Manager

as its manager of record, and hereby grant him or her with full authority and control of the premises described in the license and authority and control of the conduct of all business therein as the licensee itself could in any way have and exercise if it were a natural person residing in the Commonwealth of Massachusetts."

A true copy attest,

For Corporations ONLY

A true copy attest,

  
Corporate Officer /LLC Manager Signature

\_\_\_\_\_  
Corporation Clerk's Signature

Mabel Stefanidis  
(Print Name)

\_\_\_\_\_  
(Print Name)



Commonwealth of Massachusetts  
 Alcoholic Beverages Control Commission  
 95 Fourth Street, Suite 3  
 Chelsea, MA 02150

JEAN M. LORIZIO, ESQ.  
 CHAIRMAN

**CORI REQUEST FORM**

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 LICENSEE)</small>	LICENSEE NAME: S & J Restaurant, LLC	CITY/TOWN: Franklin
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**APPLICANT INFORMATION**

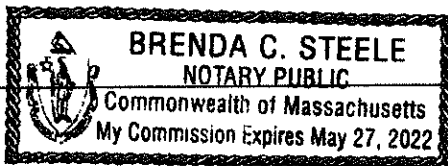
LAST NAME: Stefanidis	FIRST NAME: Mabel	MIDDLE NAME: D.
MAIDEN NAME OR ALIAS (IF APPLICABLE): Garabedian	PLACE OF BIRTH: Salem, Massachusetts	
DATE OF BIRTH:	CABLE:	
MOTHER'S MAID	ISSUED: Massachusetts	
GENDER		
CURREN		
CITY/TO'		
FORMER		
CITY/TO'		

**PRINT AND SIGN**

PRINTED NAME: Mabel D. Stefanidis	APPLICANT/EMPLOYEE SIGNATURE: <i>Mabel Stefanidis</i>
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**NOTARY INFORMATION**

On this 21st day of May 2022 before me, the undersigned notary public, personally appeared Mabel D. Stefanidis  
 (name of document signer), proved to me through satisfactory evidence of identification, which were U.S. Passport  
 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.

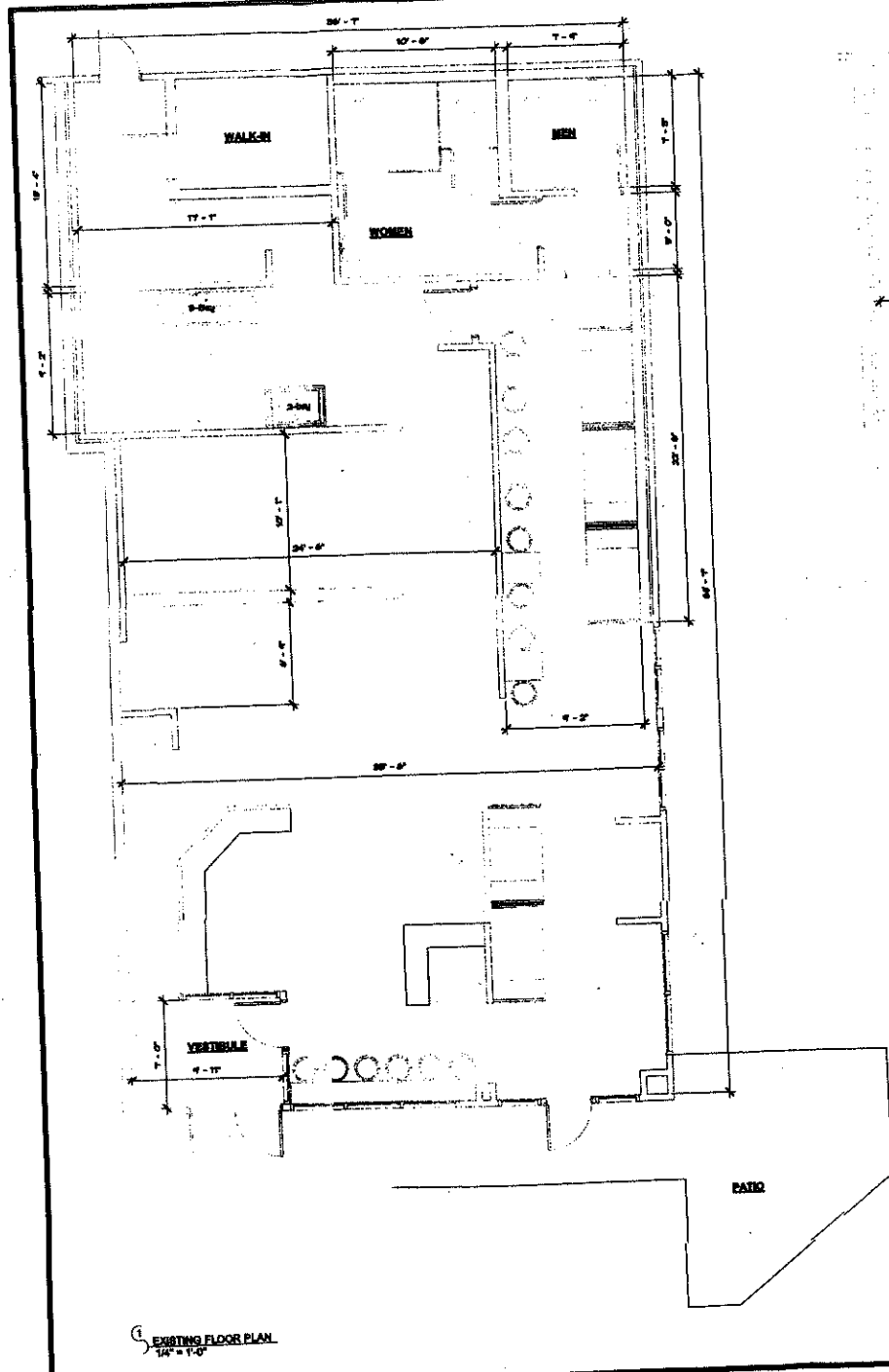


*Brenda C. Steele*  
 NOTARY

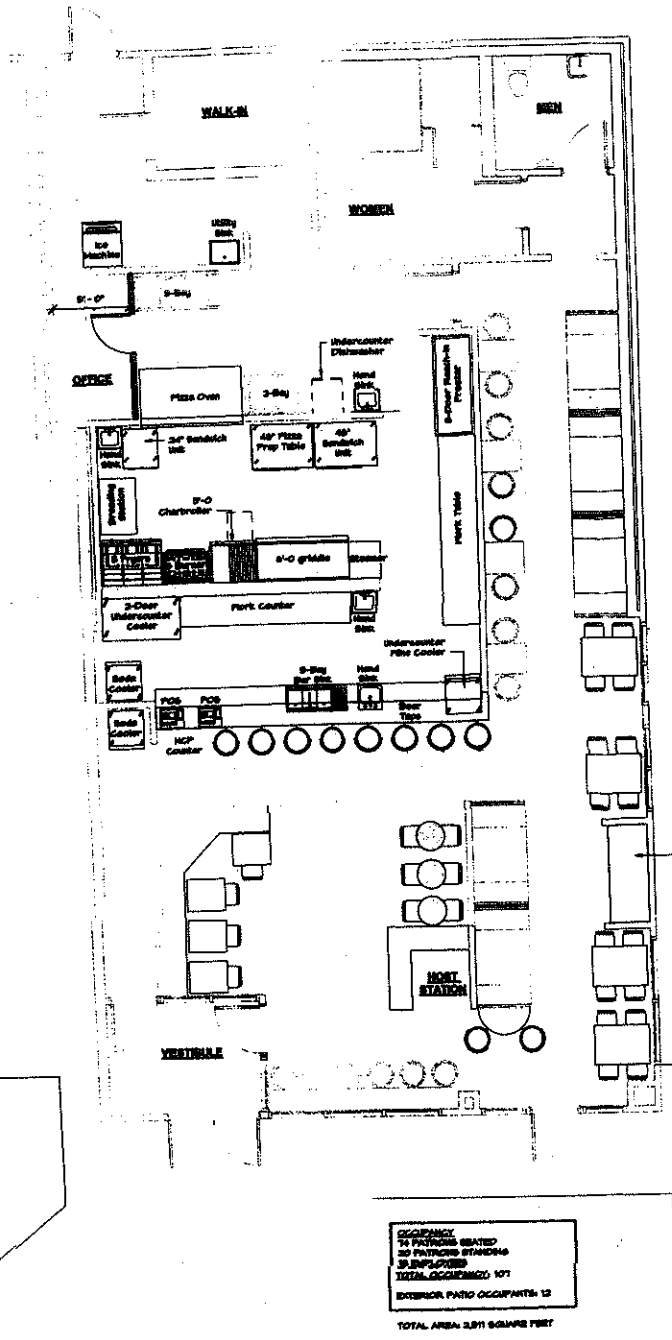
**DIVISION USE ONLY**

REQUESTED BY:	<i>SIGNATURE OF CORI-AUTHORIZED EMPLOYEE</i>
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The DCJ Identify Theft Index PIN Number is to be completed by those applicants that have been issued an Identity Theft PIN Number by the DCJ. 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 DCJ via mail or by fax to (617) 660-4614.



EXISTING FLOOR PLAN  
1/4" = 1'-0"

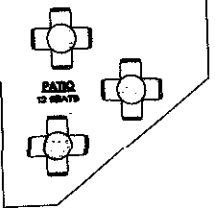


PROPOSED FLOOR PLAN  
1/4" = 1'-0"

OCCUPANCY  
76 PATRONS SEATED  
25 PATRONS STANDING  
3 EMPLOYED  
TOTAL OCCUPANCY 107  
EXTERIOR PATIO OCCUPANTS 12  
TOTAL AREA 3,871 SQUARE FEET

EXISTING FALLS TO REMAIN  
EXISTING FALLS TO BE REMOVED  
NEW FALLS

Ceilings in kitchen / food handling areas shall be removed/repairable as selected by owner.  
Customer service counters handicap counter (height shall be set at 3'-0" maximum)



PATIO  
12 SEATS

- NOTE #1:**  
ALL WORK SHALL COMPLY WITH THE COMMONWEALTH OF MASSACHUSETTS STATE BUILDING CODE, THE REQUIREMENTS OF THE TOWN OF FRANKLIN, THE OCCUPATIONAL AND HEALTH STANDARDS AND ALL OTHER APPLICABLE REGULATIONS, LAWS, ORDINANCES ETC. COVERING THE WORK.
- NOTE #2:**  
ALL PLAN AND DETAIL DIMENSIONS SHOULD BE VERIFIED IN THE FIELD PRIOR TO COMMENCING THE WORK. THE CONTRACTOR SHALL NOTIFY THE ARCHITECT OF ALL DEVIATIONS IN THE DIMENSIONS AND LOCATIONS ETC. BEFORE PROCEEDING WITH AFFECTED PART OF THE WORK.
- NOTE #3:**  
DO NOT SCALE THESE DRAWINGS FOR QUANTITIES, LENGTHS, SIZES, AREAS, CLEARANCES ETC.
- NOTE #4:**  
IT IS NOT INTENDED THAT THESE DRAWINGS SHOW EVERY CUT, CONDITION ETC. OF THIS SYSTEM.
- NOTE #5:**  
SITE SHALL BE LEFT CLEAN AT THE END OF EACH WORKING DAY. ALL DEBRIS SHALL BE PICKED UP AND PLACED IN CONTAINERS, CONSTRUCTION QUALITY BAGS, DUMPSTER OR OTHER ACCEPTABLE MEANS.
- NOTE #6:**  
ALL CONSTRUCTION DEBRIS SHALL BE PROPERLY DISPOSED OF DURING THE EXTENT OF THE WORK, AND THE SITE SHALL BE LEFT COMPLETELY CLEAN AND FREE OF DEBRIS AT THE END OF THE CONTRACT, ALL DEBRIS SHALL BE PROPERLY DISPOSED OF.
- NOTE #7:**  
THE CONTRACTOR SHALL TEMPORARILY DISCONNECT AND REMOVE ALL EXISTING SERVICES THAT INTERFERE WITH THE PROPER INSTALLATION OF THE NEW CONSTRUCTION. CONTRACTOR IS RESPONSIBLE TO NOTIFY THE ARCHITECT/OWNER OF THESE SERVICES BEFORE DISCONNECTION, REINSTALL AND RECONNECT ALL TEMPORARILY DISCONNECTED AND REMOVED ITEMS TO THE SATISFACTION OF THE OWNER.
- NOTE #8:**  
ALL AREAS DISTURBED OR DAMAGED AS A RESULT OF WORK BEING PERFORMED ARE TO BE PATCHED OR REPLACED TO MATCH ADJACENT SURFACES.



DATE	7-24-2014
SCALE	AS NOTED
DRAWN BY	PKK
REVISION	
DATE	7-24-2014
PROJECT	100 OLD BRIDGE CENTRAL STREET FRANKLIN, MA
CLIENT NAME	J.P. GARDNER

**KRITIKOS ARCHITECTS**  
14 Olson Road Feabody, MA 01960 (978) 831-4164  
E-Mail: pk@kritikosarchitects.com  
www.kritikosarchitects.com



A-1

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# MABEL D. STEFANIDIS

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## CERTIFICATES

CERTIFIED PROFESSIONAL FOOD MANAGER

CERTIFIED ALCOHOL HANDLER

ALLERGY AWARENESS

## RESTAURANT EXPERIENCE

OWNER/MANAGER, SIERRA'S BRICK OVEN PIZZA & PUB; FRANKLIN, MA – 2020-CURRENT

Own & operate a busy pizza/sandwich restaurant; hire, manage & schedule staff; take care of all bookkeeping; work as a cashier taking & expediting food orders during busy times

CASHIER/FOOD & ALCOHOL SERVER, KEN'S NY DELI & PIZZERIA; BEDFORD, MA – 2013-2016

Worked as a cashier taking food orders during busy lunch times & also waited at the bar taking food orders & serving alcohol.

CASHIER, BROTHER'S DELI; PEABODY, MA - 1989-1990

Worked as a cashier taking food orders & serving food during busy lunch times.

CASHIER, MARIA'S RESTAURANT; BURLINGTON, MA – 1988-1989

Worked as a cashier taking food orders & serving food during busy lunch times.

## REAL ESTATE BUSINESS

NASHUA, NH - 2016 | DERRY, NH - 2017 | ANDOVER, MA - 2019

Purchased, fixed & sold three homes for profit. Oversaw the whole project, managed contractors & controlled all finances.

APARTMENT RENTAL REALTOR, NORTH SHORE REALTY ADVISORS; MARBLEHEAD, MA - 2011-2012

Rented apartments.

## OTHER BUSINESSES

HAPPY TOTS DAY CARE, LYNN, MA - 1998-2000

Owned and ran a home day care for infants and young children.

PARTYLITE, BURLINGTON, MA - 2004-2007

Sold PartyLite Candles at home shows.

## PROFESSIONAL EMPLOYMENT

ADMINISTRATIVE ASSISTANT, MASSACHUSETTS FINANCIAL SERVICES; BOSTON, MA - 1988-1997

QUALITY CONTROL INSPECTOR, SERTECH; SALEM, MA - 1983-1988

## EDUCATION

SALEM STATE COLLEGE – BUSINESS PROGRAM

NORTHEASTERN UNIVERSITY – FINANCE PROGRAM



**The Commonwealth of Massachusetts**  
**William Francis Galvin**

Minimum Fee: \$500.00

Secretary of the Commonwealth, Corporations Division  
 One Ashburton Place, 17th floor  
 Boston, MA 02108-1512  
 Telephone: (617) 727-9640

**Certificate of Organization**

(General Laws, Chapter )

Identification Number:

1. The exact name of the limited liability company is: S & J RESTAURANT, LLC

2a. Location of its principal office:

No. and Street: 648 OLD WEST CENTRAL STREET  
 City or Town: FRANKLIN State: MA Zip: 02038 Country: USA

2b. Street address of the office in the Commonwealth at which the records will be maintained:

No. and Street: 648 OLD WEST CENTRAL STREET  
 City or Town: FRANKLIN State: MA Zip: 02038 Country: USA

3. The general character of business, and if the limited liability company is organized to render professional service, the service to be rendered:

TO OWN AND OPERATE A RESTAURANT; TO PREPARE AND SERVE MEALS, NON-ALCOHOLIC BEVERAGES AND ALCOHOLIC BEVERAGES; AND TO OTHERWISE ENGAGE IN ANY LAWFUL ACTIVITY FOR WHICH LIMITED LIABILITY COMPANIES MAY BE ORGANIZED UNDER CHAPTER 156C OF THE MASSACHUSETTS GENERAL LAWS.

4. The latest date of dissolution, if specified:

5. Name and address of the Resident Agent:

Name: SIERRA F. SILVIA  
 No. and Street: 648 OLD WEST CENTRAL STREET  
 City or Town: FRANKLIN State: MA Zip: 02038 Country: USA

I, SIERRA F. SILVIA resident agent of the above limited liability company, consent to my appointment as the resident agent of the above limited liability company pursuant to G. L. Chapter 156C Section 12.

6. The name and business address of each manager, if any:

Title	Individual Name First, Middle, Last, Suffix	Address (no PO Box) Address, City or Town, State, Zip Code
MANAGER	SIERRA F. SILVIA	648 OLD WEST CENTRAL STREET FRANKLIN, MA 02038 USA

7. The name and business address of the person(s) in addition to the manager(s), authorized to execute documents to be filed with the Corporations Division, and at least one person shall be named if there are no managers.

Title	Individual Name	Address (no PO Box)
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First, Middle, Last, Suffix

Address, City or Town, State, Zip Code

**8. The name and business address of the person(s) authorized to execute, acknowledge, deliver and record any recordable instrument purporting to affect an interest in real property:**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> (no PO Box) Address, City or Town, State, Zip Code
REAL PROPERTY	SIERRA F. SILVIA	648 OLD WEST CENTRAL STREET FRANKLIN, MA 02038 USA

**9. Additional matters:**

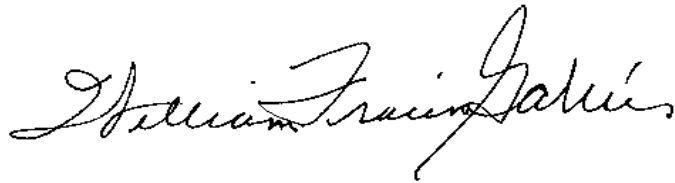
**SIGNED UNDER THE PENALTIES OF PERJURY, this 22 Day of January, 2019,**  
**SIERRA F. SILVIA**

*(The certificate must be signed by the person forming the LLC.)*

THE COMMONWEALTH OF MASSACHUSETTS

I hereby certify that, upon examination of this document, duly submitted to me, it appears that the provisions of the General Laws relative to corporations have been complied with, and I hereby approve said articles; and the filing fee having been paid, said articles are deemed to have been filed with me on:

January 22, 2019 03:06 PM

A handwritten signature in black ink, reading "William Francis Galvin". The signature is written in a cursive style with a large, prominent initial "W".

WILLIAM FRANCIS GALVIN

*Secretary of the Commonwealth*

# LICENSE TRANSACTION



## New Section 12 Restaurant All Alcoholic Beverages

**Proof Restaurant, LLC d/b/a Proof**  
862 West Central Street, 2nd Floor  
Franklin, MA 02038

Proof Restaurant, LLC d/b/a Proof is seeking approval for a New Section 12 Restaurant All Alcoholic Beverages License and to approve the manager, Beth Downing.

All Departments have signed off on this application.

**MOTION** to approve the request by Proof Restaurant, LLC d/b/a Proof for a New Section 12 Restaurant All Alcoholic Beverages License and to approve Beth Downing as the manager.

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**DATED:** \_\_\_\_\_, 2021

**VOTED:**

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

**A True Record Attest:**

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

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

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

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

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

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

McDERMOTT  
QUILTY &  
MILLER LLP

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28 STATE STREET, SUITE 802  
BOSTON, MA 02109

May 24, 2021

*Via FedEx Delivery (8148 6796 9100)*

Town Administrator's Office  
TOWN OF FRANKLIN  
355 East Central Street, 3<sup>rd</sup> Floor  
Franklin, MA 02038  
Attn: Chrissy Whelton, Assistant to the Town Administrator

**RE: Application for a New All Alcoholic Beverages Restaurant License  
Proof Restaurant, LLC d/b/a Proof  
862 West Central Street, Franklin, MA 02038**

Dear Ms. Whelton:

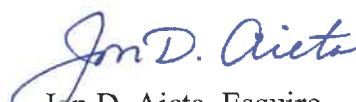
Enclosed please find the following documents in connection with Proof Restuarant, LLC's application for a New All Alcoholic Beverages Restaurant License to be exercised at 862 West Central Street, Franklin, MA 02038:

1. Monetary Transmittal Form & ABCC Payment Confirmation;
2. Application for a New License with Applicant's Statement;
3. ABCC CORI Request Form;
4. Proof of Citizenship;
5. Corporate Vote;
6. Business Entity Summary;
7. Floor Plan;
8. Lease Agreement; and
9. Resume.

Kindly assign this matter for hearing at the next available meeting before the Town Council.

Thank you for your attention to and courtesy in this matter. If you have any questions, please do not hesitate to contact me.

Very truly yours,

  
Jon D. Aieta, Esquire  
jaieta@mqmlp.com

JDA/ks



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 MAIL THIS  
 TRANSMITTAL FORM ALONG WITH  
 COMPLETED APPLICATION, AND SUPPORTING DOCUMENTS TO:

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



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="\$12 Restaurant"/>	<input type="text" value="All Alcoholic Beverages"/>	<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.

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  FEIN

DBA  Manager of Record

Street Address

Phone

Alternative Phone  Website

**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.

Total Square Footage:  Number of Entrances:  Seating Capacity:

Number of Floors:  Number of Exits:  Occupancy Number:

**4. APPLICATION CONTACT**

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

Name:  Phone:

Title:  Email:

**APPLICATION FOR A NEW LICENSE**

**5. CORPORATE STRUCTURE**

Entity Legal Structure	<input type="text" value="LLC"/>	Date of Incorporation	<input type="text" value="11/27/2019"/>
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>Beth A. Downing</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
Manager	100%	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<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	MA Resident
<input type="text"/>	<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<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	MA Resident
<input type="text"/>	<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<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	MA Resident
<input type="text"/>	<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<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	MA Resident
<input type="text"/>	<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<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

### 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

Lease

Landlord Name GlenPharmer Distillery, LLC

Landlord Phone

Landlord Address 860 West Central Street, Franklin, MA 02038

Lease Beginning Date 01/01/2020

Rent per Month \$9,000.00

Lease Ending Date 12/31/2029

Rent per Year \$108,000.00

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

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
2020	Present	Owner	Self - Proof Restaurant	N/A
2011	Present	Pharmacist	Coram Specialty Pharmacy/CVS	

### 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, Beth A. Downing the:  sole proprietor;  partner;  corporate principal;  LLC/LLP manager  
Authorized Signatory

of Proof Restaurant, LLC  
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: *Beth A. Downing*

Date: 5/20/2021

Title: Manager



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

DEBORAH B. GOLDBERG  
TREASURER AND RECEIVER GENERAL

**CORI REQUEST FORM**

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 LICENSEE)</small>	<input type="text"/>	LICENSEE NAME:	Proof Restaurant, LLC	CITY/TOWN:	Franklin
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**APPLICANT INFORMATION**

LAST NAME:	Downing	FIRST NAME:	Beth	MIDDLE NAME:	Ann
MAIDEN NAME OR ALIAS (IF APPLICABLE):	<input type="text"/>				
DATE OF BIRTH:	<input type="text"/>	ID THEFT INDEX PIN (IF APPLICABLE):	N/A		
MOTHER'S MAIDEN NAME:	<input type="text"/>	STATE LIC. ISSUED:	Massachusetts		
GENDER:	<input type="text"/>	EYE COLOR:	<input type="text"/>		
CURRENT ADDRESS:	<input type="text"/>				
CITY/TOWN:	Franklin	STATE:	MA	ZIP:	02038
FORMER ADDRESS:	<input type="text"/>				
CITY/TOWN:	<input type="text"/>	STATE:	MA	ZIP:	<input type="text"/>

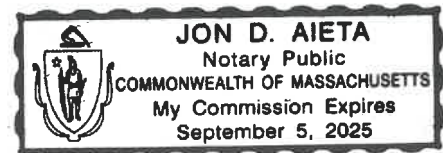
**PRINT AND SIGN**

PRINTED NAME:	Beth A. Downing	APPLICANT/EMPLOYEE SIGNATURE:	<i>Beth A. Downing</i>
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**NOTARY INFORMATION**

On this 20<sup>th</sup> day of May 2021 before me, the undersigned notary public, personally appeared Beth A. Downing  
(name of document signer), proved to me through satisfactory evidence of identification, which were MA. Driver's 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.

*Jon D. Aieta*  
NOTARY



**DIVISION USE ONLY**

REQUESTED BY:	<input type="text"/>
	<small>SIGNATURE OF CORI-AUTHORIZED EMPLOYEE</small>

The DCJ Identify Theft Index PIN Number is to be completed by those applicants that have been issued an Identify Theft PIN Number by the DCJ. 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 DCJ via mail or by fax to (617) 660-4614.

**CORPORATE VOTE**

The Board of Directors or LLC Managers of  Entity Name

duly voted to apply to the Licensing Authority of  and the City/Town

Commonwealth of Massachusetts Alcoholic Beverages Control Commission on  Date of Meeting

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

“VOTED: To authorize  Name of Person

to sign the application submitted and to execute on the Entity's behalf, any necessary papers and do all things required to have the application granted.”

“VOTED: To appoint  Name of Liquor License Manager

as its manager of record, and hereby grant him or her with full authority and control of the premises described in the license and authority and control of the conduct of all business therein as the licensee itself could in any way have and exercise if it were a natural person residing in the Commonwealth of Massachusetts.”

A true copy attest,

For Corporations ONLY

A true copy attest,



Corporate Officer /LLC Manager Signature

Corporation Clerk's Signature

Beth A. Downing, President  
(Print Name)

\_\_\_\_\_  
(Print Name)



**The Commonwealth of Massachusetts  
William Francis Galvin**

Minimum Fee: \$500.00

Secretary of the Commonwealth, Corporations Division  
One Ashburton Place, 17th floor  
Boston, MA 02108-1512  
Telephone: (617) 727-9640

**Certificate of Organization**

(General Laws, Chapter )

**Identification Number:**

1. The exact name of the limited liability company is: PROOF RESTAURANT, LLC

**2a. Location of its principal office:**

No. and Street: 860 WEST CENTRAL STREET  
City or Town: FRANKLIN State: MA Zip: 02038 Country: USA

**2b. Street address of the office in the Commonwealth at which the records will be maintained:**

No. and Street: 860 WEST CENTRAL STREET  
City or Town: FRANKLIN State: MA Zip: 02038 Country: USA

**3. The general character of business, and if the limited liability company is organized to render professional service, the service to be rendered:**

THE GENERAL CHARACTER OF THE BUSINESS OF THE LIMITED LIABILITY COMPANY IS TO OWN AND OPERATE A FULL SERVICE RESTAURANT AND TO ENGAGE IN ALL ACTIVITIES AND RENDER ALL SERVICES RELATED THERETO. THE LIMITED LIABILITY COMPANY SHALL HAVE THE AUTHORITY TO ENGAGE IN ANY LAWFUL BUSINESS, TRADE, PURPOSE OR ACTIVITY PERMITTED BY THE MASSACHUSETTS LIMITED LIABILITY COMPANY ACT.

**4. The latest date of dissolution, if specified:**

**5. Name and address of the Resident Agent:**

Name: BETH A. DOWNING  
No. and Street: 860 WEST CENTRAL STREET  
City or Town: FRANKLIN State: MA Zip: 02038 Country: USA

I, **BETH A. DOWNING** resident agent of the above limited liability company, consent to my appointment as the resident agent of the above limited liability company pursuant to G. L. Chapter 156C Section 12.

**6. The name and business address of each manager, if any:**

Title	Individual Name First, Middle, Last, Suffix	Address (no PO Box) Address, City or Town, State, Zip Code
MANAGER	BETH A. DOWNING	860 WEST CENTRAL STREET FRANKLIN, MA 02038 USA

**7. The name and business address of the person(s) in addition to the manager(s), authorized to execute documents to be filed with the Corporations Division, and at least one person shall be named if there are no managers.**

Title	Individual Name First, Middle, Last, Suffix	Address (no PO Box) Address, City or Town, State, Zip Code
SOC SIGNATORY	BETH A. DOWNING	860 WEST CENTRAL STREET FRANKLIN, MA 02038 USA

**8. The name and business address of the person(s) authorized to execute, acknowledge, deliver and record any recordable instrument purporting to affect an interest in real property:**

Title	Individual Name First, Middle, Last, Suffix	Address (no PO Box) Address, City or Town, State, Zip Code
REAL PROPERTY	BETH A. DOWNING	860 WEST CENTRAL STREET FRANKLIN, MA 02038 USA

**9. Additional matters:**

**SIGNED UNDER THE PENALTIES OF PERJURY, this 27 Day of November, 2019,  
JON D. AIETA, ESQ., MCDERMOTT, QUILTY & MILLER LLP**

*(The certificate must be signed by the person forming the LLC.)*

THE COMMONWEALTH OF MASSACHUSETTS

I hereby certify that, upon examination of this document, duly submitted to me, it appears that the provisions of the General Laws relative to corporations have been complied with, and I hereby approve said articles; and the filing fee having been paid, said articles are

deemed to have been filed with me on:

November 27, 2019 12:29 PM

A handwritten signature in cursive script that reads "William Francis Galvin". The signature is written in black ink and is centered on the page.

WILLIAM FRANCIS GALVIN

*Secretary of the Commonwealth*

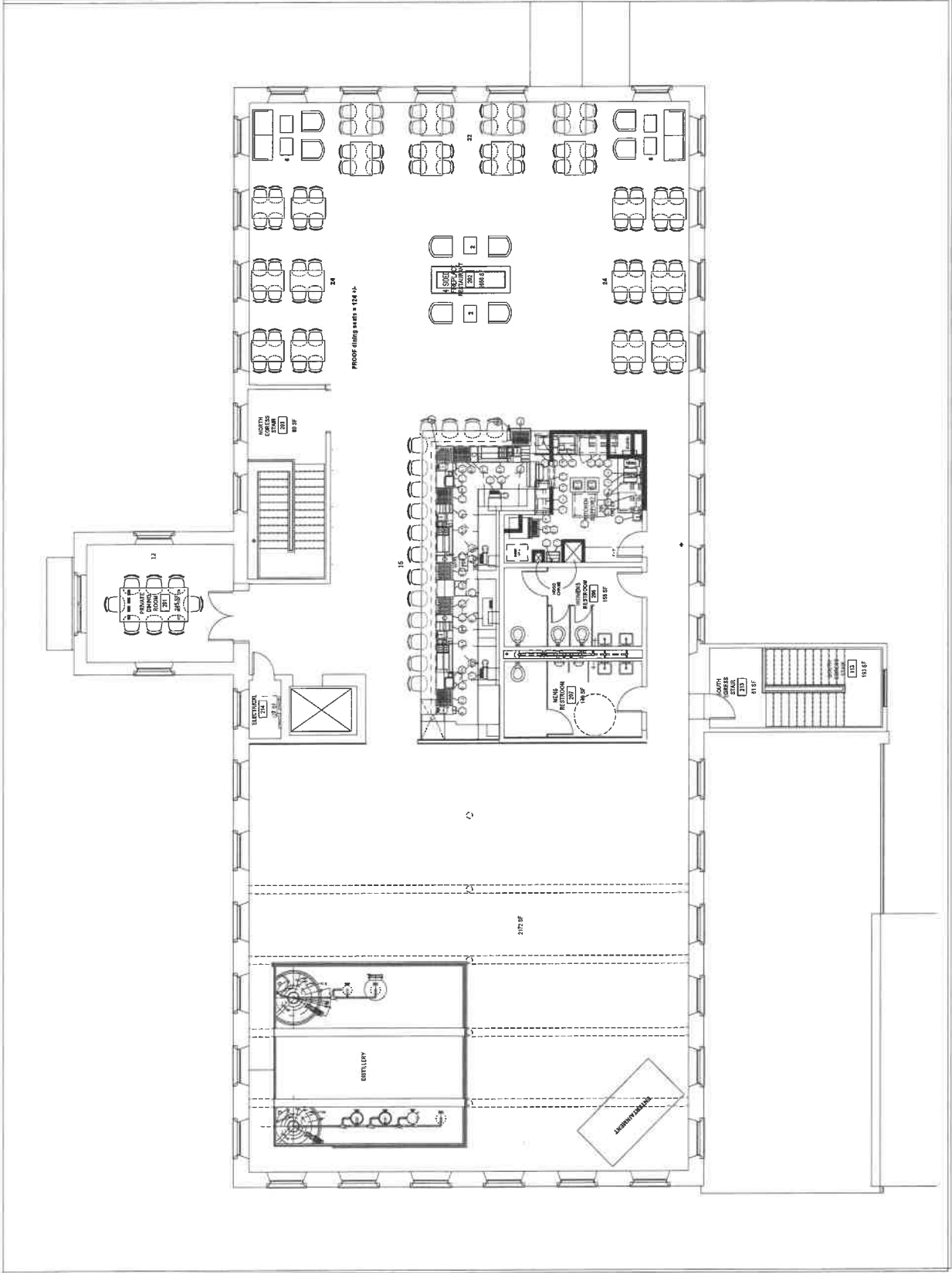
**PROOF**

862 West Central  
Street, Franklin,  
MA 02038

2nd FLOOR SEATING PLAN

**A-101.00**

3/16" = 1'-0"





# BETH DOWNING

## OBJECTIVE

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Organized, enthusiastic, self-starter seeks opportunity to use clinical expertise and excellent customer service skills, both internal and external, to promote customer-centric, patient-focused, and value-driven results.

## EXPERIENCE

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**Jan 2020 – Present**

**GlenPharmer Distillery**

**Franklin, MA**

*Vice President / Senior Manager*

- Oversees hiring and management of employees
- Oversees day-to-day operations of the Tasting Room/Restaurant
- Manages purchasing of all retail merchandise
- Assists with food and beverage menu development
- Engages with customers to ensure a delightful guest experience

**Jan 2008 – Present**

**Coram/CVS Health**

**Norwood, MA**

*Clinical Pharmacist*

- Demonstrates reliability, flexibility, and emotional intelligence and is sought after by colleagues as the “go to” person when issues arise
- Supervises clinical support staff in managing home infusion patients
- Assesses parenteral nutrition admixtures with authority to approve formulas
- Determines drug stability and compatibility for intravenous medication orders including parenteral nutrition, antibiotics, chemotherapy, hydration, inotropes, and pain management
- Performs ongoing laboratory monitoring and assessments for patients on parenteral nutrition, antibiotics, chemotherapy, hydration, inotropes, and pain management.
- Mentors pharmacists and technicians in clinical management of patients on IV therapies
- Routine telephone communications with physicians, nurses, patients, and caregivers to create patient specific care plans while on IV therapy
- Routine interaction with prescribers, liaisons, and VNA’s regarding drug interactions, dosage adjustment and order clarification

**Mar 1996 – Jan 2006**

**McClelland Health Systems, an Omnicare Company**

**Springfield, MA**

*Co-Owner & Pharmacist Manager*

- Trained and supervised pharmacists and technicians in intravenous admixture technique
- Determined drug stability and compatibility for intravenous medication orders including parenteral nutrition, antibiotics, chemotherapy, hydration, inotropes, and pain management for home care and long term care patients
- Routine telephone communications with physicians, nurses, patients, and caregivers to create patient specific care plans while on IV therapy
- Routine interaction with prescribers, VNA’s and long term care nursing staff regarding drug interactions, dosage adjustments, order clarification and formulary compliance

Beth Downing (continued)

**May 1990 – Jan 1996**

**North Adams Regional Hospital**

**North Adams, MA**

*Pharmacist*

- Performed all functions of dispensing pharmacist including supervising technicians, order entry, order verification and admixture orders
- Participated in various multidisciplinary committees on behalf of pharmacy department
- Routine interaction with physicians and nurses regarding drug interactions, dosage adjustments, order clarification and formulary compliance

**EDUCATION**

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Bachelor of Science in Pharmacy, Purdue University

May 1990

**CERTIFICATION**

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Board Certified Nutrition Support Pharmacist

Dec 2011

- Board of Pharmacy Specialties

**INTERESTS**

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Cycling, fashion, design/decorating, reading, cooking

# Town of Franklin

355 East Central Street  
Franklin, Massachusetts 02038-1352



Phone: (508) 520-4949  
[www.franklinma.gov](http://www.franklinma.gov)

OFFICE OF THE TOWN ADMINISTRATOR

June 18, 2021

**To:** Town Council  
**From:** Jamie Hellen, Town Administrator  
**RE: Open Meeting Law Complaint**

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On Tuesday June 8, 2021, the Town received a formal Open Meeting Law Complaint from Patrick Higgins from the Town of Swansea. The complaint was regarding the June 9, 2021 Town Council meeting where there were minutes up for approval from the April 7th, April 14th, May 5th, and May 19th, 2021 meetings. The complaint was brought about because the minutes were not accepted within three meetings or 30 days of the meeting date (whichever is later) as required by state regulation 940 CMR 29.11.

I have attached the Town's formal response to Mr. Higgins and have copied the Division of Open Government within the Attorney General's office. It has been a common practice for the Town to forgo minutes approvals and other non-budget related agenda items during the budget hearings. As all of you know, the Town approves minutes swiftly, usually at the following meeting, posts them online and produces some of the most thorough minutes of any public body due to the incredible work of Judith Lizardi. Videos also exist of all of our meetings for archival live streams. Our standard practices are very strong and transparent.

We will revise this practice to include the approval of minutes on the budget hearing agendas in upcoming years. Furthermore, with the assistance of the Town Clerk's Office, the staff will send a memo to all town boards and committees reminding them of this important state regulation.

If you have any additional questions please feel free to ask and we look forward to the discussion next week.



# OPEN MEETING LAW COMPLAINT FORM

Office of the Attorney General  
One Ashburton Place  
Boston, MA 02108

Please note that all fields are required unless otherwise noted.

## Your Contact Information:

First Name: Patrick Last Name: Higgins

Address: \_\_\_\_\_

City: Swansea State: MA Zip Code: 02777

Phone Number: \_\_\_\_\_ Ext. \_\_\_\_\_

Email: \_\_\_\_\_

Organization or Media Affiliation (if any): Patrick Higgins and Associates

Are you filing the complaint in your capacity as an individual, representative of an organization, or media?

(For statistical purposes only)

Individual  Organization  Media

## Public Body that is the subject of this complaint:

City/Town  County  Regional/District  State

Name of Public Body (including city/town, county or region, if applicable): Franklin Town Council

Specific person(s), if any, you allege committed the violation: All members

Date of alleged violation: 06/09/2020

**Description of alleged violation:**

Describe the alleged violation that this complaint is about. If you believe the alleged violation was intentional, please say so and include the reasons supporting your belief.

Note: This text field has a maximum of 3000 characters.

The Franklin Town Council violated the open meeting law as follows:  
1. Did not accept their minutes within 3 meetings or 30 days, whichever is later. The agenda for their June 9, 2020 meeting (attached hereto) reflect consideration of the minutes from a. April 07, 2021; b. April 14, 2021; c. May 05, 2021; c. May 19, 2021

What action do you want the public body to take in response to your complaint?

Note: This text field has a maximum of 500 characters.

Learn and comply with the open meeting law.

**Review, sign, and submit your complaint**

**I. Disclosure of Your Complaint.**

**Public Record.** Under most circumstances, your complaint, and any documents submitted with your complaint, is considered a public record and will be available to any member of the public upon request.

**Publication to Website.** As part of the Open Data Initiative, the AGO will publish to its website certain information regarding your complaint, including your name and the name of the public body. The AGO will not publish your contact information.

**II. Consulting With a Private Attorney.**

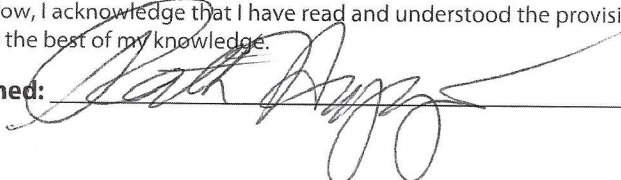
The AGO cannot give you legal advice and is not able to be your private attorney, but represents the public interest. If you have any questions concerning your individual legal rights or responsibilities you should contact a private attorney.

**III. Submit Your Complaint to the Public Body.**

The complaint must be filed first with the public body. If you have any questions, please contact the Division of Open Government by calling (617) 963-2540 or by email to [openmeeting@state.ma.us](mailto:openmeeting@state.ma.us).

By signing below, I acknowledge that I have read and understood the provisions above and certify that the information I have provided is true and correct to the best of my knowledge.

Signed: \_\_\_\_\_

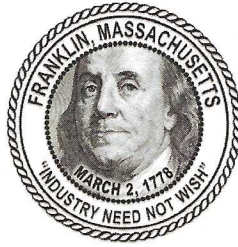


Date: 06/07/2021

For Use By Public Body  
Date Received by Public Body:

For Use By AGO  
Date Received by AGO:





## FRANKLIN TOWN COUNCIL

### Agenda & Meeting Packet

June 9, 2021

Meeting will be held at the **Municipal Building**  
2nd floor, Council Chambers  
355 East Central Street  
**7:00 PM**

The public will be permitted to enter the building to participate in person.  
**Residents are encouraged to attend and participate via the "ZOOM" Platform.**

**A NOTE TO RESIDENTS:** Due to the continued concerns regarding the COVID-19 virus we encourage residents to participate via the ZOOM platform. In an effort to ensure citizen engagement and comply with open meeting law regulations, citizens will be able to dial into the meeting using the provided phone number (Cell phone or Landline Required) OR citizens can participate by clicking on the attached [link](#) (Phone, Computer, or Tablet required). The attached link and phone number will be active for the duration of the meeting for citizens to ask questions/voice concerns. If residents are just interested in watching the meeting it will also be [live-streamed by Franklin TV](#) and shown on Comcast Channel 11 and Verizon Channel 29.

- **Link to access meeting:** June 9, 2021 Town Council Meeting Link [HERE](#) -- Then click "Open Zoom"
  - Or copy and paste this URL into your browser:  
<https://zoom.us/j/99311811109?pwd=Q3NpRjlJUU5WVWN6bnFZd3M2aUtUUT09>
  - **Call-In Phone Number:** Call 1-646-558-8656 and enter Meeting ID # **993 1181 1109** --Then press #
  - **Passcode:** 157187

---

### 1. ANNOUNCEMENTS FROM THE CHAIR

- a. *This meeting is being recorded by Franklin TV and shown on Comcast channel 11 and Verizon Channel 29. This meeting may be recorded by others.*
- b. *Chair to identify Council Members participating remotely*

### 2. CITIZEN COMMENTS

- a. *Citizens are welcome to express their views for up to five 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

- a. April 07, 2021
- b. April 14, 2021
- c. May 05, 2021
- d. May 19, 2021

#### 4. PROCLAMATIONS/RECOGNITIONS

- a. Proclamation: Franklin High School BALTS
- b. Proclamation: Police Department, David Mellor

#### 5. APPOINTMENTS - *None Scheduled*

#### 6. HEARINGS - 7:10pm

- a. Chapter 61A, Town's Right of First Refusal to Purchase Approx. 70 Acres of Land off Maple Street approved as "Maple Hill" Definitive Residential Subdivision
  - i. Cover Memo and Purchase & Sale Agreement: Notice of intent to sell land for residential use off Maple Street
  - ii. [Open Space Presentation](#) - April 6<sup>th</sup>, 2021, Community Preservation Committee Meeting
  - iii. [2016 Town of Franklin Open Space Plan](#)

#### 7. LICENSE TRANSACTIONS

- a. La Cantina Winery, New Section 19C Farmer Brewery License & License Modification to Combine existing 19B and New 19C license to create a 19H Farmer Winery/Brewery License, 355 & 357 Union Street, Franklin, MA 02038
- b. Table and Vine, License Modification - Change of Manager and Stock Transfer, 348 East Central Street

#### 8. PRESENTATIONS/DISCUSSIONS - *None Scheduled*

#### 9. SUBCOMMITTEE REPORTS

- a. Capital Budget Subcommittee
- b. Budget Subcommittee
- c. Economic Development Subcommittee

#### 10. LEGISLATION FOR ACTION

- a. Resolution 21-23: FY21 Capital Plan Round 2 (**Motion to Approve Resolution 21-23 - Majority Vote**)
- b. Resolution 21-30: Authorization for Intermunicipal Agreement with the Town of Bellingham to Supply Water to Private Franklin Residential Property Located at 425 Prospect Street (**Motion to Approve Resolution 21-30 - Majority Vote**)
- c. Resolution 21-31: Gift Acceptance - Veterans' Services, \$985 (**Motion to Approve Resolution 21-31 - Majority Vote**)
- d. Resolution 21-32: Cable Funds in Support of PEG Service and Programming per MGL Ch. 44, §53F3/4 (**Motion to Approve Resolution 21-32 - Majority Vote**)
- e. Bylaw Amendment 21-873: Chapter 139, Sewer Use Regulation Update - Second Reading (**Motion to Adopt Bylaw Amendment 21-873 - Majority Roll Call Vote**)
- f. Zoning Bylaw Amendment 21-872: To Amend The Franklin Town Code At Chapter 185, Section 3, Definitions, Tasting Room - First Reading (**Motion to move Zoning Bylaw Amendment 21-872 to a second reading - Majority Roll Call Vote**)

#### 11. TOWN ADMINISTRATOR'S REPORT

#### 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*





The Commonwealth of Massachusetts  
Office of the Attorney General  
One Ashburton Place  
Boston, Massachusetts 02108

## OPEN MEETING LAW COMPLAINT FORM

### Instructions for completing the Open Meeting Law Complaint Form

The Attorney General's Division of Open Government interprets and enforces the Open Meeting Law, Chapter 30A of the Massachusetts General Laws, Sections 18-25. Below is the procedure for filing and responding to an Open Meeting Law complaint.

#### Instructions for filing a complaint:

- o Fill out the attached two-page form completely. Sign and date the second page. File the complaint with the public body within 30 days of the alleged violation. If the violation was not reasonably discoverable at the time it occurred, you must file the complaint within 30 days of the date the violation was reasonably discoverable. A violation that occurs during an open session of a meeting is reasonably discoverable on the date of the meeting.
- o To file the complaint:
  - o For a local or municipal public body, you must submit a copy of the complaint to the chair of the public body AND to the municipal clerk.
  - o For all other public bodies, you must submit a copy of the complaint to the chair of the public body.
  - o Complaints may be filed by mail, by email, or by hand. Please retain a copy for your records.
- o If the public body does not respond within 14 business days and does not request an extension to respond, contact the Division for further assistance.

#### Instructions for a public body that receives a complaint:

- o The chair must disseminate the complaint to the members of the public body.
- o The public body must meet to review the complaint within 14 business days (usually 20-22 calendar days).
- o After review, but within 14 business days, the public body must respond to the complaint in writing and must send the complainant a response and a description of any action the public body has taken to address the allegations in the complaint. At the same time, the body must send the Attorney General a copy of the complaint and a copy of the response. The public body may delegate this responsibility to an individual member of the public body, its counsel, or a staff member, but only after the public body has met to review the complaint.
- o If a public body requires more time to review the complaint and respond, it may request an extension of time for good cause by contacting the Division of Open Government.

#### Once the public body has responded to the complaint:

- o If you are not satisfied with the public body's response to your complaint, you may file a copy of the complaint with the Division by mail, by email, or by hand, but only once you have waited for 30 days after filing the complaint with the public body. Mail may be sent to: The Division of Open Government, Office of the Attorney General, One Ashburton Place - 20<sup>th</sup> Floor, Boston, MA 02108. Emails may be sent to: [openmeeting@state.ma.us](mailto:openmeeting@state.ma.us).
- o When you file your complaint with the Division, please include the complaint form and all documentation relevant to the alleged violation. You may wish to attach a cover letter explaining why the public body's response does not adequately address your complaint.
- o The Division will not review complaints filed with us more than 90 days after the violation, unless we granted an extension to the public body or you can demonstrate good cause for the delay.

If you have questions concerning the Open Meeting Law complaint process, we encourage you to contact the Division of Open Government by phone at (617) 963-2540 or by email at [openmeeting@state.ma.us](mailto:openmeeting@state.ma.us).



# Town of Franklin

355 East Central Street  
Franklin, Massachusetts 02038-1352



Phone: (508) 520-4949  
[www.franklinma.gov](http://www.franklinma.gov)

OFFICE OF THE TOWN ADMINISTRATOR

June 18, 2021

Mr. Patrick Higgins  
PO Box 24  
Swansea, MA 02777

**RE: Franklin Town Council - Formal Open Meeting Law Complaint**

Dear Mr. Higgins:

The Franklin Town Council received your formal Open Meeting Law Complaint on June 8th, 2021. I am writing to fulfill the Town's obligation to respond to your complaint.

As you know, this complaint came about because the Town Council did not accept their minutes within 3 meetings or 30 days of the meeting date for the meetings stated in your complaint, regardless of the fact they were all approved at the June 9th meeting.

As you can see from the Town Council's agenda history, the Town Council is very diligent about approving meeting minutes within a month, many times at their next meeting. Our meeting minutes are detailed, comprehensive and always posted online at the Town Council archive. The Town believes it has a high level of transparency for meeting minutes. We have also expanded to include an archive of meetings in live-stream format at Franklin TV to ensure maximum access to public information.

As past practice indicates, the Town Council has avoided including any non-budgetary related action items at its annual budget hearings as much as possible. These budget hearings are typically back to back evenings the week prior to the Memorial Day holiday. Those hearings can be lengthy and we have avoided any other materials to the best of our ability - with very rare exceptions. That said, due to your complaint, the Town will use those meetings in the future to approve meeting minutes as part of our regular diligence according to state regulation 940 CMR 29.11.

Furthermore, with the assistance of the Franklin Town Clerk's Office, I will have the Town Administrator send a memorandum out to all town boards and committees reminding them of state regulation 940 CMR 29.11 and the requirement to approve meeting minutes within 3 meetings or 30 days.

I hope this satisfies your complaint. Do not hesitate to contact my office if you have any questions at 508-520-4949.

Sincerely,

Thomas D. Mercer, Chair  
Franklin Town Council

Cc: Division of Open Government, Attorney General's Office

# Town of Franklin

355 East Central Street  
Franklin, Massachusetts 02038-1352



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

OFFICE OF THE TOWN ADMINISTRATOR

June 18, 2021

**To:** Town Council  
**From:** Jamie Hellen, Town Administrator

**RE: Resolution 21-33: Recreation Department Fletcher Fund Expenditures**

The Recreation Advisory Committee and the Finance Committee both unanimously approved the request for \$93,677 to be taken out of the A.B. Fletcher Trust Fund for improvements to the recreation fields. Council appropriation approval is required, regardless of the fact the Fletcher Trust is under the care of the Recreation Advisory Committee.

A breakdown of these expenditures is as follows:

Softball	Remington Jefferson Field	Batting Tunnel	\$ 5,120.00
Softball	Pisani Field	Flag Pole and Flag	427.00
Softball	Pisani Field	Bullpen	3,200.00
Softball	Pisani Field	2 Announcer Stands	12,800.00
Baseball	Remington Jefferson Field	Foul Poles	899.00
Baseball	Remington Jefferson Field	Batting Tunnel	4,860.00
Baseball	Remington Jefferson Field	Storage Container	2,700.00
Baseball	Dacey Field	Batting Tunnel	4,860.00
Baseball	Dacey Field	8 Hitting Nets and Tees	2,648.00
Lacrosse	Beaver Pond Field	Press Box	55,000.00
Football	Franklin High Field	Cheerleading Trainers	241.00
Football	Franklin High Field	Helmet Racks	<u>922.00</u>
			\$93,677.00

If you have any additional questions please feel free to ask and we look forward to the discussion next week.



**TOWN OF FRANKLIN**  
**RESOLUTION 21-33**

**EXPENDITURE:** RECREATION DEPT. EXPENSES FLETCHER FUND

**TOTAL REQUESTED:** \$93,677

**PURPOSE:** The Recreation Advisory Committee voted to approve the following expenses for improvements to the recreation fields from the A.B. Fletcher Trust Fund, current balance \$261,863.

Softball	Remington Jefferson Field	Batting Tunnel	\$5,120.00
Softball	Pisani Field	Flag Pole and Flag	427.00
Softball	Pisani Field	Bullpen	3,200.00
Softball	Pisani Field	2 Announcer Stands	12,800.00
Baseball	Remington Jefferson Field	Foul Poles	899.00
Baseball	Remington Jefferson Field	Batting Tunnel	4,860.00
Baseball	Remington Jefferson Field	Storage Container	2,700.00
Baseball	Dacey Field	Batting Tunnel	4,860.00
Baseball	Dacey Field	8 Hitting Nets and Tees	2,648.00
Lacrosse	Beaver Pond Field	Press Box	55,000.00
Football	Franklin High Field	Cheerleading Trainers	241.00
Football	Franklin High Field	Helmet Racks	<u>922.00</u>
			\$93,677.00

**MOTION:**

Be It Moved and Voted by the Town Council that the sum of Ninety Three-Thousand Six-Hundred Seventy-Seven Dollars (\$93,677) be expended from the A.B. Fletcher Trust Fund by the Recreation Director for the purpose of providing funding for the improvements as listed above.

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

**FINANCE COMMITTEE ACTION**

Meeting Date: June 16, 2021                      Vote: 9-0 Approved                      Recommended Amount: \$93,677.00

DATED: \_\_\_\_\_, 2021

VOTED:  
UNANIMOUS: \_\_\_\_\_  
YES: \_\_\_\_\_ NO: \_\_\_\_\_  
ABSTAIN: \_\_\_\_\_  
ABSENT: \_\_\_\_\_

A True Record Attest:

Nancy Danello, CMC  
Temporary 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](http://www.franklinma.gov)

## OFFICE OF THE TOWN ADMINISTRATOR

June 18, 2021

**To:** Town Council  
**From:** Jamie Hellen, Town Administrator

**RE: Resolution 21-34: Appropriation - Franklin Downtown Zoning and Marketing Capital Account**

---

This resolution will approve the transfer of excess FY21 appropriations to a Franklin Downtown Zoning and Marketing Capital account. A total of \$130,000 will be transferred into this account, \$110,000 will be transferred from the Library Salaries account and the remaining \$20,000 will be transferred from the Town Administrator expenses line item.

The capital account will be under the care of the Town Administrator and Community Planning Director. The purpose of these finds are for three purposes:

- To fund the long term zoning diagnostics for Downtown Franklin within ½ to 1 mile of the Downtown MBTA stop. These monies will hire MAPC to facilitate the zoning diagnostics as well as the public input process. This process will likely take up to 6-8 months as has been discussed at the EDC and Town Council meetings. We know this is a very big priority for the Council. It is the first comprehensive zoning analysis of downtown since 2003. We are hopeful the state provides financial incentives as well.
- Funds will be for implementation of the Downtown zoning diagnostic recommendations. We do not have a complete assessment of costs here, but to have a small amount of money available will be helpful as the Town moves through this process.
- The final use of funds will be for town marketing. As the last major recommendation and project from our Marketing Director, Anne Marie Tracey, the town is hoping to work with a major television and film production company (who produces the show Viewpoint with Dennis Quaid on PBS) to visit Franklin and produce elite, high quality broadcasting footage of the quality of life in Franklin. The producers of the show contacted the Town due to the quality of life as a potential fit for the series, which highlights great local communities, their signature businesses, notoriety and culture to help tell our story. Think of it like a national "Chronicle".

While the final decisions are off in the future regarding the full potential of being a feature on the series, the company will be coming to Franklin later this year to tape hours of footage of the community, some of which is guaranteed to be broadcast nationally on major networks. The additional nugget here is the hours of B-reel footage that will become the property of the Town. This footage should be of enormous value for our own marketing purposes. Anne Marie was very passionate about the potential ads. This type of footage has been a

major gap in our ability to generate marketing material. If you notice, the appropriation for this is coming from the Administrator's budget, which was being earmarked for this purpose.

I want to take this opportunity to thank Anne Marie Tracey for her incredible work over the past two years. Her success is our success. We knew it would not last forever due to her talent. She was instrumental in convincing me of the value of this project and its potential in marketing the Town to a regional, national and possibly global audience.

I am requesting a capital account for these funds as the financing of these projects will eclipse multiple fiscal years and is sound for accounting purposes, as well as good for transparency of how the Town is using its taxpayer money.

If you have any additional questions please feel free to ask and we look forward to the discussion next week.



# RESOLUTION 21-34

## APPROPRIATION: Franklin Downtown Zoning and Marketing Capital Account

**PURPOSE:** To transfer excess FY21 appropriations to the Franklin Downtown Zoning and Marketing Capital Account

<b>SOURCES:</b>	01610100 Library Salaries	\$110,000
	01123200 Town Administrator Expenses	<u>\$20,000</u>
		\$130,000

**USES:** 01950XXX Franklin Downtown Zoning and Marketing \$130,000

**MOTION:**

Be It Moved and Voted by the Town Council that the sum of One Hundred Thirty-Thousand Dollars (\$130,000) be transferred from the FY21 funding sources indicated above to the Franklin Downtown Zoning and Marketing Capital Account to be expended at the discretion of the Town Administrator including any residual funds remaining in the line item.

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

**FINANCE COMMITTEE ACTION**

Meeting Date: June 16, 2021      Vote: 9-0 Approved      Recommended Amount: \$130,000

**DATED:** \_\_\_\_\_, 2021

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

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

**A TRUE RECORD ATTEST:**

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

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

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

Nancy Danello, CMC  
Temporary Town Clerk

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

# Town of Franklin

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OFFICE OF THE TOWN ADMINISTRATOR

June 18, 2021

**To:** Town Council  
**From:** Jamie Hellen, Town Administrator

**RE: Resolution 21-35 FY21 Appropriation Transfers**

---

This resolution will approve FY21 Appropriation Transfers to cover unanticipated budgetary shortfalls. A total of \$71,000 will be transferred from the Library Salary line item (\$10k), Town Clerk Salary line item (\$14k) and the benefits Expenses line item (\$47k).

These appropriation transfers will address shortfalls in the following budget line items:

01164200	Election Expenses	\$14,000
01176200	ZBA Expenses	\$ 2,000
01196200	Central Services	\$ 5,000
01220100	Fire Salaries	<u>\$50,000</u>
		\$71,000

If you have any additional questions please feel free to ask and we look forward to the discussion next week.





**RESOLUTION 21-35**

**APPROPRIATION: Appropriation Transfers FY21**

**PURPOSE:** To transfer FY21 appropriations to cover unanticipated shortfalls as follows:

**SOURCES:**

01610100 Library Salaries	\$10,000
01161100 Town Clerk Salaries	\$14,000
01910200 Benefits Expenses	<u>\$47,000</u>
	\$71,000

**USES**

01164200 Election Expenses	\$14,000
01176200 ZBA Expenses	\$2,000
01196200 Central Services	\$5,000
01220100 Fire Salaries	<u>\$50,000</u>
	\$71,000

**MOTION**

Be It Moved and Voted by the Town Council that the sum of Seventy-One Thousand Dollars (\$71,000) be transferred from the sources indicated above to the uses indicated above in the amounts stated prior to June 30th 2021.

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

**FINANCE COMMITTEE ACTION**

Meeting Date: June 16, 2021      Vote: 9-0 Approved      Recommended Amount: \$71,000

**DATED:** \_\_\_\_\_, 2021

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

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

**A TRUE RECORD ATTEST:**

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

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

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

Nancy Danello, CMC  
Temporary Town Clerk

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

# Town of Franklin

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OFFICE OF THE TOWN ADMINISTRATOR

## Memorandum

June 16, 2021

To: Town Council  
From: Jamie Hellen, Town Administrator

**Re: Resolution 21-36: Gift Acceptance - Franklin Police Department**

---

The Franklin Police Department has received a generous donation totaling \$100 from Joan Spiegel. This donation will be allocated towards the purchase of safety and other related equipment for Franklin Police Officers as well as various Police Department Programs.

We would like to thank Mrs. Spiegel for her generous donation.

If you have any additional questions please feel free to ask.



**TOWN OF FRANKLIN  
RESOLUTION 21-36**

**Acceptance of Gift – Franklin Police Department**

**WHEREAS,** The Franklin Police Department has received one generous donation totaling \$100 to be used at the discretion of the Franklin Police Department for the purchase of safety and other related equipment and to fund departmental programs and Services.

Donation Summary:

- 1. Joan Spiegel - \$100

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

The Town Council of the Town of Franklin on behalf of the Franklin Police Department gratefully accepts this generous donation which is to be used at the discretion of the Franklin Police Department for the purchase of safety and other related equipment and to help fund departmental programs and services.

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

**DATED:** \_\_\_\_\_, 2021

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

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

**A TRUE RECORD ATTEST:**

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

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

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

**Nancy Danello, CMC  
Temporary Town Clerk**

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

# Town of Franklin

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OFFICE OF THE TOWN ADMINISTRATOR

June 18, 2021

**To:** Town Council  
**From:** Jamie Hellen, Town Administrator

**RE: Resolution 21-37 Termination of the Agreement for Veterans Services**

---

All great things must come to an end.

The Town announces that its longtime Veterans Services Officer, Dale Kurtz, has officially given me a retirement date of August 27th, 2021. His many years of dedicated service to the community, our state and our country is nothing short of heroic. There are very few words to appropriately describe the incredible work and accomplishments Mr. Kurtz has compiled through his career. I think his work speaks for itself and his impact on the Franklin community is as large as any. It's my sincere hope that the Franklin community offers him a very warm reception through the summer as his final months of leadership in the community conclude. We wish him the best of health and prosperity in his retirement and that he gets to spend as much time with his family and grandchildren as he tells me he is going to do!

As a result of Dale's retirement the Town is requesting severance in the agreement with the County of Norfolk for veterans services. The Town will no longer have shared veterans services and instead will hire a full time veterans services officer. The position will be posted next week.

If you have any additional questions please feel free to ask and we look forward to the discussion next week.



**TOWN OF FRANKLIN**

**RESOLUTION 21-37**

**Termination of Agreement for Veteran Services Between the  
Town of Franklin and the County of Norfolk**

WHEREAS, Town of Franklin (Hereinafter: "Town") entered into a written agreement with County of Norfolk (hereinafter: "County") dated October 16, 2019 (hereinafter: "Agreement") which included Town's part time employment of County Veterans Service Advocate Dale Kurtz as Town's Veterans' Services Officer and,

WHEREAS, Dale Kurtz has announced his retirement, effective August 27, 2021, and Town therefore desires to terminate Agreement, and

WHEREAS, Agreement contains a termination provision in paragraph 9 thereof which provides a process for termination which includes a vote of Town's Town Council and thirty days' written notice to County,

NOW THEREFORE, be it voted by the Franklin Town Council that:

1. The Agreement for Veteran Services Between the Town of Franklin and the County of Norfolk dated October 16, 2019 is hereby terminated, effective at 5:00 p.m. on Friday, August 27, 2021
2. The Franklin Town Administrator is directed to transmit a copy of this resolution to the County, at least thirty (30) days prior to said date, in compliance with the written notice requirement contained in paragraph 9 of Agreement.

This Resolution shall become effective in accordance with the provisions of the Town of Franklin Home Rule Charter.

**DATED:** \_\_\_\_\_, 2021

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

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

**A TRUE RECORD ATTEST:**

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

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

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

**Nancy Danello, CMC  
Temporary Town Clerk**

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

**AGREEMENT FOR VETERAN SERVICES  
BETWEEN THE TOWN OF FRANKLIN  
AND THE COUNTY OF NORFOLK**

**THIS AGREEMENT** is entered into by and between the Town of Franklin (hereafter “Franklin”) and the County of Norfolk (hereafter “County”), hereafter referred to collectively as the “Parties”, this 16th day of October 2019, as follows:

**WHEREAS**, the Parties desire to continue cooperation in the provision, on a shared basis, of veterans’ services for the benefit of the Town;

**WHEREAS**, the Town has obtained authorization for this joint undertaking as required by M.G.L. c.40, §4A pursuant to a vote of the Town Council and a vote of the County Commissioners;

**WHEREAS**, the parties acknowledge that this agreement shall take effect on January 1, 2020 and shall replace the current agreement between the parties that is set to expire on June 30, 2020; and

**NOW, THEREFORE**, the Town and County, in mutual consideration of the covenants contained herein, hereby agree as follows:

- 1. Appointment of Veterans’ Services Officer and Assistant.** The Town of Franklin, acting through its Town Administrator, shall appoint the current Norfolk County Veterans’ Service Advocate, Dale Kurtz, as the Veterans’ Services Officer (VSO) for the Town pursuant to Massachusetts General Law. The Town of Franklin, acting through its Town Administrator, shall also appoint the Norfolk County part time Veteran’s Services Assistant as support for Mr. Kurtz and the Town of Franklin for 19 hours per week.
- 2. Duties of Veterans’ Services Officer.** During the term of this agreement, Dale Kurtz, shall serve as a full time Veterans’ Services Officer or Director. With respect to the Town of Franklin, Dale Kurtz’s normal work week shall consist of thirty hours and Dale Kurtz may perform additional veterans’ services work elsewhere within or on behalf of Norfolk County.
- 3. Duties of the Veterans Services Assistant.** During the term of this agreement, the Veterans Services Assistant’s normal work week shall consist of nineteen hours and will perform veterans’ services work as directed by the Veterans’ Services Officer or Director.
- 4. Supervision.** With respect to work as the Veterans’ Services Officer for the Town of Franklin, Dale Kurtz shall be under the supervision of the Town Administrator or his



designee. With respect to other veterans' services work, Dale Kurtz shall be under the supervision of the County Director or his designee. Any disagreement arising under this provision shall be resolved by consultation of the Town Administrator, the County Director and Dale Kurtz.

5. **Compensation and Benefits.** Dale Kurtz shall continue to be an employee of the County, and the County shall continue to be solely responsible for Dale Kurtz's compensation and benefits. In no event shall this agreement be deemed to make Dale Kurtz an employee of the Town of Franklin or entitle him to receive any work-related compensation or benefits from the Town of Franklin. Three-fourths of holiday, vacation, sick and other leave time taken by Dale Kurtz pursuant to generally applicable county policy shall be deemed part of Dale Kurtz's work hours for the Town. The Veterans' Services Assistant shall be an employee of the County and the County shall be solely responsible for the Assistant's compensation and benefits. In no event shall this agreement be deemed to make the Veterans' Services Assistant an employee of the Town of Franklin or entitle the Assistant to receive any work-related compensation or benefits from the Town of Franklin.
5. **Payments to County.** Beginning on January 1, 2020, the Town shall remit to the County the sum of Five Thousand Two Hundred Thirty-Five Dollars (\$5,235) monthly during the term of this agreement. Such payment is to be made quarterly beginning July 15<sup>th</sup> and thenceforth every 90 days. Beginning in years two (FY21) and three (FY22) of this agreement, the monthly payment shall increase to Five Thousand Four Hundred Seventy Dollars (\$5,470) and Five Thousand Six Hundred Dollars (\$5,600), respectively.
6. **Hours of Work.** The Parties recognize that some variance from the normal division of time described in Paragraph 2 is expected based upon changing conditions and needs and that minor variances will not occasion any adjustment of the financial arrangements between the Town and County.
7. **Specific Agreement.** The relevant provisions of this agreement assume the availability of Dale Kurtz as a County employee qualified and available to perform the duties described herein. Should Dale Kurtz leave the employ of the County or for some reason be unable to perform the duties herein, the parties may amend this agreement by written agreement approved by the Town Council and the County Commissioners, or the parties shall take the necessary steps to terminate the agreement.
8. **Term of this Agreement.** The term of this Agreement shall begin on January, 2020 through June 30, 2022. The Agreement shall automatically renew for an additional year beginning on July 1, 2022, with the contract fee increased to Five Thousand Seven Hundred Seventy Dollars (\$5,770) per month, unless terminated as provided in Paragraph 9 below. This Agreement may be extended thereafter as the parties may agree, with such agreement approved by the Town Council and the County

Commissioners.

9. **Termination of this Agreement.** The Town, by vote of its Town Council, or the County, by vote of its Commissioners, may terminate this Agreement upon the provision of at least thirty (30) days prior written notice to the County or Town. Such notice shall state the termination date. Upon such termination, the Town shall be solely responsible for veterans' services for the benefit of the town. Upon such termination, the County shall prepare a full statement of outstanding unpaid financial obligations under this Agreement, if any, and present the same to the Town for payment within thirty (30) days thereafter.
10. **State Department of Veterans' Services.** This Agreement is intended to be in compliance with all applicable statutes, regulations and policies of the Massachusetts Department of Veterans' Services (DVS). The parties agree to work together to resolve any concerns of the DVS regarding this agreement or its implementation.
11. **Severability.** The Town and County agree that if any court of competent jurisdiction shall declare any provision of this Agreement unenforceable, the remaining provisions hereof shall not be affected and shall remain in full force and effect.
12. **Amendment.** This Agreement may be amended from time to time, but only by mutual written agreement of the Town and County approved by the Town Council and the County Commissioners.

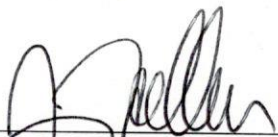
WITNESS OUR HANDS, as of the dates specified:


TOWN OF FRANKLIN,

COUNTY OF NORFOLK,

By its Town Administrator, duly-authorized:

By its Commissioner, duly authorized:

  
\_\_\_\_\_  
Town Administrator

  
\_\_\_\_\_  
Chairman

Print Name: Jamie Kelley  
Date: 12/3/19

Print Name: FRANCIS W O'BRIEN  
Date: 12/18/19



*Mark G Cecil*

Town Attorney  
(As approved to Form)

Print Name: Mark G Cecil

Date: 12-3-19

*Chris Sandini*

Town Comptroller

Print Name: Chris Sandini

Date: 12-3-19

Counsel for the County of Norfolk  
(As approved to form)

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

Norfolk County Treasurer

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

# Town of Franklin

355 East Central Street  
Franklin, Massachusetts 02038-1352



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OFFICE OF THE TOWN ADMINISTRATOR

## Memorandum

June 18, 2021

To: Town Council  
From: Jamie Hellen, Town Administrator

**Re: Resolution 21-26: Gift Acceptance - Franklin Historical Museum**

---

The Franklin Historical Museum has received one (1) exceptionally generous donation totaling \$100, in memory of Alice Vendenti, a former Historical Commission member. This donation will help to support the programs and services provided by the Historical Museum.

The donation summary is as follows:

- Franklin Mill Store, Mayflower Textiles - \$100

We would like to thank the Franklin Mill Store, Mayflower Textiles, for their generous donations.

If you have any additional questions please feel free to ask.



**TOWN OF FRANKLIN  
RESOLUTION 21-26**

**Acceptance of Gift – Franklin Historical Museum**

**WHEREAS,** The Franklin Historical Museum has received one (1) generous donation totaling \$100 to be used at the discretion of the Franklin Historical Museum to maintain and fund their programs and services.

Donation Summary:

- 1. Franklin Mill Store, Mayflower Textiles - \$100

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

The Town Council of the Town of Franklin on behalf of the Franklin Historical Museum gratefully accepts this generous donation to be used at the discretion of the Franklin Historical Museum to help fund their programs and services.

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

---

**DATED:** \_\_\_\_\_, 2021

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

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

**A TRUE RECORD ATTEST:**

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

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

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

**Nancy Danello, CMC  
Temporary Town Clerk**

---

**Glenn Jones, Clerk  
Franklin Town Council**

# Town of Franklin

355 East Central Street  
Franklin, Massachusetts 02038-1352



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[www.franklinma.gov](http://www.franklinma.gov)

OFFICE OF THE TOWN ADMINISTRATOR

June 18, 2021

**To:** Town Council

**From:** Jamie Hellen, Town Administrator

**RE: 21-874 Downtown Commercial Zoning District & Commercial Zoning District 1 Parking requirements**

---

As requested by several Councilors at recent meetings, the Council will have a discussion regarding the current parking requirements in the Downtown/Commercial Zoning District as well as the Commercial Zoning District 1. This proposal was endorsed unanimously by the Town Council EDC.

The proposal before the Council has a simple change: to require .5 parking spaces per unit from 1.5 parking spaces per unit in only these two zoning districts.

This is a referral to the Planning Board for them to conduct a public hearing.

I have included a memo from the director of Planning and Community Development, Bryan Taberner, to provide you with additional information on this subject that was worked on 3 years ago by the Council.

If you have any additional questions please feel free to ask and we look forward to the discussion next week.

# FRANKLIN PLANNING & COMMUNITY DEVELOPMENT

355 EAST CENTRAL STREET, ROOM 120  
FRANKLIN, MA 02038-1352  
TELEPHONE: 508-520-4907  
FAX: 508-520-4906

## MEMORANDUM

**TO:** JAMIE HELLEN, TOWN ADMINISTRATOR  
**FROM:** BRYAN W. TABERNER, AICP, DIRECTOR  
**RE:** PROPOSED CHANGES TO PARKING IN DOWNTOWN COMMERCIAL AND COMMERCIAL I ZONING DISTRICTS  
**CC:** FRANKLIN PLANNING BOARD, MARK CEREL, TOWN ATTORNEY; GUS BROWN, ZONING ENFORCEMENT; AMY LOVE, TOWN PLANNER; CHRISSEY WHELTON, ASSISTANT TO THE TOWN ADMINISTRATOR  
**DATE:** MAY 4, 2021

There has been recent discussion over decreasing the parking requirements within the Downtown Commercial (DC) and Commercial I (CI) zoning districts. As you requested, DPCD has drafted a proposed Zoning Bylaw Amendment that if approved would reduce the required amount of parking spaces in the DC and CI zoning districts. Attached for your review is the Zoning Bylaw Amendment 21-874.

Current parking regulations for the DC and CI zoning districts, contained in Section 185-21(B) of the Town's Zoning Bylaw, are as follows:

- 1.5 parking spaces per housing unit;
- 1 parking space per 500 square feet of gross floor area of non-residential development.

DPCD reviewed the most recent Site Plan and Special Permit applications before the Planning Board that are located within the DC and CI zoning districts and areas around these zones, and have developed the table below summarizing the related parking requirements.

Project	Address	Zoning District	Parking Required	Parking Provided
12 Residential units and 2 Commercial spaces	70 East Central St	DC	24 spaces	34 spaces
3 Residential units and 1 Commercial space	14 Ruggles St	C1	10 spaces	7 spaces
257 Residential units	Dean Ave	GRV	514 spaces	463 spaces
Franklin Food Pantry	138 East Central	C1	13 spaces	13 spaces

Please let Amy Love or me know if you have questions or require additional information.



**TOWN OF FRANKLIN  
ZONING BY-LAW AMENDMENT 21-874**

**Changes to §185-21 Parking, Loading and Driveway  
Requirements.**

**A ZONING BY-LAW TO AMEND CHAPTER 185 SECTION 21  
OF THE CODE OF THE TOWN OF FRANKLIN**

BE IT ENACTED BY THE FRANKLIN TOWN COUNCIL THAT:

Chapter 185 of the Code of the Town of Franklin is hereby amended by the following **additions** and **deletions** to §185-21. Parking, Loading and Driveway Requirements, sub-section B:

A. Parking requirements.

- 1) It is the intent of this section that adequate off-street parking must be provided within a reasonable distance to service all parking demands created by new construction, whether through new structures or through additions to existing ones, or by change of use creating higher parking demand.
- 2) Buildings, structures and land uses in existence on the effective date of these provisions are not subject to these off-street parking requirements and may be rebuilt, altered or repaired but not enlarged or changed in use without becoming subject to these requirements.
- 3) In applying for building or occupancy permits, the applicant must demonstrate that the minimum parking requirements set forth in Subsection B of this section will be met for the new demand without counting existing parking necessary for existing uses to meet these requirements.
- 4) The number of required spaces may be reduced below that determined under § 185-21B by the Planning Board for places subject to site plan review or by the Building Commissioner in other cases, upon determination that a lesser provision would be adequate for all parking needs because of such special circumstances as shared parking for uses having peak parking demands at different times, unusual age or other characteristics of site users, company-sponsored car pooling or other trip-conserving measures.

B. Parking schedule. The number of parking spaces required for a particular use shall be as follows:

- 1) In the Downtown Commercial Zoning District:
  - a) Residential dwelling units: **half (0.5) of a one and a half (1.5) parking spaces** per residential unit in a mixed use development.
  - b) Non-residential uses: one (1) space per 500 square feet of gross floor area.
- 2) In the Commercial I Zoning District:
  - a) Residential dwelling units: **half (0.5) of a one and a half (1.5) parking spaces** per residential unit.
  - b) Non-residential uses: one (1) space per 500 square feet of gross floor area.
- 3) All Other Zoning Districts:
  - a) Residential buildings:
    - i) Dwelling units, regardless of the number of bedrooms: two spaces.
    - ii) Guest houses, lodging houses and other group accommodations: one space per guest unit.
    - iii) Hotels and motels: 1 1/8 spaces per guest unit.
  - b) Nonresidential buildings: (Gross floor area is measured to the outside of the building, with no deductions for hallways, stairs, closets, thickness of walls, columns or other features.)
    - i) Industrial buildings: except warehouses: one space per 400 square feet of gross floor area.

- ii) Retailing, medical, legal and real estate offices: one space per 200 square feet of gross floor area, plus one space per separate enterprise.
- iii) Other offices and banks: one space per 250 square feet of gross floor area.
- iv) Restaurants, theaters and assembly halls:
  - (1) One space per 2.5 fixed seats.
  - (2) One space per 60 square feet of gross floor area, if seats are not fixed.
- v) Recreation facilities: 0.8 space per occupant at design capacity.
- vi) Warehouses: one space per 1,000 square feet of gross floor area.

The foregoing Zoning By-law amendment shall take effect in accordance with the Franklin Home Rule Charter and Massachusetts General Law Chapter 40A, Section 5.

**DATED:** \_\_\_\_\_, 2021

**VOTED:**

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

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

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

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

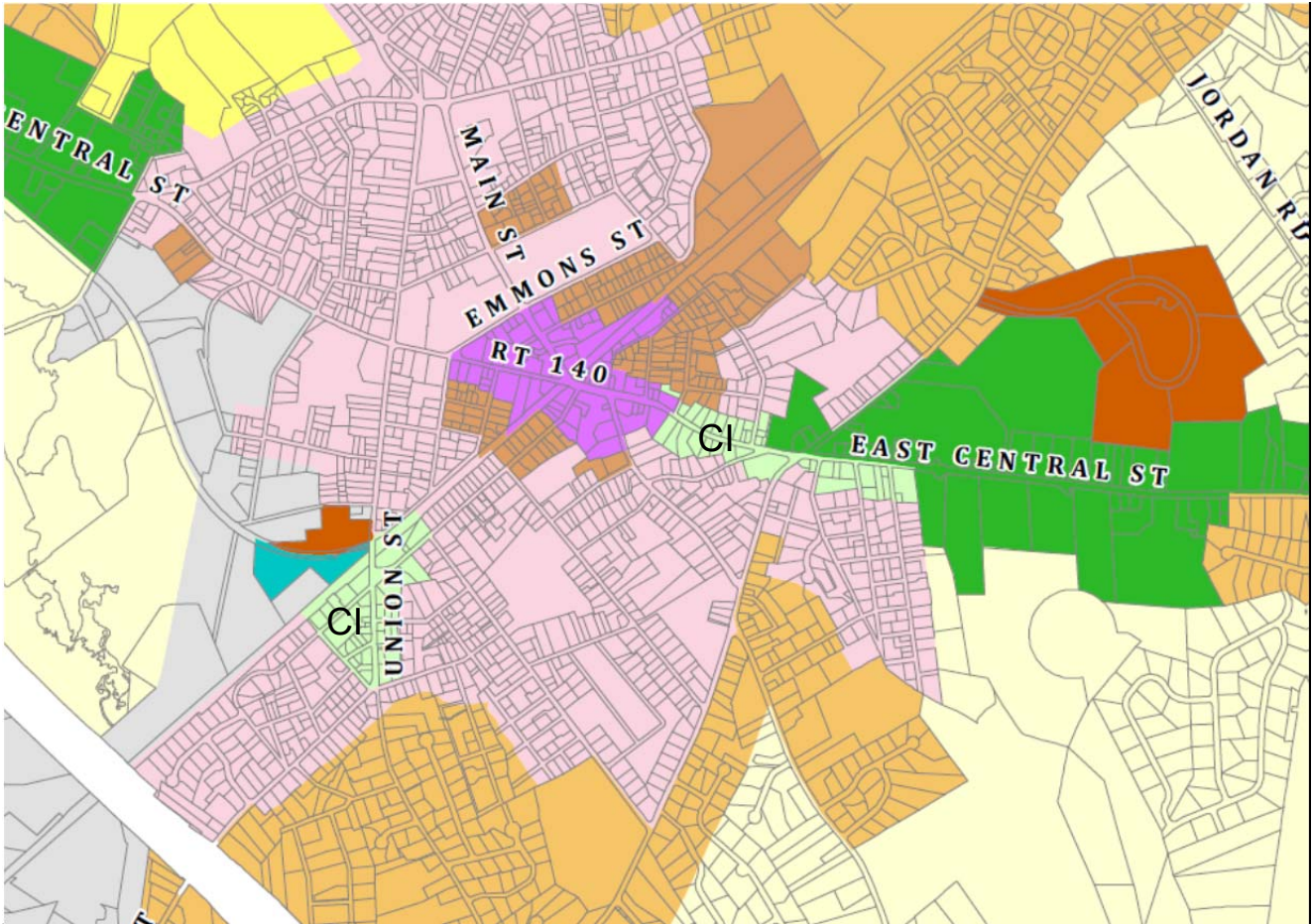
**RECUSED:** \_\_\_\_\_

**Nancy Danello, CMC  
Temporary Town Clerk**

---

**Glenn Jones, Clerk  
Franklin Town Council**

Location of Commercial I (CI) Zoning District



January 3, 2018

Business	General Residential V	Rural Business
Commercial I	Industrial	Rural Residential I
Commercial II	Office	Rural Residential II
Downtown	Residential VI	Single-Family III
Commercial District	Residential VII	Single-Family IV



# Town of Franklin

355 East Central Street  
Franklin, Massachusetts 02038-1352



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

OFFICE OF THE TOWN ADMINISTRATOR

June 18, 2021

**To:** Town Council  
**From:** Jamie Hellen, Town Administrator  
**RE: Juneteenth Holiday**

---

As you may be aware, the “Juneteenth” holiday was passed as a state holiday last year. This holiday is annually celebrated to commemorate the end of slavery in the United States and is commemorated on the anniversary date of June 19, 1865. See the [wikipedia page on the holiday here](#). The town appreciates all the hard work and commitment of our state legislature on this matter.

The Town Human Resources Director has been working with all seven unions to include this holiday in their contracts, in addition to the employment manual for all town staff. Given the short timeframe to implement due to the pandemic, the Town will officially observe this day off in June 2022 relative to the access of public buildings and staff. I want to thank all of the unions for their assistance in making this a supportive process.

As for this year, the Town library has an exhibit of suggested reading and educational materials on the holiday. It is my hope the community can come together in the future with enhanced recognition of the holiday.

As many may also note, on June 17, 2021 (yesterday) President Joe Biden signed the Juneteenth National Independence Day Act into law after Congressional approval earlier this past week. It was the first new national holiday approved since Martin Luther King, Jr Day established in 1983.

Pending outcomes in the Executive Session, I am asking that the Town Council consider approving Resolution 21- 38 to ratify collective bargaining agreements relative to the Juneteenth holiday.

I am happy to answer any questions you may have.



**TOWN OF FRANKLIN**

**RESOLUTION 21-38**

**Ratify collective bargaining agreements  
relative to Juneteenth holiday**

The Town Council hereby votes to ratify the amendment of the collective bargaining agreement for each of the following Town employee unions to add Juneteenth to the list of legal and observed holidays contained therein:

- AFSCME - AFL-CIO, Council 93, Local 1298 - Custodians
- AFSCME - AFL-CIO, Council 93, Local 1298 - Department of Public Works
- AFSCME - AFL-CIO, Council 93, Local 1298 - Public Facilities Maintenance Employees
- The Franklin Public Library Association - MLSA, Local 4928 - MFT, AFT Massachusetts, AFL-CIO
- Franklin Police Association
- Franklin Police Sergeants Union
- International Association of Firefighters, Local 2637

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

**DATED:** \_\_\_\_\_, 2021

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

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

**A TRUE RECORD ATTEST:**

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

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

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

**Nancy Danello, CMC  
Temporary Town Clerk**

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