# **License Transactions:**



Applicant: Franklin BBC, LLC d/b/a British Beer Company

d/b/a Bitusii Beel Company

The applicant is seeking a change of Manager on their alcoholic beverages license to Joscelin Carson.

**MOTION** to approve the request by Franklin BBC, LLC. for a change of Manager to Joscelin Carson.

DATED:, 20	018
	VOTED:
	UNANIMOUS
	YES NO
A True Record Attest:	ABSTAIN
	ABSENT
Teresa M. Burr	
Town Clerk	
	Glenn Jones, Clerk
	Franklin Town Council



### The Commonwealth of Massachusetts Alcoholic Beverages Control Commission

	For	Reconsideration
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# LOCAL LICENSING AUTHORITY REVIEW RECORD

00071-RS-0430			Franklin				6/	7/2018		
ABCC License Number			City/Town					Date Filed v	vith LLA	
TRANSACTION TYPE (Please che	eck all relevant transac	tions):								
New License	Change Corporate N		Pledge of	Collateral (i.e. Licen	se/Stock)			porate Structur	'e (i.e. Corp / LLC	:)
Transfer of License	Change of DBA		Change of	Class (i.e. Annual / S	easonal)	CI	nange of H	lours		
	Alteration of License	d Premises	Change of	License Type (i.e.	club / restaurant)	ls:	suance/Tra	nsfer of Stock/	New Stockho	older
Change of Beneficial Interest	Change of Location		Change of	Category (i.e. All A	lcohol/Wine, Malt;	). [] M	anagemer	nt/Operating A	greement	
APPLICANT INFORMATION									-	
Name of Licensee Franklin BB	C, LLC			D	/B/A Briti:	sh Beer C	ompany			
ADDRESS: 280 Franklin Village	e Drive	Cľ	TY/TOWN:	Franklin		STATE	MA	ZIP COD	E 02038	
Manager Joscelin Carson		·					Granted Special L	under γ .egislation? Γ	′es 🗌 No	× ×
§12 Restaurant	Annual	All Ald	coholic Be	verages				s, Chapter	N/A	_
<u>Type</u> (i.e. restaurant, package store)	<u>Class</u> (Annual or Se	-		Category and Malts / All Alco	hol)		of the A	ets of (year)		
LOCAL LICENSING AUTHORITY D	DECISION						-		***************************************	
Please indicate the decision of the Local Licensing Authority:	Approves this App	ication			se indicate v			MonSun	. 11a-1p	
If Approving With Modification	ons, please indicate belo	w what chang	es the LLA	is making:						
Please indicate if the LLA is downgrading the License	Changes to the Premise	s Description	Indoor Total	: Area Square Footage	N/A	Floo	or Number	Square Footage	Number of Ro	ooms
Category (approving only Wines	Patio/Deck/Outdoor Ar Total Square Footage	ea N/A	Numb	er of Entrances	N/A					
No	Seating Capacity	N/A	Numb	er of Exits	N/A					-
Abutters Notified: Yes	I INO IVI	te of Abutter	N/A		Date o	f tisement	N/A			
Please add any additional remarks or conditions here:								•		-
☐ Check	here if you are attaching	additional docu	ımentation			41 1 22		c	•	
The Local Licensing Authoritie	es By:					Alcoholi	Ralph Sa	Control Commis Icramone e Director	sion	
Glenn Jones	L							·Fu	w	
Clerk, Franklin Town	Council	Date APPROVE	D by LLA							



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

# RETAIL ALCOHOLIC BEVERAGES LICENSE APPLICATION MONETARY TRANSMITTAL FORM

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

ECRT CODE: RET	·A		
Please make \$200.00 paym	ent here: https://www.paybill.co	m/mass/abcc/retail/	
(PAYMENT MUST DENOTE TH	E NAME OF THE LICENSEE CORPORATION,	LLC, PARTNERSHIP, OR	
INDIVIDUAL)			Franklin BBC LLC
EPAY CONFIRMATION NUME	BER		158003
A.B.C.C. LICENSE NUMBER (IF	AN EXISTING LICENSEE, CAN BE OBTAINED	FROM THE CITY)	043000071
LICENSEE NAME Fra	nklin BBC LLC		
ADDRESS 280	Franklin Village Dr.		
CITY/TOWN Fra	nklin STATE	MA ZIP CODE	02038
TRANSACTION TYPE (Please c	heck all relevant transactions):		
Alteration of Licensed Premi	ses Cordials/Liqueurs Permit	New Officer/Director	Transfer of License
Change Corporate Name	Issuance of Stock	New Stockholder	Transfer of Stock
Change of License Type	Management/Operating Agreement	Pledge of Stock	Wine & Malt to All Alcoho
Change of Location	More than (3) §15	☐ Pledge of License	6-Day to 7-Day License
○ Change of Manager	☐ New License	Seasonal to Annual	
Other			

THE LOCAL LICENSING AUTHORITY MUST MAIL THIS TRANSMITTAL FORM ALONG WITH COMPLETED APPLICATION, AND SUPPORTING DOCUMENTS TO:

ALCOHOLIC BEVERAGES CONTROL COMMISSION 239 CAUSEWAY STREET BOSTON, MA 02241-3396

#### Your Payment Has Been Approved

License Number 043000071
License Type Retail License Filing Fee

Method Of Payment Checking
Bank Account Number \*\*\*\*9950

#### Your Confirmation Number Is 158003.

Exit Make Another Payment Pr



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

# AMENDEMENT APPLICATION FOR A CHANGE OF MANAGER

Please complete this entire application, leaving no fields blank. If field does not apply to your situation, please write N/A.

L. NAME	OF LI	CENSE	E (Business Co	ntact)	Franklin B	BC, LLC						
ABCC Lic			043000071		City/Town of Licensee Franklin							
2. APPLI	CATIO	N CON	ITACT	the perso	on who will be	e contacte	ed with any q	uestions regarding t	nis application.			
rne applic First Name				Middle:			Last Name:	ì				
Г	mploye					Prim	ary Phone:	612-910-4414				
Email: j	oscelinc	arson@bi	ritishbeer.com					· · · · · · · · · · · · · · · · · · ·				
Entity Nar	hone:	N/A			Er	nail:	Fax Numbe	er: N/A				
Alternativ			rate Headquarte	rs)					· · · · · · · · · · · · · · · · · · ·			
Street Nu		15			Street Name:	Richards I	Rd.					
City/Tow	n: Ply	mouth				State	: MA					
Zip Code	e: 023	60			Country:		US					
Mailing	Address	<u> </u>		×	Check here if y	our Mailin	g Address is th	e same as your Busines.	s Address			
Ctroot No	umber:	N/A			Street Name:	N/A						
Street M												
City/Tov	vn: N	/A		-			State:	N/A				

# APPLICATION FOR A NEW RETAIL ALCOHOLIC BEVERAGES LICENSE

The Manager Contact is required and is the individual who will have day-to-day, operational control over the liquor license.  Salutation Ms First Name Joscelin Middle Name Eliza Last Name Carson Suffix  Date of Birth    Primary Phone: 612-910-4414 Email: joscelincarson@britishbeer.com  Mobile Phone: 612-910-4414 Place of Employment British Beer Company, Franklin  Alternative Phone: 508-440-5190 Fax Number N/A  Citizenship / Residency / Background Information of Proposed Manager  Are you a U.S. Citizen? Yes No Do you have direct, indirect, or financial interest in this license? Yes No Have you ever been convicted of a state, Yes No federal, or military crime? If yes, attach an affidavit that lists your convictions with an explanation for each license to sell alcoholic beverages?   If yes, please indicate type of Interest (check all that apply)    Have you ever been Manager of Record of a Yes No Officer Sole Proprietor license to sell alcoholic beverages?   LLC Member Director Partner Landlord or proposed manager:   N/A   Partner Landlord Revenue Sharin Management Agreement Other	4. MANAGER	CONTACT									
Social Security Number    Date of Birth	The Manager Con	tact is required	and is the	ndivid	lual who will	have da	y-to-da	ay, operatio	nal control over	the liqu	or license.
Primary Phone: 612-910-4414	Salutation Ms	First Name Jo	oscelin		Middle Na	me Eliza		Last Name	Carson		Suffix
Mobile Phone: 612-910-4414 Place of Employment British Beer Company, Franklin  Alternative Phone: 508-440-5190 Fax Number N/A  Citizenship / Residency / Background Information of Proposed Manager  Are you a U.S. Citizen? Pres No Foliation of Proposed Manager  Are you a U.S. Citizen? Pres No Foliation of Proposed Manager  Have you ever been convicted of a state, Yes No Foliation of Proposed Manager If yes, attach an affidavit that lists your convictions with an explanation for each If yes, please indicate type of Interest (check all that apply) Have you ever been Manager of Record of a Yes No Godfera, or military crime? If yes, please list the licenses to sell alcoholic beverages? No Godficer Sole Proprietor Increase to sell alcoholic beverages?  If yes, please list the licenses for which you are the current or proposed manager: No/A Manager Pressent Information of Proposed Manager  Please indicate how many hours per week you intend to be on the licensed premises So  Employment Information of Proposed Manager  Please provide your employment history for the past 10 years  Date(s) Position Employer Address  Date(s) Position Employer Address  Date(s) Position Employer Address  Date(s) Position Ananager Post Office Pub 1 Ray St, N Grafton Ma 508-839-61 11-2016 - 07-2017 Manager British Beer Company 225 Shrewsbury St, Worcester Ma 508-89-61 11-2016 - 07-2017 Manager British Beer Company 120 Worcester Rd, Framingham Ma 508-879-17 04-2018 Present GM British Beer Company 280 Franklin Village Dr., Franklin Ma 508-840-51 04-2018 Present GM British Beer Company 280 Franklin Village Dr., Franklin Ma 508-840-51 N/O Date of Action Name of License State City Reason for suspension, revocation or cancellation	Social Security Nui	mber			D	ate of Bir	th E		¬		
Alternative Phone:   508-440-5190   Fax Number   N/A      Citizenship / Residency / Background Information of Proposed Manager   Are you a U.S. Citizen?   Yes   No   Do you have direct, indirect, or financial interest in this license?   Yes   No   No   No   No   No   No   No   N	Primary Phone:	612-910-4414			Ei	mail:	josce	lincarson@b	ritishbeer.com		
Citizenship / Residency / Background Information of Proposed Manager  Are you a U.S. Citizen?	Mobile Phone:	612-910-4414			Pl	lace of Er	nploym	ent British	n Beer Company, F	- - -	
Are you a U.S. Citizen?    Yes   No     Do you have direct, indirect, or financial interest in this license?   Yes   No   No   No   No   No   No   No   N	Alternative Phone	: 508-440-5190			Fa	ax Numb	er	N/A			
Have you ever been convicted of a state, refer to the proposed of the pr	Citizenship / Resi	dency / Backgro	und Inform	ation	of Proposed	<u>Manage</u>	<u>r</u>				
If yes, percentage of interest   If yes, attach an affidavit that lists your convictions with an explanation for each license to sell alcoholic beverages?   If yes, please indicate type of Interest (check all that apply)   If yes, please indicate type of Interest (check all that apply)   If yes, please indicate type of Interest (check all that apply)   If yes, please indicate type of Interest (check all that apply)   If yes, please indicate type of Interest (check all that apply)   If yes, please indicate type of Interest (check all that apply)   If yes, please indicate type of Interest (check all that apply)   If yes, please indicate type of Interest (check all that apply)   If yes, please indicate type of Interest (check all that apply)   It yes, please indicate type of Interest (check all that apply)   It yes, please indicate type of Interest (check all that apply)   It yes, please indicate type of Interest (check all that apply)   It yes, please indicate type of Interest (check all that apply)   It yes, please indicate type of Interest (check all that apply)   It yes, please indicate type of Interest (check all that apply)   It yes, please indicate type of Interest (check all that apply)   It yes, please indicate type of Interest (check all that apply)   It yes, please indicate type of Interest (check all that apply)   It yes, please indicate type of Interest (check all that apply)   It yes, please indicate type of Interest (check all that apply)   It yes, please indicate type of Interest (check all that apply)   It yes, please indicate type of Interest (check all that apply)   It yes, please indicate type of Interest (check all that apply)   It yes, please indicate type of Interest (check all that apply)   It yes, please indicate type of Interest (check all that apply)   It yes, please indicate type of Interest (check all that apply)   It yes, please indicate type of Interest (check all that apply)   It yes, please indicate type of Interest (check all that apply)   It yes, please indicate type of Interes	Are you a U.S. Citiz	en?	( Yes (	` No						( Yes	s (€ No
Stockholder   LLC Manager   LLC Manager   LLC Member   Director   Landlord   Partner   Landlord   Revenue Sharin   Management Agreement   Other      Pease indicate how many hours per week you intend to be on the licensed premises   So      Pease provide your employment history for the past 10 years   Date(s)   Position   Employer   Address   Phone     08-07-15 - 04-2016   Manager   Daddy Ryans   709 Rodeo Drive, Hudson WI   715-381-82     05-2016 - 11-2016   Manager   Post Office Pub   1 Ray St, N Grafton Ma   508-839-61     11-2016 - 07-2017   Manager   British Beer Company   225 Shrewsbury St, Worcester Ma   508-799-51     07-2017 - 04-2018   Manager   British Beer Company   120 Worcester Rd, Framingham Ma   508-879-17     04-2018 - Present   GM   British Beer Company   280 Franklin Village Dr., Franklin Ma   508-440-51     Prior Disciplinary Action of Proposed Manager   Have you ever been involved directly or indirectly in an alcoholic beverages license that was subject to disciplinary action? If yes, please complete the following: NO   Date of Action   Name of License   State   City   Reason for suspension, revocation or cancellation	federal, or military	crime?			,	h	•			erest (che	ck all that apply):
If yes, please list the licenses for which you are the <u>current</u> or <u>proposed</u> manager:    Partner			cord of a	C)	Yes (● No			] Stockholde			.C Manager
Employment Information of Proposed Manager  Please provide your employment history for the past 10 years  Date(s) Position Employer Address Phone  08-07-15 - 04-2016 Manager Daddy Ryans 709 Rodeo Drive, Hudson WI 715-381-82  05-2016 - 11-2016 Manager Post Office Pub 1 Ray St, N Grafton Ma 508-839-61  11-2016 - 07-2017 Manager British Beer Company 225 Shrewsbury St, Worcester Ma 508-799-51  07-2017 - 04-2018 Manager British Beer Company 120 Worcester Rd, Framingham Ma 508-879-17  04-2018 - Present GM British Beer Company 280 Franklin Village Dr., Franklin Ma 508-440-51  Prior Disciplinary Action of Proposed Manager  Have you ever been involved directly or indirectly in an alcoholic beverages license that was subject to disciplinary action? If yes, please complete the following: NO  Date of Action Name of License State City Reason for suspension, revocation or cancellation	for which you are	the <u>current</u>	N/A					Partner Contractua	al	☐ La	indlord evenue Sharing
Please provide your employment history for the past 10 years  Date(s) Position Employer Address Phone  08-07-15 - 04-2016 Manager Daddy Ryans 709 Rodeo Drive, Hudson WI 715-381-82  05-2016 - 11-2016 Manager Post Office Pub 1 Ray St, N Grafton Ma 508-839-61  11-2016 - 07-2017 Manager British Beer Company 225 Shrewsbury St, Worcester Ma 508-799-51  07-2017 - 04-2018 Manager British Beer Company 120 Worcester Rd, Framingham Ma 508-879-17  04-2018 - Present GM British Beer Company 280 Franklin Village Dr., Franklin Ma 508-440-51  Prior Disciplinary Action of Proposed Manager  Have you ever been involved directly or indirectly in an alcoholic beverages license that was subject to disciplinary action? If yes, please complete the following: NO  Date of Action Name of License State City Reason for suspension, revocation or cancellation	Please indicate ho	ow many hours pe	er week you	intenc	d to be on the	licensed	premis	es 50			
Date(s) Position Employer Address Phone  08-07-15 - 04-2016 Manager Daddy Ryans 709 Rodeo Drive, Hudson WI 715-381-82  05-2016 - 11-2016 Manager Post Office Pub 1 Ray St, N Grafton Ma 508-839-61  11-2016 - 07-2017 Manager British Beer Company 225 Shrewsbury St, Worcester Ma 508-799-51  07-2017 - 04-2018 Manager British Beer Company 120 Worcester Rd, Framingham Ma 508-879-17  04-2018 - Present GM British Beer Company 280 Franklin Village Dr., Franklin Ma 508-440-51  Prior Disciplinary Action of Proposed Manager  Have you ever been involved directly or indirectly in an alcoholic beverages license that was subject to disciplinary action? If yes, please complete the following: No  Date of Action Name of License State City Reason for suspension, revocation or cancellation					past 10 years						
05-2016 - 11-2016 Manager Post Office Pub 1 Ray St, N Grafton Ma 508-839-61 11-2016 - 07-2017 Manager British Beer Company 225 Shrewsbury St, Worcester Ma 508-799-51 07-2017 - 04-2018 Manager British Beer Company 120 Worcester Rd, Framingham Ma 508-879-17 04-2018 - Present GM British Beer Company 280 Franklin Village Dr., Franklin Ma 508-440-51  Prior Disciplinary Action of Proposed Manager Have you ever been involved directly or indirectly in an alcoholic beverages license that was subject to disciplinary action? If yes, please complete the following: NO  Date of Action Name of License State City Reason for suspension, revocation or cancellation					Employ	yer	A				
11-2016 - 07-2017 Manager British Beer Company 225 Shrewsbury St, Worcester Ma 508-799-51 07-2017 - 04-2018 Manager British Beer Company 120 Worcester Rd, Framingham Ma 508-879-17 04-2018 - Present GM British Beer Company 280 Franklin Village Dr., Franklin Ma 508-440-51 Prior Disciplinary Action of Proposed Manager Have you ever been involved directly or indirectly in an alcoholic beverages license that was subject to disciplinary action? If yes, please complete the following: NO  Date of Action Name of License State City Reason for suspension, revocation or cancellation	08-07-15 - 04-20	16 Man	ager		Daddy R	yans					
07-2017 - 04-2018 Manager British Beer Company 120 Worcester Rd, Framingham Ma 508-879-17 04-2018 - Present GM British Beer Company 280 Franklin Village Dr., Franklin Ma 508-440-51  Prior Disciplinary Action of Proposed Manager Have you ever been involved directly or indirectly in an alcoholic beverages license that was subject to disciplinary action? If yes, please complete the following: NO  Date of Action Name of License State City Reason for suspension, revocation or cancellation	05-2016 - 11-201	l6 Man	ager		Post Office Pub					1	
O4-2018 - Present GM British Beer Company 280 Franklin Village Dr., Franklin Ma 508-440-51  Prior Disciplinary Action of Proposed Manager  Have you ever been involved directly or indirectly in an alcoholic beverages license that was subject to disciplinary action? If yes, please complete the following: NO  Date of Action Name of License State City Reason for suspension, revocation or cancellation	11-2016 - 07-201	17 Man	Manager British			· · · · · · · · · · · · · · · · · · ·					
Prior Disciplinary Action of Proposed Manager  Have you ever been involved directly or indirectly in an alcoholic beverages license that was subject to disciplinary action? If yes, please complete the following: NO  Date of Action Name of License State City Reason for suspension, revocation or cancellation	07-2017 - 04-201	18 Man	ager		British Beer C						
Have you ever been involved directly or indirectly in an alcoholic beverages license that was subject to disciplinary action? If yes, please complete the following: <b>NO</b> Date of Action Name of License State City Reason for suspension, revocation or cancellation	04-2018 - Preser	sent GM British			British Beer C	Company		280 Frankli	n Village Dr., Franl	klin Ma	508-440-5196
Date of Action Name of License State City Reason for suspension, revocation or cancellation	Have you ever be	een involved dir	ectly or ind	ager irectly	/ in an alcoho	olic beve	rages l	icense that	was subject to d	isciplina	ry action? If
Date of Action				State	City	Reason f	or susp	ension, revo	cation or cancella	tion	
							Jajp				
											2

#### Town of Branklin

Town Administrator Tel: (508) 520-4949



Fax: (508) 520-4903

#### Manager of Record Experience Policy

The Town of Franklin requires a resume or written statement to be submitted with the application for a new alcohol license, transfer of license or change of manager, which details the proposed manager's experience serving or selling alcohol, training employees who serve or sell alcohol, supervision of employees who serve or sell alcohol and any other relevant experience.

Resumes or written statements are only required for the individual who will be the manager of record for the establishment.

I Am an experienced restaurant manager, water in the business for the last 14 years. I Storted with the British beer Company in Narmber 2016 at the Worcester Ker. British beer Company in Narmber 2016 at the Worcester Ker. Ken moving up to the framuspham location. Most recently I then moving up to the framuspham location. Most recently I then been awarded the position of the Kere at frankling prior to waking in Massachusetts, I managed a family prior to waking in this and server safe configured. I also have my I km both tips and Server safe configured. I also have my I km both tips and Server safe configured. I also have my I km both tips and Server safe configured in also have my common management, Allergen awareness and checker safe.

# **ADDITIONAL SPACE** The following space is for any additional information you wish to supply or to clarify an answer you supplied in the application. If referrencing the application, please be sure to include the number of the question to which you are referring.

# **APPLICANT'S STATEMENT**

l, Gary Sir	
	Authorized Signatory
of Frankl	in BBC, LLC Change of Manager  Transaction(s) you are applying for
(hereina	Name of the Entity/Corporation after the "Application"), to the local licensing authority (the "LLA") and the Alcoholic Beverages Control Commission (the and together with the LLA collectively the "Licensing Authorities") for approval.
I do her	eby declare under the pains and penalties of perjury that I have personal knowledge of the information submitted in the tion, and as such affirm that all statement and representations therein are true to the best of my knowledge and belief r 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 does not violate any requirement of the ABCC or other state law or local ordinances;
(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 Application information 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.
Sigr	Date: 06/07/2018
Title	e: Managing Member

# Vote of Franklin BBC , LLC

The undersigned, representing all of the members of the Franklin BBC, LLC and the managing member of the Franklin BBC, LLC hereby vote to and hereby authorize all action in connection with change of manager at the British Beer Company located at 280 Franklin Village Dr, Franklin Massachusetts from Ryan Potter to Joscelin Carson and the undersigned hereby authorize all other action in connection therewith.

Gary Simon, Member and Managing Member

Douglas Freeman, Member

Michael Fallman, Member

Date 6/12/18