TOWN OF KENNEBUNKPORT, MAINE

–INCORPORATED 1653–

Board of Selectmen Agenda
November 14, 2019
6:00 PM
Village Fire Station—32 Elm Street

1. Call to Order.

2. Approve the October 24, 2019, selectmen meeting minutes.

3. Public Forum (This is an opportunity for anyone who wants to address the Board of Selectmen with any issue that is not on the agenda.

4. Public Hearing to consider application for liquor license submitted by KHC Hotel Manager, LLC, DBA The Boathouse Waterfront Hotel, 21 Ocean Avenue.

5. Public Hearing to consider application for special amusement permit submitted by KHC Hotel Manager, LLC, The Boathouse Waterfront Hotel, 21 Ocean Avenue.

6. Public Hearing to consider application for liquor license submitted by KHC Hotel Manager, LLC, DBA The Kennebunkport Inn, 1 Dock Square.

7. Public Hearing to consider application for special amusement permit submitted by KHC Hotel Manager, LLC, DBA The Kennebunkport Inn, 1 Dock Square.

8. Public Hearing to consider application for liquor license submitted by KHC Hotel Manager, LLC, DBA Cape Arundel Inn and Resort, 208 Ocean Avenue.

9. Public Hearing to consider application for special amusement permit submitted by KHC Hotel Manager, LLC, DBA Cape Arundel Inn and Resort, 208 Ocean Avenue.

10. Public Hearing to consider application for liquor license submitted by KHC Hotel Manager, LLC, DBA Cape Arundel Inn Clubhouse, 8 Old Fort Avenue.

11. Public Hearing to consider application for special amusement permit submitted by KHC Hotel Manager, LLC, DBA Cape Arundel Inn Clubhouse, 208 Ocean Avenue.
12. Public Hearing to consider application for liquor license submitted by KHC Hotel Manager, LLC, DBA Hidden Pond, 354 Goose Rocks Road.

13. Public Hearing to consider application for special amusement permit submitted by KHC Hotel Manager, LLC, DBA Hidden Pond, 354 Goose Rocks Road.

14. Public Hearing to consider application for liquor license submitted by KHC Hotel Manager, LLC, DBA The Lodge on the Cove, 29 South Main Street.

15. Public Hearing to consider application for special amusement permit submitted by KHC Hotel Manager, LLC, DBA The Lodge on the Cove, 29 South Main Street.

16. Public Hearing to consider application for liquor license submitted by KHC Hotel Manager, LLC, DBA Tides Beach Club, 254 Kings Highway.

17. Public Hearing to consider application for special amusement permit submitted by KHC Hotel Manager, LLC, DBA Tides Beach Club, 254 Kings Highway.

18. Public Hearing to consider application for liquor license submitted by KHC Hotel Manager, LLC, DBA Yachtsman Hotel and Marina Club, 59 Ocean Avenue.

19. Public Hearing to consider application for special amusement permit submitted by KHC Hotel Manager, LLC, DBA Yachtsman Hotel and Marina Club, 59 Ocean Avenue.

20. Police awards presentation.

21. Consider Planning Board appointments.

22. Award the police cruiser bid.

23. Consider three supplemental commitments of sewer user rates for the period beginning October 31, 2019, and ending December 31, 2019.

24. Presentation of ordinance changes regarding publishing of public hearing notices for Planning Board, etc.

25. Consider tax acquired property write off.

26. Approve the FY2021 budget schedule.

27. Discussion on FY2021 budget goals.

28. Discuss meeting dates for the holidays–November 21 at 5:00 PM and December 23, 9 AM.

29. Accept $2,000 donation from the St. Ann's Episcopal Church to the nurses' general account.

30. Other Business.

31. Approve the November 14, 2019, Treasurer's Warrant.

32. Adjournment.

Agenda Item Divider

Board of Selectmen Meeting
October 24, 2019
6:00 PM
Village Fire Station—32 North Street

Minutes of the Selectmen's Meeting of October 24, 2019

Selectmen Attending: Patrick A. Briggs, Allen Daggett, Edward W. Hutchins, and Sheila Matthews-Bull

Others: Ralph Austin, Michael Claus, Bob Convery, Carol Cook, Michael Davis, Jon Dykstra, David James, Arlene McMurray, Becky Nolette, Harrison Small, Laurie A. Smith, and others

1. Call to Order.

Chair Daggett called the meeting to order at 6:01 PM.

2. Approve the October 10, 2019, selectmen meeting minutes.

Motion by Selectman Hutchins, seconded by Selectman Matthews-Bull, to approve the October 10, 2019, selectmen meeting minutes. **Vote:** 4-0.

3. Public Forum (This is an opportunity for anyone who wants to address the Board of Selectmen with any issue that is not on the agenda.

Director of Parks and Recreation Carol Cook invited everyone to attend the Zombie Dash tomorrow evening at the Conservation Trust. She said they are still hoping to get more zombies. So far, 17 have volunteered. She said 80 people are attending this event. At 5:45 PM is the family friendly run and at 6:15 PM is the extreme run, it's darker and more challenging.

4. Consider applications for Recreation Committee.

Ms. Cook said her department has added more programs, so they need more volunteers. She would like the committee to consist of seven members and she has received five applicants so far: Robert Convery, Kristen Garvin, Adam Hartwig, Debra Lennon, and Bryan Page.

Adam Hartwig and Bob Convery spoke of their interest in membership on the committee.

Motion by Selectman Hutchins, seconded by Selectman Matthews-Bull, to appoint: Robert Convery, Kristen Garvin, Adam Hartwig, Debra Lennon, and Bryan Page, to a term expiring June 2020 on the Recreation Committee. **Vote**: 4-0.

5. Award bid for revaluation update.

Assessor Becky Nolette announced she solicited bids for the town revaluation update and received two responses: KRT Appraisal– $83,000 and Vision Government Solutions–$67,000. The amount budgeted for this project is $67,000. She recommends awarding the bid to Vision Government Solutions because she already has a good relationship with them and uses their software.

Ms. Nolette said they will look at the property sold for the last two years and take pictures. The information will be more accurate if they let the inspectors come in, but residents can refuse to let them in. She stated that if the resident refuses to let the inspectors in, it will be more difficult for them to appeal their taxes.

Ms. Nolette said she will inform the public via the Town website, and will put a pamphlet together. She stated she tries to inform everyone who comes into her office.

6. Sign the municipal valuation return.

Ms. Nolette said this form is due annually on November 1, and the information is used on our state valuation.

Motion by Selectman Hutchins, seconded by Selectman Briggs, to sign the municipal valuation return. **Vote**: 4-0.

7. Award bid for Public Works F350 pickup.

Public Works Director Michael Claus said this new truck would be his. He is going to sell the Ford Ranger. He solicited bids from five dealers and received two responses: Arundel Ford–$42,893.00 and Key Ford–$32,907.00. He recommends awarding the bid to Key Ford.

Motion by Selectman Hutchins, seconded by Selectman Briggs to award the bid for the F350 pickup for public works to Key Ford at a cost of $32,907.00. **Vote**: 4-0.

8. Accept a donation of $1,000 from the Kennebunkport Resident's Association to the Public Health Department's general needs account.

Motion by Selectman Hutchins, seconded by Selectman Matthews-Bull, to accept the donation of $1,000 from the Kennebunkport Resident's Association to the Public Health Department's general needs account. **Vote**: 4-0.

9. Proposed recycling survey for November Election Day.

The Board received a recycling survey developed by the Solid Waste Committee. Mr. Claus said the compost bins have come in and the Solid Waste Committee would like to distribute them and the survey at the polls on Election Day.

Discussion followed. The Board wanted more information on the survey such as a question about a town drop off (recycling center). Since the election turnout in November is expected to be light, the Board believes there is enough time to get a new survey out to the public. Jon Dykstra added that the committee is working on education.

10. Other Business.

Attorney Ralph Austin, who represents Steve Francis of 76 Pier Road, said Mr. Francis has a property under contract set to close on November 1 and found out there is a title defect in the waterline easement of 2002. The waterline was fine, but a small triangular portion was conveyed to the town. He needs a corrective easement deed from the Town for that triangular portion that the waterline runs through. See Exhibit A.

Motion by Selectman Hutchins, seconded by Selectman Matthews-Bull, to approve the QuitClaim Deed as presented. **Vote**: 4-0.

Town Manager Laurie Smith invited everyone to attend the community music showcase at Vinegar Hill sponsored by the Heritage Housing Trust. There will be live music, dancing, and an auction on November 7, from 7:00 PM to 10:00 PM.

11. Approve the October 24, 2019, Treasurer's Warrant.

Motion by Hutchins, seconded by Selectman Briggs, to approve the October 24, 2019, Treasurer's Warrant. **Vote**: 4-0.

12. Adjournment.

Motion by Hutchins, seconded by Selectman Briggs, to adjourn.

The meeting adjourned at 6:45 PM.

Submitted by Arlene McMurray
Administrative Assistant

Space above for recording information

QUITCLAIM DEED
(Without Covenants)
Confirmatory Easement Deed

KNOW ALL PERSONS BY THESE PRESENTS, that the **INHABITANTS of the TOWN of KENNEBUNKPORT**, a body corporate and politic located in York County, State of Maine ("Grantor"), releases to **STEPHEN D. FRANCIS, Trustee of the STEPHEN D. FRANCIS TRUST**, a Virginia Trust with a mailing address of 419 Stonehouse Road, Williamsburg, VA 23188 ("Grantee"), a perpetual easement over, under and across a certain lot or parcel of land situated in the Town of Kennebunkport, in the County of York and State of Maine, lying on the easterly side of Pier Road, sometimes known as Bickford's Island Road, said easement area being more particularly bounded and described as follows:

Beginning at a point in the easterly side of said Pier Road, said point located thirty-five (35) feet Northwesterly along the Easterly sideline of said Road from the Southwesterly corner of property of the Grantor herein; running thence in an Easterly direction, at right angles to said Road, eight (8) feet, more or less, to a point in the Northeasterly sideline of the property of the Grantor herein, and at land of Susan J. Rees Trust of 2014, said point being located North 6° 29'00" West a distance of forty (40) feet, more or less, from the Southeasterly corner of property of the Grantor herein. Said easement is everywhere two (2) feet in width, and lies Northerly of the aforedescribed line.

Said easement shall be for the purposes of laying, relaying, installing, constructing, operating, and maintaining water pipes from said Pier Road to land of the Grantee herein; together with the right to enter the easement area with personnel, vehicles, materials and equipment at all reasonable times for the foregoing purposes; to trim, cut down, and remove grass, bushes, trees, and other vegetation growing on or about the easement area; and to excavate and fill the easement area, all to such extent as Grantee shall deem reasonable and necessary. Grantor further grants to Grantee such temporary rights and easements over Grantor's Property as shall be reasonable or necessary to repair or replace the waterline should such repair or replacement be prudent or necessary in Grantee's discretion.

Grantor reserves the right to use and enjoy the easement area and Grantor's Land in any manner which is not inconsistent with the rights herein conveyed, and does not interfere with the use of the said easement by the Grantee for the purposes herein named. Grantee shall, after any

entry, restore the easement area as nearly as possible to its condition immediately prior to such entry.

The parties agree that the easement shall lie one (1) foot on each side of the existing water line on Grantor's Land where now located.

The property of the Grantor over which the within easement is granted are those premises conveyed to the Grantor herein by deed from Susan J. Rees and Jeffrey Rees dated June 13, 2008 and recorded in the York County Registry of Deeds in Book 15550, Page 362 ("Grantor's Property") which was accepted by the Grantor with knowledge of the location of the existing water pipe. The property of the Grantee benefiting from the within easement are those premises conveyed to Grantee herein from Stephen D. Francis by deed dated April 7, 2000 and recorded in said Registry of Deeds in Book 9975, Page 226 ("Grantee's Property").

The purpose of this Confirmatory Easement Deed is to confirm the easement by implication, which existed at the time the Grantor took title to the property, in the same location and for the same purposes of the grant of a prior Easement Deed from Stephen LaPalme to the Grantee herein dated August 21, 2002 and recorded in the York County Registry of Deeds in Book 11961, Page 277, as affected by Partial Release of Easement Deed dated July 14, 2008 and recorded in the York County Registry of Deeds in Book 15455, Page 62, and to acknowledge and confirm that the rights and easements therein granted are appurtenant to Grantee's Property.

The Inhabitants of the Town of Kennebunkport have caused this instrument to be signed in its corporate name by _____, its municipal officers, duly authorized.

WITNESS our hands and seals as of this _____ day of October, 2019.

INHABITANTS OF THE TOWN OF KENNEBUNKPORT

_____ By: _____

_____ By: _____

_____ By: _____

_____ By: _____

STATE OF MAINE
YORK, ss. October _____, 2019

Then personally appeared before me the above named _____ _____, municipal officers of the Town of Kennebunkport, and acknowledged the foregoing to be their free act and deed in their said capacity, and the free act and deed of the Inhabitants of said municipality, before me

_____
Notary Public
Print Name:_____
Commission Expires:_____

Agenda Item Divider

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KENNEBUNKPORT TOWN CLERK

To: Laurie Smith, Town Manager
Board of Selectmen

From: Tracey O'Roak

Date: November 1, 2019

Re: Liquor License Approvals

The following NEW liquor license and special amusement permits are scheduled for public hearing at the November 14th meeting.

1. *The KHC Hotel Manager, DBA The Boathouse Waterfront Hotel*
2. *The KHC Hotel Manager, DBA The Kennebunkport Inn*
3. *The KHC Hotel Manager DBA Cape Arundel Inn & Resort*
4. *The KHC Hotel Manager DBA Cape Arundel Inn Clubhouse*
5. *The KHC Hotel Manager DBA Hidden Pond*
6. *The KHC Hotel Manager DBA The Lodge on the Cove*
7. *The KHC Hotel Manager DBA Tides Beach Club*
8. *The KHC Hotel Manager DBA Yachtsman Hotel & Marine Club*

These are all existing establishments with a new owner. Approval is recommended.

Thank you for your consideration.

P.O. Box 566, Kennebunkport, Maine, 04046 • Tel. (207) 967-4243

This application has been reviewed and approved by the following Municipal Officials, whose signatures are on file with the Town Clerk:

✓ Police Chief

✓ Fire Inspector

✓ Code Enforcement Officer

Tracy O'Rourke, Town Clerk

Boathouse 11/14/19

BUREAU OF ALCOHOL BEVERAGES AND LOTTERY OPERATIONS
DIVISION OF LIQUOR LICENSING AND ENFORCEMENT
8 STATE HOUSE STATION, AUGUSTA, ME 04333-0008 (Regular Mail)
10 WATER STREET, HALLOWELL, ME 04347 (Overnight Mail)
TEL: (207) 624-7220 FAX: (207) 287-3434
EMAIL INQUIRIES: MAINELIQUOR@MAINE.GOV

DIVISION USE ONLY	
License No:	
Class:	By:
Deposit Date:	
Amt. Deposited:	
Cash Ck Mo:	
Good SOS & DBA: YES ☐ NO ☐	

PRESENT LICENSE EXPIRES: _____

NEW application: ☑ Yes ☐ No

If business is NEW or under new ownership, indicate starting date: Nov. 26, 2019

Requested inspection (New Licensees/ Ownership Changes Only) Date : _____ Business hours: _____

INDICATE TYPE OF PRIVILEGE: ☑ MALT ☑ VINOUS ☑ SPIRITUOUS

INDICATE TYPE OF LICENSE:

☐ RESTAURANT (Class I,II,III,IV) ☐ RESTAURANT/LOUNGE (Class XI) ☐ CLASS A LOUNGE (Class X)

☐ HOTEL (Class I,II,III,IV) ☑ HOTEL, FOOD OPTIONAL (Class I-A) ☐ BED & BREAKFAST (Class V)

☐ GOLF COURSE (Class I,II,III,IV) ☐ TAVERN (Class IV) ☐ QUALIFIED CATERING

☐ OTHER: _____ ☐ SELF-SPONSORED EVENTS (QUALIFIED CATERERS ONLY)

REFER TO PAGE 3 FOR FEE SCHEDULE

ALL QUESTIONS MUST BE ANSWERED IN FULL

Corporation Name: KHC Hotel Manager LLC	**Business Name (D/B/A)** The Boathouse Waterfront Hotel
APPLICANT(S) – (Sole Proprietor) DOB:	**Physical Location:** 21 Ocean Avenue
DOB:	**City/Town** Kennebunkport **State** ME **Zip Code** 04046-6011
Address 1140 Reservoir Avenue	**Mailing Address** 1140 Reservoir Avenue **Same As Above?** ☐
City/Town Cranston **State** RI **Zip Code** 02920-6032	**City/Town** Cranston **State** RI **Zip Code** 02920-6032
Telephone Number 401 946 4600 **Fax Number** 401 942 9685	**Business Telephone Number** 207 967 8223 **Fax Number**
Federal I.D. # 84-3266632	**Seller Certificate #: or Sales Tax #:** 1203445
Email Address: mjoyal@procacciantl.com	**Website:** tpghotelsandresorts.com

1. If premise is a Hotel or Bed & Breakfast, indicate number of rooms available for transient guests: 12

2. State amount of gross income from period of last license:

ROOMS $_____ FOOD $ _____ LIQUOR $ _____

3. Is applicant a corporation, limited liability company or limited partnership? YES ☑ NO ☐
If Yes, please complete the Corporate Information required for Business Entities who are licensees.

4. Do you permit dancing or entertainment on the licensed premises? YES ☑ NO ☐

Agenda Item Divider

5

TOWNOFKENNEBUNKPORT, MAINE

– INCORPORATED 1653 –

APPLICATION
SPECIAL AMUSEMENT PERMIT FOR
DANCING AND ENTERTAINMENT

Name of Applicant KHC Hotel Manager, LLC

Residence Address 1140 Reservoir Avenue Cranston RI 02920

Home Telephone Number 401 946 4600

Name of Business Boathouse Waterfront Hotel

Business Address 21 Ocean Avenue 04046-6011

Type of Business Hotel / Restaurant

Business Telephone Number 207 967 8223

Nature of Special Amusement Live Music / Dancing

Has your liquor and or amusement license ever been denied or revoked?

Yes _____ No ✓

If yes, describe circumstances specifically. (Attach additional page if necessary)

1. Permit Fee: **$ 100.00 (payable to the Town of Kennebunkport)**
2. By making application for this permit and signing this application form, I acknowledge that I am familiar with the rules and regulations governing this permit.

Signature of Applicant
Printed name: Elizabeth A. Procacceanti

Agenda Item Divider

This application has been reviewed and approved by the following Municipal Officials, whose signatures are on file with the Town Clerk:

✓ Police Chief

✓ Fire Inspector

✓ Code Enforcement Officer

Tracy Okoak, Town Clerk

Kennebunkport Inn
11/14/19

BUREAU OF ALCOHOL BEVERAGES AND LOTTERY OPERATIONS
DIVISION OF LIQUOR LICENSING AND ENFORCEMENT
8 STATE HOUSE STATION, AUGUSTA, ME 04333-0008 (Regular Mail)
10 WATER STREET, HALLOWELL, ME 04347 (Overnight Mail)
TEL: (207) 624-7220 FAX: (207) 287-3434
EMAIL INQUIRIES: MAINELIQUOR@MAINE.GOV

DIVISION USE ONLY	
License No:	
Class:	By:
Deposit Date:	
Amt. Deposited:	
Cash Ck Mo:	
Good SOS & DBA: YES ☐ NO ☐	

PRESENT LICENSE EXPIRES: _____

NEW application: ☑ Yes ☐ No

If business is NEW or under new ownership, indicate starting date: Nov. 26, 2019

Requested inspection (New Licensees/ Ownership Changes Only) Date: _____ Business hours: _____

INDICATE TYPE OF PRIVILEGE: ☑ MALT ☑ VINOUS ☑ SPIRITUOUS

INDICATE TYPE OF LICENSE:

☐ RESTAURANT (Class I,II,III,IV) ☐ RESTAURANT/LOUNGE (Class XI) ☐ CLASS A LOUNGE (Class X)

☐ HOTEL (Class I,II,III,IV) ☑ HOTEL, FOOD OPTIONAL (Class I-A) ☐ BED & BREAKFAST (Class V)

☐ GOLF COURSE (Class I,II,III,IV) ☐ TAVERN (Class IV) ☐ QUALIFIED CATERING

☐ OTHER: _____ ☐ SELF-SPONSORED EVENTS (QUALIFIED CATERERS ONLY)

REFER TO PAGE 3 FOR FEE SCHEDULE

ALL QUESTIONS MUST BE ANSWERED IN FULL

Corporation Name: KHC Hotel Manager, LLC	**Business Name (D/B/A)** The Kennebunkport Inn
APPLICANT(S) (Sole Proprietor) **DOB:**	**Physical Location:** 1 Dock Square
DOB:	**City/Town** **State** **Zip Code** Kennebunkport ME 04046-0012
Address 1140 Reservoir Avenue	**Mailing Address** **Same As Above?** ☐ 1140 Reservoir Avenue
City/Town **State** **Zip Code** Cranston RI 02920-6032	**City/Town** **State** **Zip Code** Cranston RI 02920-6032
Telephone Number **Fax Number** 401 946 4000 4019429689	**Business Telephone Number** **Fax Number** 207 967 2021
Federal I.D. # 84-3266632	**Seller Certificate #: or Sales Tax #:** 1203445
Email Address: mjoyal@procaccianti.com	**Website:** tpghotelsandresorts.com

1. If premise is a Hotel or Bed & Breakfast, indicate number of rooms available for transient guests: 34

2. State amount of gross income from period of last license:

ROOMS $_____ FOOD $ _____ LIQUOR $ _____

3. Is applicant a corporation, limited liability company or limited partnership? YES ☑ NO ☐
If Yes, please complete the Corporate Information required for Business Entities who are licensees.

4. Do you permit dancing or entertainment on the licensed premises? YES ☑ NO ☐

Agenda Item Divider

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TOWNOFKENNEBUNKPORT, MAINE

– INCORPORATED 1653 –

APPLICATION
SPECIAL AMUSEMENT PERMIT FOR
DANCING AND ENTERTAINMENT

Name of Applicant KHC Hotel Manager, LLC

Residence Address 1140 Reservoir Avenue Cranston RI 02920

Home Telephone Number 401 946 4600

Name of Business Kennebunkport Inn

Business Address 1 Dock Square 04046-6092

Type of Business Hotel / Restaurant.

Business Telephone Number 207 967 2621

Nature of Special Amusement Live music

Has your liquor and or amusement license ever been denied or revoked?

Yes _____ No ✓

If yes, describe circumstances specifically. (Attach additional page if necessary)

1. Permit Fee: **$ 100.00 (payable to the Town of Kennebunkport)**
2. By making application for this permit and signing this application form, I acknowledge that I am familiar with the rules and regulations governing this permit.

Signature of Applicant

Printed name: Elizabeth A. Procacceanti

Agenda Item Divider

This application has been reviewed and approved by the following Municipal Officials, whose signatures are on file with the Town Clerk:

✓ Police Chief

✓ Fire Inspector

✓ Code Enforcement Officer

Tracy O'Rourke, Town Clerk

Cape Arundel Inn
11/14/19

(8)

BUREAU OF ALCOHOL BEVERAGES AND LOTTERY OPERATIONS
DIVISION OF LIQUOR LICENSING AND ENFORCEMENT
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TEL: (207) 624-7220 FAX: (207) 287-3434
EMAIL INQUIRIES: MAINELIQUOR@MAINE.GOV

DIVISION USE ONLY	
License No:	
Class:	By:
Deposit Date:	
Amt. Deposited:	
Cash Ck Mo:	
Good SOS & DBA: YES ☐ NO ☐	

PRESENT LICENSE EXPIRES: _____

NEW application: ☑ Yes ☐ No

If business is NEW or under new ownership, indicate starting date: Nov. 26, 2019

Requested inspection (New Licensees/ Ownership Changes Only) Date : _____ Business hours: _____

INDICATE TYPE OF PRIVILEGE: ☑ MALT ☑ VINOUS ☑ SPIRITUOUS

INDICATE TYPE OF LICENSE:

☐ RESTAURANT (Class I,II,III,IV) ☐ RESTAURANT/LOUNGE (Class XI) ☐ CLASS A LOUNGE (Class X)

☐ HOTEL (Class I,II,III,IV) ☑ HOTEL, FOOD OPTIONAL (Class I-A) ☐ BED & BREAKFAST (Class V)

☐ GOLF COURSE (Class I,II,III,IV) ☐ TAVERN (Class IV) ☐ QUALIFIED CATERING

☐ OTHER: _____ ☐ SELF-SPONSORED EVENTS (QUALIFIED CATERERS ONLY)

REFER TO PAGE 3 FOR FEE SCHEDULE

ALL QUESTIONS MUST BE ANSWERED IN FULL

Corporation Name: RLC Hotel Manager LLC	**Business Name (D/B/A)** Cape Arundel Inn & Resort
APPLICANT(S) –(Sole Proprietor) **DOB:**	**Physical Location:** 208 Ocean Avenue
DOB:	**City/Town** **State** **Zip Code** Kennebunkport ME 04046-6037
Address 1140 Reservoir Avenue	**Mailing Address** **Same As Above?** ☐ 1140 Reservoir Avenue
City/Town **State** **Zip Code** Cranston RI 02920-6032	**City/Town** **State** **Zip Code** Cranston RI 02920-6032
Telephone Number **Fax Number** 401 944 7600 401 942 9689	**Business Telephone Number** **Fax Number** 855-346-5700
Federal I.D. # 84-3266632	**Seller Certificate #:** **or Sales Tax #:** 1203445
Email Address: nigoyal@procacciantl.com	**Website:** tpghotelsandresorts.com.

1. If premise is a Hotel or Bed & Breakfast, indicate number of rooms available for transient guests: 14

2. State amount of gross income from period of last license:

ROOMS $_____ FOOD $ _____ LIQUOR $ _____

3. Is applicant a corporation, limited liability company or limited partnership? YES ☑ NO ☐
If Yes, please complete the Corporate Information required for Business Entities who are licensees.

4. Do you permit dancing or entertainment on the licensed premises? YES ☑ NO ☐

Agenda Item Divider

TOWNOFKENNEBUNKPORT, MAINE

– INCORPORATED 1653 –

APPLICATION
SPECIAL AMUSEMENT PERMIT FOR
DANCING AND ENTERTAINMENT

Name of Applicant KHC Hotel Manager, LLC

Residence Address 1140 Reservoir Avenue Cranston RI 02920

Home Telephone Number 401 946 4600

Name of Business Cape Arundel Inn

Business Address 208 Ocean Avenue 04046-4037

Type of Business Inn / Restaurant

Business Telephone Number 207 967 2125

Nature of Special Amusement Live Music / Dancing

Has your liquor and or amusement license ever been denied or revoked?

Yes _____ No ✓

If yes, describe circumstances specifically. (Attach additional page if necessary)

1. Permit Fee: **$ 100.00 (payable to the Town of Kennebunkport)**
2. By making application for this permit and signing this application form, I acknowledge that I am familiar with the rules and regulations governing this permit.

Signature of Applicant
Printed name: Elizabeth A. Procacceanti

Agenda Item Divider

10

This application has been reviewed and approved by the following Municipal Officials, whose signatures are on file with the Town Clerk:

✓ Police Chief

✓ Fire Inspector

✓ Code Enforcement Officer

Tracy ORoak, Town Clerk

Cape Arundel Clubhouse
11/14/19

(10)

BUREAU OF ALCOHOL BEVERAGES AND LOTTERY OPERATIONS
DIVISION OF LIQUOR LICENSING AND ENFORCEMENT
8 STATE HOUSE STATION, AUGUSTA, ME 04333-0008 (Regular Mail)
10 WATER STREET, HALLOWELL, ME 04347 (Overnight Mail)
TEL: (207) 624-7220 FAX: (207) 287-3434
EMAIL INQUIRIES: MAINELIQUOR@MAINE.GOV

DIVISION USE ONLY	
License No:	
Class:	By:
Deposit Date:	
Amt. Deposited:	
Cash Ck Mo:	
Good SOS & DBA: YES ☐ NO ☐	

PRESENT LICENSE EXPIRES: _____

NEW application: ☑ Yes ☐ No

If business is NEW or under new ownership, indicate starting date: November 26, 2019

Requested inspection (New Licensees/ Ownership Changes Only) Date : _____ Business hours: _____

INDICATE TYPE OF PRIVILEGE: ☑ MALT ☑ VINOUS ☑ SPIRITUOUS

INDICATE TYPE OF LICENSE:

☐ RESTAURANT (Class I,II,III,IV) ☐ RESTAURANT/LOUNGE (Class XI) ☐ CLASS A LOUNGE (Class X)

☐ HOTEL (Class I,II,III,IV) ☑ HOTEL, FOOD OPTIONAL (Class I-A) ☐ BED & BREAKFAST (Class V)

☐ GOLF COURSE (Class I,II,III,IV) ☐ TAVERN (Class IV) ☐ QUALIFIED CATERING

☐ OTHER: _____ ☐ SELF-SPONSORED EVENTS (QUALIFIED CATERERS ONLY)

REFER TO PAGE 3 FOR FEE SCHEDULE

ALL QUESTIONS MUST BE ANSWERED IN FULL

Corporation Name: KHC Hotel Manager, LLC	**Business Name (D/B/A)** Cape Arundel Inn Clubhouse
APPLICANT(S) –(Sole Proprietor) DOB:	**Physical Location:** 8 Old Fort Avenue
DOB:	**City/Town** Kennebunkport **State** ME **Zip Code** 04046-6037
Address 1140 Reservoir Avenue	**Mailing Address** 1140 Reservoir Avenue **Same As Above?** ☐
City/Town Cranston **State** RI **Zip Code** 02920-6032	**City/Town** Cranston **State** RI **Zip Code** 02920-6032
Telephone Number 401 946 4600 **Fax Number**	**Business Telephone Number** 855 346 5700 **Fax Number**
Federal I.D. # 84-3206632	**Seller Certificate #: or Sales Tax #:** 1203475
Email Address: mjoyal@procaccianti.com	**Website:** tpgHotelsandresorts.com

1. If premise is a Hotel or Bed & Breakfast, indicate number of rooms available for transient guests: 16

2. State amount of gross income from period of last license:

ROOMS $_____ FOOD $ _____ LIQUOR $ _____

3. Is applicant a corporation, limited liability company or limited partnership? YES ☑ NO ☐
If Yes, please complete the Corporate Information required for Business Entities who are licensees.

4. Do you permit dancing or entertainment on the licensed premises? YES ☑ NO ☐

Agenda Item Divider

11

TOWNOFKENNEBUNKPORT, MAINE

– INCORPORATED 1653 –

APPLICATION
SPECIAL AMUSEMENT PERMIT FOR
DANCING AND ENTERTAINMENT

Name of Applicant KHC Hotel Manager, LLC

Residence Address 1140 Reservoir Avenue, Cranston RI 02920

Home Telephone Number 401 946 4600

Name of Business Cape Arundel - Clubhouse

Business Address 208 Ocean Avenue 04046-6037

Type of Business Inn

Business Telephone Number 207 967 2125

Nature of Special Amusement Live Music / Dancing

Has your liquor and or amusement license ever been denied or revoked?

Yes _____ No ✓

If yes, describe circumstances specifically. (Attach additional page if necessary)

1. Permit Fee: **$ 100.00 (payable to the Town of Kennebunkport)**
2. By making application for this permit and signing this application form, I acknowledge that I am familiar with the rules and regulations governing this permit.

Signature of Applicant

Printed name: Elizabeth A. Procacceanti

Agenda Item Divider

(12)

This application has been reviewed and approved by the following Municipal Officials, whose signatures are on file with the Town Clerk:

✓ Police Chief

✓ Fire Inspector

✓ Code Enforcement Officer

Tracy O'Rourke, Town Clerk

Hidden Pond
11/14/19

BUREAU OF ALCOHOL BEVERAGES AND LOTTERY OPERATIONS
DIVISION OF LIQUOR LICENSING AND ENFORCEMENT
8 STATE HOUSE STATION, AUGUSTA, ME 04333-0008 (Regular Mail)
10 WATER STREET, HALLOWELL, ME 04347 (Overnight Mail)
TEL: (207) 624-7220 FAX: (207) 287-3434
EMAIL INQUIRIES: MAINELIQUOR@MAINE.GOV

DIVISION USE ONLY	
License No:	
Class:	By:
Deposit Date:	
Amt. Deposited:	
Cash Ck Mo:	
Good SOS & DBA: YES ☐ NO ☐	

PRESENT LICENSE EXPIRES: _____

NEW application: ☑ Yes ☐ No

If business is NEW or under new ownership, indicate starting date: Nov. 26, 2019

Requested inspection (New Licensees/ Ownership Changes Only) Date : _____ Business hours: _____

INDICATE TYPE OF PRIVILEGE: ☑ MALT ☑ VINOUS ☑ SPIRITUOUS

INDICATE TYPE OF LICENSE:

☐ RESTAURANT (Class I,II,III,IV) ☐ RESTAURANT/LOUNGE (Class XI) ☐ CLASS A LOUNGE (Class X)

☐ HOTEL (Class I,II,III,IV) ☑ HOTEL, FOOD OPTIONAL (Class I-A) ☐ BED & BREAKFAST (Class V)

☐ GOLF COURSE (Class I,II,III,IV) ☐ TAVERN (Class IV) ☐ QUALIFIED CATERING

☐ OTHER: _____ ☐ SELF-SPONSORED EVENTS (QUALIFIED CATERERS ONLY)

REFER TO PAGE 3 FOR FEE SCHEDULE

ALL QUESTIONS MUST BE ANSWERED IN FULL

Corporation Name: KHC Hotel Manager LLC	**Business Name (D/B/A)** Hidden Pond
APPLICANT(S) –(Sole Proprietor) DOB:	**Physical Location:** 354 Goose Rocks Road
DOB:	**City/Town** Kennebunkport **State** ME **Zip Code** 04046-5302
Address 1140 Reservoir Avenue	**Mailing Address** 1140 Reservoir Avenue **Same As Above?** ☐
City/Town Cranston **State** RI **Zip Code** 02920-6032	**City/Town** Cranston **State** RI **Zip Code** 02920-6032
Telephone Number 401 946 4000 **Fax Number** 401 942 9689	**Business Telephone Number** 207 967 9050 **Fax Number** 207 512 1083
Federal I.D. # 84-3266632	**Seller Certificate #: or Sales Tax #:** 1203445
Email Address: mjoyal@procacciantl.com	**Website:** tpgHotelsandresorts.com

1. If premise is a Hotel or Bed & Breakfast, indicate number of rooms available for transient guests: 36

2. State amount of gross income from period of last license:

ROOMS $_____ FOOD $ _____ LIQUOR $ _____

3. Is applicant a corporation, limited liability company or limited partnership? YES ☑ NO ☐
If Yes, please complete the Corporate Information required for Business Entities who are licensees.

4. Do you permit dancing or entertainment on the licensed premises? YES ☑ NO ☐

Agenda Item Divider

13

TOWNOFKENNEBUNKPORT, MAINE

– INCORPORATED 1653 –

APPLICATION
SPECIAL AMUSEMENT PERMIT FOR
DANCING AND ENTERTAINMENT

Name of Applicant KHC Hotel Manager, LLC

Residence Address 1140 Reservoir Avenue Cranston RI 02920

Home Telephone Number 401.946 4600

Name of Business Hidden Pond

Business Address 356 Goose Rocks Road 04046-5302

Type of Business Resort / Restaurant

Business Telephone Number 207 967 9050.

Nature of Special Amusement Live Music / Dancing.

Has your liquor and or amusement license ever been denied or revoked?

Yes _____ No ✓

If yes, describe circumstances specifically. (Attach additional page if necessary)

1. Permit Fee: **$ 100.00 (payable to the Town of Kennebunkport)**
2. By making application for this permit and signing this application form, I acknowledge that I am familiar with the rules and regulations governing this permit.

Signature of Applicant

Printed name: Elizabeth A. Procacceanti

Agenda Item Divider

This application has been reviewed and approved by the following Municipal Officials, whose signatures are on file with the Town Clerk:

(4)

✓ Police Chief

✓ Fire Inspector

✓ Code Enforcement Officer

Tracy Oroak, Town Clerk

Lodge on the Cove
11/14/19

(L7)

BUREAU OF ALCOHOL BEVERAGES AND LOTTERY OPERATIONS
DIVISION OF LIQUOR LICENSING AND ENFORCEMENT
8 STATE HOUSE STATION, AUGUSTA, ME 04333-0008 (Regular Mail)
10 WATER STREET, HALLOWELL, ME 04347 (Overnight Mail)
TEL: (207) 624-7220 FAX: (207) 287-3434
EMAIL INQUIRIES: MAINELIQUOR@MAINE.GOV

DIVISION USE ONLY	
License No:	
Class:	By:
Deposit Date:	
Amt. Deposited:	
Cash Ck Mo:	
Good SOS & DBA: YES ☐ NO ☐	

PRESENT LICENSE EXPIRES: _____

NEW application: ☑ Yes ☐ No

If business is NEW or under new ownership, indicate starting date: Nov. 26, 2019

Requested inspection (New Licensees/ Ownership Changes Only) Date : _____ Business hours: _____

INDICATE TYPE OF PRIVILEGE: ☑ MALT ☑ VINOUS ☑ SPIRITUOUS

INDICATE TYPE OF LICENSE:

☐ RESTAURANT (Class I,II,III,IV) ☐ RESTAURANT/LOUNGE (Class XI) ☐ CLASS A LOUNGE (Class X)

☑ HOTEL (Class I,II,III,IV) ☐ HOTEL, FOOD OPTIONAL (Class I-A) ☐ BED & BREAKFAST (Class V)

☐ GOLF COURSE (Class I,II,III,IV) ☐ TAVERN (Class IV) ☐ QUALIFIED CATERING

☐ OTHER: _____ ☐ SELF-SPONSORED EVENTS (QUALIFIED CATERERS ONLY)

REFER TO PAGE 3 FOR FEE SCHEDULE

ALL QUESTIONS MUST BE ANSWERED IN FULL

Corporation Name: KHC Hotel Manager LLC	**Business Name (D/B/A)** The Lodge on the Cove
APPLICANT(S) –(Sole Proprietor) **DOB:**	**Physical Location:** 29 South Main Street
DOB:	**City/Town** Kennebunkport **State** ME **Zip Code** 04046-6343
Address 1140 Reservoir Avenue	**Mailing Address** 1140 Reservoir Avenue **Same As Above?** ☐
City/Town Cranston **State** RI **Zip Code** 02920-6032	**City/Town** Cranston **State** RI **Zip Code** 02920-6032
Telephone Number 401 946 4600 **Fax Number** 401 9429689	**Business Telephone Number** 207 967 3993 **Fax Number**
Federal I.D. # 84-3266632	**Seller Certificate #: or Sales Tax #:** 203445
Email Address: mjoyal@procacciantl.com	**Website:** tpghotelsandresorts.com

1. If premise is a Hotel or Bed & Breakfast, indicate number of rooms available for transient guests: 33

2. State amount of gross income from period of last license:

ROOMS $_____ FOOD $ _____ LIQUOR $ _____

3. Is applicant a corporation, limited liability company or limited partnership? YES ☑ NO ☐
If Yes, please complete the Corporate Information required for Business Entities who are licensees.

4. Do you permit dancing or entertainment on the licensed premises? YES ☑ NO ☐

Agenda Item Divider

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TOWNOFKENNEBUNKPORT, MAINE

– INCORPORATED 1653 –

APPLICATION
SPECIAL AMUSEMENT PERMIT FOR
DANCING AND ENTERTAINMENT

Name of Applicant KHC Hotel Manager, LLC

Residence Address 1140 Reservoir Avenue Cranston RI 02920

Home Telephone Number 401 946 4600

Name of Business Lodge on the Cove

Business Address 29 South Main Street 04046-6313

Type of Business Hotel / Restaurant

Business Telephone Number 207 967 3993

Nature of Special Amusement Live Music / Dancing

Has your liquor and or amusement license ever been denied or revoked?

Yes _____ No ✓

If yes, describe circumstances specifically. (Attach additional page if necessary)

1. Permit Fee: **$ 100.00 (payable to the Town of Kennebunkport)**
2. By making application for this permit and signing this application form, I acknowledge that I am familiar with the rules and regulations governing this permit.

Signature of Applicant

Printed name: Elizabeth A. Procacciantì

Agenda Item Divider

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This application has been reviewed and approved by the following Municipal Officials, whose signatures are on file with the Town Clerk:

✓ Police Chief

✓ Fire Inspector

✓ Code Enforcement Officer

Tracy O'Roak, Town Clerk

Tides Beach Club
11/14/19

(10)

BUREAU OF ALCOHOL BEVERAGES AND LOTTERY OPERATIONS
DIVISION OF LIQUOR LICENSING AND ENFORCEMENT
8 STATE HOUSE STATION, AUGUSTA, ME 04333-0008 (Regular Mail)
10 WATER STREET, HALLOWELL, ME 04347 (Overnight Mail)
TEL: (207) 624-7220 FAX: (207) 287-3434
EMAIL INQUIRIES: MAINELIQUOR@MAINE.GOV

DIVISION USE ONLY	
License No:	
Class:	By:
Deposit Date:	
Amt. Deposited:	
Cash Ck Mo:	
Good SOS & DBA: YES ☐ NO ☐	

PRESENT LICENSE EXPIRES: _____

NEW application: ☑ Yes ☐ No

If business is NEW or under new ownership, indicate starting date: Nov. 26, 2019

Requested inspection (New Licensees/ Ownership Changes Only) Date : _____ Business hours: _____

INDICATE TYPE OF PRIVILEGE: ☑ MALT ☑ VINOUS ☑ SPIRITUOUS

INDICATE TYPE OF LICENSE:

☑ RESTAURANT (Class I,II,III,IV) ☐ RESTAURANT/LOUNGE (Class XI) ☐ CLASS A LOUNGE (Class X)

☐ HOTEL (Class I,II,III,IV) ☐ HOTEL, FOOD OPTIONAL (Class I-A) ☐ BED & BREAKFAST (Class V)

☐ GOLF COURSE (Class I,II,III,IV) ☐ TAVERN (Class IV) ☐ QUALIFIED CATERING

☐ OTHER: _____ ☐ SELF-SPONSORED EVENTS (QUALIFIED CATERERS ONLY)

REFER TO PAGE 3 FOR FEE SCHEDULE

ALL QUESTIONS MUST BE ANSWERED IN FULL

Corporation Name: HHC Hotel Manager, LLC	**Business Name (D/B/A)** Tides Beach Club
APPLICANT(S) –(Sole Proprietor) **DOB:**	**Physical Location:** 254 Kings Highway
DOB:	**City/Town** Kennebunkport **State** ME **Zip Code** 04046-7262
Address 1140 Reservoir Avenue	**Mailing Address** 1140 Reservoir Avenue **Same As Above?** ☐
City/Town Cranston **State** RI **Zip Code** 02920-6032	**City/Town** Cranston **State** RI **Zip Code** 02920-6032
Telephone Number 401 946 4000 **Fax Number** 401 942 9689	**Business Telephone Number** 207-967-3757 **Fax Number**
Federal I.D. # 84-3266632	**Seller Certificate #: or Sales Tax #:** 1203445
Email Address: mjoyal@prosciutti.com	**Website:** tpghotelsandresorts.com

1. If premise is a Hotel or Bed & Breakfast, indicate number of rooms available for transient guests: 21

2. State amount of gross income from period of last license:

ROOMS $_____ FOOD $ _____ LIQUOR $ _____

3. Is applicant a corporation, limited liability company or limited partnership? YES ☑ NO ☐
If Yes, please complete the Corporate Information required for Business Entities who are licensees.

4. Do you permit dancing or entertainment on the licensed premises? YES ☑ NO ☐

Agenda Item Divider

TOWNOFKENNEBUNKPORT, MAINE

– INCORPORATED 1653 –

APPLICATION
SPECIAL AMUSEMENT PERMIT FOR
DANCING AND ENTERTAINMENT

Name of Applicant KHC Hotel Manager, LLC

Residence Address 1140 Reservoir Avenue Cranston RI 02920

Home Telephone Number 401 946 4600

Name of Business Tides Beach Club.

Business Address 254 Kings Highway 04046-7262

Type of Business Hotel / Restaurant

Business Telephone Number 207 967 3757

Nature of Special Amusement Live music / dancing

Has your liquor and or amusement license ever been denied or revoked?

Yes _____ No ✓

If yes, describe circumstances specifically. (Attach additional page if necessary)

1. Permit Fee: **$ 100.00 (payable to the Town of Kennebunkport)**
2. By making application for this permit and signing this application form, I acknowledge that I am familiar with the rules and regulations governing this permit.

Signature of Applicant

Printed name: Elizabeth A. Procacceanti

Agenda Item Divider

This application has been reviewed and approved by the following Municipal Officials, whose signatures are on file with the Town Clerk:

✓ Police Chief

✓ Fire Inspector

✓ Code Enforcement Officer

Tracy Orcutt, Town Clerk

Yachtsman Hotel
11/14/19

18

(18)

BUREAU OF ALCOHOL BEVERAGES AND LOTTERY OPERATIONS
DIVISION OF LIQUOR LICENSING AND ENFORCEMENT
8 STATE HOUSE STATION, AUGUSTA, ME 04333-0008 (Regular Mail)
10 WATER STREET, HALLOWELL, ME 04347 (Overnight Mail)
TEL: (207) 624-7220 FAX: (207) 287-3434
EMAIL INQUIRIES: MAINELIQUOR@MAINE.GOV

DIVISION USE ONLY	
License No:	
Class:	By:
Deposit Date:	
Amt. Deposited:	
Cash Ck Mo:	
Good SOS & DBA: YES ☐ NO ☐	

PRESENT LICENSE EXPIRES: _____

NEW application: ☑ Yes ☐ No

If business is NEW or under new ownership, indicate starting date: Nov. 26, 2019

Requested inspection (New Licensees/ Ownership Changes Only) Date : _____ Business hours: _____

INDICATE TYPE OF PRIVILEGE: ☑ MALT ☑ VINOUS ☑ SPIRITUOUS

INDICATE TYPE OF LICENSE:

☐ RESTAURANT (Class I,II,III,IV) ☐ RESTAURANT/LOUNGE (Class XI) ☐ CLASS A LOUNGE (Class X)

☐ HOTEL (Class I,II,III,IV) ☑ HOTEL, FOOD OPTIONAL (Class I-A) ☐ BED & BREAKFAST (Class V)

☐ GOLF COURSE (Class I,II,III,IV) ☐ TAVERN (Class IV) ☐ QUALIFIED CATERING

☐ OTHER: _____ ☐ SELF-SPONSORED EVENTS (QUALIFIED CATERERS ONLY)

REFER TO PAGE 3 FOR FEE SCHEDULE

ALL QUESTIONS MUST BE ANSWERED IN FULL

Corporation Name: Yacht Hotel Manager, LLC	**Business Name (D/B/A)** Yachtsman Hotel & Marina Club.
APPLICANT(S) –(Sole Proprietor) DOB:	**Physical Location:** 59 Ocean Avenue
DOB:	**City/Town** Kennebunkport **State** ME **Zip Code** 04046
Address 1140 Reservoir Avenue	**Mailing Address** 1140 Reservoir Avenue **Same As Above?** ☐
City/Town Cranston **State** RI **Zip Code** 02920-6032	**City/Town** Cranston **State** RI **Zip Code** 02920-6032
Telephone Number 401 946 4000 **Fax Number** 4019429688	**Business Telephone Number** 207 967 2511 **Fax Number**
Federal I.D. # 84-3266632	**Seller Certificate #: or Sales Tax #:** 1203445
Email Address: mjoyal@procacciantl.com	**Website:** tpghotelsandresorts.com

1. If premise is a Hotel or Bed & Breakfast, indicate number of rooms available for transient guests: 30

2. State amount of gross income from period of last license:

ROOMS $_____ FOOD $ _____ LIQUOR $ _____

3. Is applicant a corporation, limited liability company or limited partnership? YES ☑ NO ☐
If Yes, please complete the Corporate Information required for Business Entities who are licensees.

4. Do you permit dancing or entertainment on the licensed premises? YES ☑ NO ☐

Agenda Item Divider

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TOWNOFKENNEBUNKPORT, MAINE

– INCORPORATED 1653 –

APPLICATION
SPECIAL AMUSEMENT PERMIT FOR
DANCING AND ENTERTAINMENT

Name of Applicant KHC Hotel Manager, LLC

Residence Address 1140 Reservoir Avenue Cranston RI 02920

Home Telephone Number 401 946 4600

Name of Business Yachtsman Hotel & Marina Club.

Business Address 59 Ocean Avenue 04046

Type of Business Hotel / Marina Bar / Marina

Business Telephone Number 207 967 2511

Nature of Special Amusement Live Music / Dancing

Has your liquor and or amusement license ever been denied or revoked?

Yes _____ No ✓

If yes, describe circumstances specifically. (Attach additional page if necessary)

1. Permit Fee: **$ 100.00 (payable to the Town of Kennebunkport)**
2. By making application for this permit and signing this application form, I acknowledge that I am familiar with the rules and regulations governing this permit.

Signature of Applicant

Printed name: Elizabeth A. Procacceanti

Agenda Item Divider

21

Arlene McMurray

From: cmsmailer@civicplus.com on behalf of John P Harcourt via Town of Kennebunkport, ME <cmsmailer@civicplus.com>
Sent: Friday, November 01, 2019 12:50 PM
To: Arlene McMurray
Subject: Form submission from: Online Application for Boards/Committees

Submitted on Friday, November 1, 2019 - 12:49pm

Submitted values are:

Choose from the following: Planning Board
==Please provide the following information:==
Full Name: John P Harcourt
Email: jpharcourt@gmail.com
Residential Address:
Residential Phone:
Business Address:
Business Phone:
Mailing Address (if different):

Are you registered to vote in Kennebunkport? Yes Please list Membership in community organizations, dates involved, and activities performed:
Member, Village Parcel Master Plan Committee. March 2019-Present Member, Education Committee at The New School. September 2019-Present Autism Information Specialist, Autism Society of Maine.June 2019-Present Do you have any skills, experience, or training you would like to mention?
My experience on the Village Parcel Master Plan Committee has given me a unique opportunity to listen to and learn from a broad range of citizens, boards and commissions about the priorities of the people who live in Kennebunkport and participate in the community. The knowledge learned from that experience would be valuable in serving on the planning board.
I have also had opportunities to work successfully with planning boards In New York, Illinois and Connecticut on several projects.
What is your reason for wanting to serve on this board or committee? I was a part time resident of Kennebunkport for twelve years before moving here permanently about 18 months ago. I believe it is important to be involved in and contribute to the community in which you live. I have the time and commitment to do the extraordinary work required to serve on the Planning Board.
List the top 3 choices that you would like to serve on(1. 2. 3. in desired order)?

The results of this submission may be viewed at:
https://www.kennebunkportme.gov/node/2661/submission/9744

Selectmen's Meeting

AGENDA ITEM 9

21

TOWN OF KENNEBUNKPORT
Application for Boards, Committees & Commissions

To the Town Manager:

I hereby request to be considered for membership to the following board(s) and/or committee(s): (If more than one, please indicate your preference: 1,2,3...)

- ☐ Administrative Code Committee
- ☐ Board of Assessment Review
- ☐ Budget Board
- ☐ Cape Porpoise Pier Advisory Committee
- ☐ Cemetery Committee
- ☐ Conservation Commission
- ☐ Government Wharf Committee
- ☐ Growth Planning Committee
- ☐ Kennebunk River Committee
- ☐ Lighting Committee
- ☐ Parsons Way
- ☒ Planning Board
- ☐ Recreation Committee
- ☐ Senior Advisory Committee
- ☐ Sewer Advisory Committee
- ☐ Shade Tree Committee
- ☐ Shellfish Conservation Committee
- ☐ Sidewalk Committee
- ☐ Solid Waste Committee
- ☐ Zoning Board of Appeals

Harrison Small — Signature of Applicant

Nov. 5, 2019 — Date

Preliminary Information

Name (Print): Harrison Small

Residence Address: [redacted] Phone: [redacted]

Business Address: _____ Phone: _____

Mailing Address: _____

(if different) _____

E-mail Address: [redacted]

Membership in community organizations:

Organization	Dates	Activities

Do you have any skills, experience, or training you would like to mention?

Have been in Scouts for 38 yr, in various positions

What is your reason for wanting to serve on this board or committee?

with my experience in construction I have some thoughts to share in planning for new developements.

Are you registered to vote in Kennebunkport? Please check one: ☒ **Yes** ☐ **No**

Please return the completed application to: Town Manager, 6 Elm St., P.O. Box 566, Kennebunkport, ME 04046. You will be contacted upon receipt.

Agenda Item Divider

22

MEMORANDUM

To: Laurie Smith, Town Manager

Fr: Craig Sanford, Chief of Police

Re: Cruiser Purchase

Dt: November 7, 2019

The police department has been challenged this year trying to coordinate the purchase of a new Dodge Charger. The manufacturer has held off informing the dealerships of the purchase window. This window is the opportunity for police agencies to order vehicles and go through the bidding process. Because the manufacturer has decided to redesign the police package, it has shortened the purchase window and has forced us to rush the process along. In doing so, we may not be guaranteed a vehicle.

To adhere to the town's purchasing policy and allow for selectmen approval, we are quickly trying to get quotes with trade-in of a 2016 Dodge Charger with over 120,000 miles. We are in conversation with two dealerships whom we have dealt with in previous years. I am asking that the board approve the purchase of a new 2020 Dodge Charger with an estimated price between $ 22,000 to $ 24,000, minus trade-in value, by the police department from the lowest bidder while staying within budgeted limits. We will have a quote available for your review at the meeting.

Should our purchase not be completed, we will reevaluate, come up with a different plan and bring it before the board.

Agenda Item Divider

23

KENNEBUNKPORT WASTEWATER DEPARTMENT

MEMO

Date: October 30, 2019

To: Laurie Smith

From: Chris Simeoni, Deputy Director Public Works

Re: Selectmen's agenda 11/14/19- Consider supplemental assessments for three new sewer service applications

We have received three new sewer service connection applications for the following parcels:

- MBL 35-18-3A (Benjamin W. & Stephanie L. Coffin)
- MBL 23-1-19A4 (Linda & Robert Hurley)
- MBL 23-1-19A14 (Kimberly & Robert Balcavage)

Per the Sewer Ordinance Article XIII Section 8:
Sec. 8. *When a Sewer Connection Application is processed, and a permit is issued, the owner of the property for which the application was issued will be billed for the units that were approved. If the application was approved during the billing year, the sewer charge will be pro-rated for the rest of that year; any year thereafter the owner will receive a bill for all the units that were approved for a full year. The sewer bill will be assessed regardless of whether the units are tied into the collection system or not.*

The amount for the pro-rated portion of the user fee to be assessed for each property is $88.85 for a total of $266.55. We are requesting the selectmen commit the above-mentioned sewer rates at the November 14th Selectmen's meeting.

Thank you,
Christopher Simeoni
Christopher Simeoni
Deputy Director Public Works

25R School Street, P.O. Box 1038, Kennebunkport, Maine 04046
Tel: (207) 967-2245 Fax: (207) 967-5372

TOWN OF KENNEBUNKPORT, MAINE

– INCORPORATED 1653 –

Certificate of Commitment of Sewer User Rates

To: Jennifer Lord, the treasurer of the municipality of Kennebunkport, Maine.

We, the undersigned municipal officers of the municipality of Kennebunkport, hereby certified and commit to you a true list of the sewer rates established by us pursuant to 30-A M.R.S.A. § 3406 for those properties, units, and structures required by local and State law to pay a sewer rate to the municipality, for the period beginning October 23, 2019 and ending December 31, 2019. This list is comprised of the pages numbered 1 to 2 inclusive which are attached to this certificate. The date(s) on which the rates included in this list are due and payable is (are) December 16, 2019. You are hereby required to collect from each person named in the attached list his or her respective amount as indicated in the list, the sum of those lists being $266.55. You are hereby required to charge interest at a rate of 9.00% per annum on any unpaid account balance beginning December 17, 2019. You are hereby authorized to collect these rates and any accrued interest by any means legally available to you under State law. On or before December 31, 2019 you shall complete and make an account of your collections of the whole sum herein committed to you.

Given under our hands this 14th day of November 2019.

_____

_____

_____

_____

_____

Municipal Officers, Town of Kennebunkport

6 Elm Street, P.O. Box 566, Kennebunkport, Maine 04046
Tel: (207) 967-4243 Fax: (207) 967-8470

Created Bills Report

Rate Key : 109 Interest As Of: 11/14/2019

Book : 99

Book	Seq	Cons	Regular	Misc	Tax	Past Due	Interest	Amount	Account	Name
*99	0	0	88.85	0.00	0.00	0.00	0.00	88.85	14223	COFFIN, BENJAMIN W & STEPHANIE L
Book: 99 1 bill		0	88.85	0.00	0.00	0.00	0.00	88.85		
Total: 1 bill		0	88.85	0.00	0.00	0.00	0.00	88.85		

* = Override

Created Bills Report

Rate Key : 108 Interest As Of: 11/14/2019

Book : 99

Book	Seq	Cons	Regular	Misc	Tax	Past Due	Interest	Amount	Account	Name
*99	0	0	88.85	0.00	0.00	0.00	0.00	88.85	14221	MILLS ROAD LLC
*99	0	0	88.85	0.00	0.00	0.00	0.00	88.85	14222	MILLS ROAD LLC
Book: 99 2 bills		0	177.70	0.00	0.00	0.00	0.00	177.70		
Total: 2 bills		0	177.70	0.00	0.00	0.00	0.00	177.70		

* = Override

Agenda Item Divider

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TOWN OF KENNEBUNKPORT, MAINE

~ INCORPORATED 1653 ~

MAINE'S FINEST RESORT

Proposed Ordinance Revisions March 2020

- With the loss of the Journal Tribune we were forced to look at alternative newspapers in which to publish our legal notices related to Board of Appeals hearings and Planning Board site plan review applications. What we found is that in order to work within our posted timeframes the only paper available was the Portland Press Herald, which in all cases more than doubled the cost of newspaper publishing's. This caused us to question the value of newspaper publishing's, and whether there was a more effective option that met with our ordinance obligations. Subject to review by the town attorney it is our belief that a local newspaper posting for these types of applications is a local choice and not one mandated by state law, allowing us the option modify our ordinance. Having the option to post to the town website directly informs our intended audience and saves a significant cost to the applicant. Our requirement to send certified notices to abutters within 200'ft is unaffected by this proposed amendment and will continue as it always has.

6 Elm Street, P.O. Box 566, Kennebunkport, Maine 04046 • Tel: (207) 967-4243 Fax: (207) 967-8470

9.3 Appeals Procedure

A. At least three (3) days ~~ten (10)~~ days prior to the hearing date, the Town Clerk shall publish a notice of the hearing in a newspaper of general circulation in Kennebunkport,or publish a notice on the town of Kennebunkport's webpage. The notice shall identify the property involved, the name of the applicant, the nature of the application, and the time and place of the public hearing.

10.8 Planning Board Procedure for Site Plan Review

B. Following the receipt of an application the Board may hold a pre-hearing meeting with the applicant to discuss submission requirements and general concerns of the Board. The Planning Board may also request that the application include a report from the Chief of Police, the Fire Chief, the Superintendent of the Water District and the Superintendent of the Sewer Department containing their recommendations regarding the proposed use. Within forty-five (45) days of the submission of a completed application, with all supporting documentation, the Board shall hold a public hearing. At least three (3) days ~~ten (10) days~~ prior to the hearing date, the Town Clerk shall publish a notice of the hearing in a newspaper of general circulation in Kennebunkport,or publish a notice on the town of Kennebunkport's webpage. The notice shall identify the property involved, the applicant, the nature of the application, and the time and place of the public hearing.

Agenda Item Divider

23

Town of Kennebunkport

Memo

To: Laurie Smith, Town Manager, and the Board of Selectmen

From: Jennifer Lord, Treasurer

Date: 11/14/19

Re: Tax Acquired Property

The Rahim property located on Beachwood Ave, Map/Lot 023-001-027C, was foreclosed on in 2016 and 2017, and the 2018 tax lien is outstanding. In April of 2018, for FY 19 the assessor changed the property to Town owned and the status went to exempt. There were no tax commitments for FY 19 and FY 20.

At this time, I would request that the Board of Selectmen authorize me to write off the outstanding principal on the taxes as follows:

2016 Lien	$572.88
2017 Lien	$616.03
2018 Lien	$649.51
Total to write off	$1,838.42

Thank you!

Property Location BEACHWOOD AVENUE | Map ID 23/ 1/ 27/C / | Bldg Name | State Use 903T
Vision ID 100382 | Account # 100382 | Bldg # 1 | Sec # 1 of 1 | Card # 1 of 1 | Print Date 11-06-2019 9:04:09 A

CURRENT OWNER	TOPO	SEWER/WATER	STRT/ROAD	ZONE(S)
KENNEBUNKPORT, TOWN OF	2 Above Str		1 Paved	FE Free Enterpri
TAX ACQUIRED	4 Rolling			
PO BOX 566	6 Low			101 Rural-Vacant

KENNEBUNKPORT ME 04046

SUPPLEMENTAL DATA

Trio Acct 3194 | House Col

CURRNT
1ST YEA
FMP EX

GIS ID 100382 | Assoc Pid#

CURRENT ASSESSMENT

Description	Code	Appraised	Assessed
EXM LAND	9035	74,400	74,400
	Total	74,400	74,400

4512

KENNEBUNKPORT, ME

VISION

RECORD OF OWNERSHIP

	BOOK/PAGE		SALE DATE	Q/U	V/I	SALE PRICE	VC
KENNEBUNKPORT, TOWN OF	17274	0116	04-01-2018	U	V	0	1E
RAHIM, JOYCE L	10067	0327	06-14-2000	U	V	18,700	1A
RAHIM JOYCE L & LANDON FRANK V	05862	0345	10-19-1991	U	V	0	1A

PREVIOUS ASSESSMENTS (HISTORY)

Year	Code	Assessed	Year	Code	Assessed V	Year	Code	Assessed
2019	9035	74,400	2018	9035	74,400	2017	1300	74,400
	Total	74400		Total	74400		Total	74400

EXEMPTIONS

Year	Code	Description	Amount
		Total	0.00

OTHER ASSESSMENTS

Code	Description	Number	Amount	Comm Int

This signature acknowledges a visit by a Data Collector or Assessor

ASSESSING NEIGHBORHOOD

Nbhd	Nbhd Name	B	Tracing	Batch
0001				

NOTES

4/2018 PROPERTY TAKEN BY FORECLOSURE
PROCESS. 2016 TAX LIEN MATURED

APPRAISED VALUE SUMMARY

Appraised Bldg. Value (Card)	0
Appraised Xf (B) Value (Bldg)	0
Appraised Ob (B) Value (Bldg)	0
Total Appraised Improvements	**0**
Appraised Land Value (Bldg)	**74,400**
Special Land Value	0
Total Appraised Parcel Value	**74,400**
Exemption	*0.00*
Valuation Method	C
NET PARCEL VALUE	**74,400**

BUILDING PERMIT RECORD

Permit Id	Issue Date	Type	Description	Project Cost	Insp Date	% Comp	Date Comp	Comments

VISIT / CHANGE HISTORY

Date	Id	Cd	Purpost/Result
07-08-2008	PH	99	Vacant Land

LAND LINE VALUATION SECTION

B	Use Code	Description	Zone	Land Type	Land Units		Unit Price	Size Adj	Site Index	Cond.	Nbhd.	Nbhd. Adj	Notes	Location Adjustment		Adj Unit P	Land Value
1	903T	TOWN TAX ACQ	FE		40,000	SF	2.33	1.00000	4	1.00	100	0.800			1.0000	1.86	74,400
1	903T	TOWN TAX ACQ	FE		3.880	AC	0.00	1.00000	4	0.75	100	0.800	TOPO		0.0000	0.00	0
		Parcel Total Land Area			4.7983		AC									Total Land Value	74,400

Property Location BEACHWOOD AVENUE | Map ID 23/ 1/ 27/C / | Bldg Name | State Use 903T
Vision ID 100382 | Account 100382 | Bldg # 1 | Sec # 1 of 1 | Card # 1 of 1 | Print Date 11-06-2019 9:04:09 A

CONSTRUCTION DETAIL

Element	Cd	Description
Style:	99	Vacant Land
Model	00	Vacant
Grade:		
Stories:		
Occupancy		
Exterior Wall 1		
Exterior Wall 2		
Roof Structure		
Roof Cover		
Interior Wall 1		
Interior Wall 2		
Interior Flr 1		
Interior Flr 2		
Heat Fuel		
Heat Type:		
AC Type:		
Total Bedroom		
Total Bthrms:		
Total Half Bath		
Total Xtra Fixtr		
Total Rooms:		
Bath Style:		
Kitchen Style:		

CONSTRUCTION DETAIL (CONTINUED)

Element	Cd	Description

CONDO DATA

Parcel Id		C		Owne	
		B		S	

Adjust Type	Code	Description	Factor%
Condo Flr			
Condo Unit			

COST / MARKET VALUATION

Building Value New	0
Year Built	0
Effective Year Built	0
Depreciation Code	
Remodel Rating	
Year Remodeled	
Depreciation %	
Functional Obsol	0
External Obsol	0
Trend Factor	1
Condition	
Condition %	
Percent Good	
Cns Sect Rcnld	
Dep % Ovr	
Dep Ovr Comment	
Misc Imp Ovr	
Misc Imp Ovr Comment	
Cost to Cure Ovr	
Cost to Cure Ovr Comment	

No Sketch

OB - OUTBUILDING & YARD ITEMS(L) / XF - BUILDING EXTRA FEATURES(B)

Code	Description	COMMENT	L/B	Units	Unit Price	Yr Blt	% Gd	Appr. Value

BUILDING SUB-AREA SUMMARY SECTION

Code	Description	Living Area	Floor Area	Eff Area	Unit Cost	Undeprec Value
	Ttl Gross Liv / Lease Area	0	0	0		0

RE Account 3194 Detail
as of 11/06/2019

Name: KENNEBUNKPORT, & TAX ACQUIRED

Location: 0 BEACHWOOD AVENUE
Acreage: 4.8 Map/Lot: 023-001-027C
Book Page: B17274P116

2015-1 Period Due:

Land:	74,400
Building:	0
Exempt	74,400
Total:	

Ref1: BP
Mailing Address: PO BOX 566
KENNEBUNKPORT ME 04046

Year/Rec #	Date	Reference	P C	Principal	Interest	Costs	Total
2018-1 L	08/10/17	Original		649.51	0.00	0.00	649.51
	Billed To: TOWN OF KENNEBUNKPORT						
	6/12/2018	DEMAND	A 3	0.00	0.00	-9.59	-9.59
			Demand Fees				
	07/19/18	Liened		649.51	26.53	60.59	736.63
		CURINT		0.00	-59.17	0.00	-59.17
		Total		649.51	85.70	60.59	795.80
2017-1 L	07/28/16	Original		616.03	0.00	0.00	616.03
	Billed To: RAHIM JOYCE L & C/O RICK RAHIM						
	6/7/2017	DEMAND	A 3	0.00	0.00	-9.59	-9.59
			Demand Fees				
	07/14/17	Liened		616.03	25.46	57.59	699.08
	12/7/2018	CHGINT	A I	0.00	-60.37	0.00	-60.37
	12/7/2018	FCFEES	A L	0.00	0.00	-9.67	-9.67
			Lien Maturity Fee				
		CURINT		0.00	-39.46	0.00	-39.46
		Total		616.03	125.29	67.26	808.58
2016-1 L	07/24/15	Original		572.88	0.00	0.00	572.88
	Billed To: RAHIM JOYCE L & C/O RICK RAHIM						
	6/6/2016	DEMAND	A 3	0.00	0.00	-9.47	-9.47
			Demand Fees				
	07/12/16	Liened		572.88	23.62	57.47	653.97
	11/30/2017	FCFEES	A L	0.00	0.00	-9.47	-9.47
			Lien Maturity Fee				
	11/30/2017	CHGINT	A I	0.00	-55.59	0.00	-55.59
		CURINT		0.00	-77.57	0.00	-77.57
		Total		572.88	156.78	66.94	796.60
2015-1 R				0.00	0.00	0.00	0.00
2014-1 R				0.00	0.00	0.00	0.00
2013-1 R				0.00	0.00	0.00	0.00
2012-1 R				0.00	0.00	0.00	0.00
2011-1 R				0.00	0.00	0.00	0.00
2010-1 R				0.00	0.00	0.00	0.00
2009-1 R				0.00	0.00	0.00	0.00
.ccount Totals as of 11/06/2019				1,838.42	367.77	194.79	2,400.98

Per Diem

Exempt Codes: 50 - Totally Exempt

RE Account 3194 Detail
as of 11/06/2019

Name: KENNEBUNKPORT, & TAX ACQUIRED

Location: 0 BEACHWOOD AVENUE
Acreage: 4.8 Map/Lot: 023-001-027C
Book Page: B17274P116

2015-1 Period Due:

Land:	74,400
Building:	0
Exempt	74,400
Total:	

Ref1: BP
Mailing Address: PO BOX 566
KENNEBUNKPORT ME 04046

Year/Rec #	Date	Reference	P	C	Principal	Interest	Costs	Total
2018-1		0.1246						
2017-1		0.1181						
2016-1		0.1099						
Total		0.3526						

Note: Payments will be reflected as positive values and charges to the account will be represented as negative values.

Agenda Item Divider

Town of Kennebunkport - Fiscal Year 2021
July 2020 to June 2021 - Budget Development Schedule

- **October 8, 2019** – Send out all applications to Social Service Agencies.
- **November 14, 2019 –** Board of Selectmen to review proposed budget development schedule and *submit priorities and special requests.*
- **November 15, 2019** - Social service agency requests are due.
- **December 2, 2019** –Budget request sent to all departments.
- **December 5, 2019** – Forward all social service agency requests to Budget Board subcommittee.
- **December 6, 2019** - Budget requests sent to all committees and outside agencies.
- **January 3, 2020 –** (Friday) All budget requests are submitted to Finance.
- **January 10, 2020** - Budget Board social service agency recommendations are given to Town Manager.
- **January 20, 2020 –** Week of – Town Manager meets with all departments.
- **February 3, 2020 –** Week of – Town Manager has follow-up meetings with all departments.
- **February 28, 2020** – (Friday) - Town manager submits capital and operating budget to the Board of Selectmen and Budget Board. THIS IS NOT A MEETING. It is a deadline for submitting information.
- **March 5, 2020 (Thursday @ 6:00 PM) –** JOINT MEETING - **Budget Board will meet at 5:30 to elect officers.** Town manager and department heads present overview and department operational budgets to the Board of Selectmen. The Budget Board will attend the meeting to hear all requests.
- **March 12, 2020 (Thursday @ 6:00 PM)** –JOINT MEETING – Presentation of remaining department operational budgets to the Board of Selectmen. The Budget Board will attend the meeting to hear all requests. **(Regular Board of Selectman Meeting to follow at 7 PM.)**
- **March 19, 2020 (Thursday @ 6:00 PM)** – JOINT MEETING - Presentation of department capital requests and town committee, outside agency, and social service requests. The Budget Board will attend the meeting to hear all requests.
- **March 26, 2020 (Thursday @ 6:00 PM) –** SELECTMEN meet to review final budgets and take all recommendation votes. **(Regular Board of Selectman Meeting to follow.)**
- **March 27, 2020 (Friday) –** Submit all budget changes to Budget Board.
- **April 2, 2020 (Thursday @ 6:00 PM)** – BUDGET BOARD meet to review final budgets and take all recommendation votes.
- **April 9, 2020 (Thursday @ 6:00 PM) –** JOINT MEETING – *if necessary* – Last chance to make any adjustments in the budget or their recommendations. **(Regular Board of Selectman Meeting to follow.)**
- **April 17, 2020** – **(Friday)** Submit town report version of the budget to Arlene.
- **April 23, 2020 (Thursday @ 6:00 PM) –** Board of Selectmen meeting to sign the warrant (Last possible day to sign will be April 23)
- **May 26, 2020 – (Tuesday)** Distribution of town reports.
- **June 9, 2020 – (Tuesday)** Annual town meeting - elections.
- **June 13, 2020 – (Saturday)** Annual town meeting – Consolidated School.

Agenda Item Divider

29

Kennebunkport Public Health

November 1, 2019

ATN: Kennebunkport Board of Selectmen, Laurie Smith-Kennebunkport Town Manager

Please accept this generous gift of $2000.00 from St Ann's Episcopal Church to the Nurses general (51-39-50-01) account. This money was granted to Kennebunkport Public Health dept to assist us with any health and social service projects, including Senior enrichments, and our new baby box program as we see fit.

Thank you!

Alison Kenneway RN, BSN

Kennebunkport Public Health

ORIGINAL DOCUMENT PRINTED ON CHEMICAL REACTIVE PAPER WITH MICROPRINTED BORDER

5684

People's United Bank

ST. ANN'S EPISCOPAL CHURCH
P.O. BOX 44
KENNEBUNKPORT, ME 04046

52-7218/2211

10/28/19

PAY TO THE ORDER OF Kennebunkport Public Health Service $**2,000.00

Two Thousand and 00/100********** DOLLARS

Kennebunkport Public Health Services

MEMO

AUTHORIZED SIGNATURE

SAFEGUARD SEC

THIS DOCUMENT CONTAINS HEAT SENSITIVE INK. TOUCH OR PRESS HERE. RED IMAGE DISAPPEARS WITH HEAT.