



RECEIVED

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TOWN OF BURLINGTON

Meeting Posting

Email Posting to meetings@burlington.org or Bring to the Clerks Office. Thank you
Notice of Public Meeting – (As required by G.L. c. 30 A, c. §18-25)

DEPT./BOARD: Select Board

DATE: Monday October 3, 2022
General Session

TIME: 6:00 p.m.

PLACE: Burlington Town Hall, 29 Center Street Main Hearing Room, 2nd Floor /
Cisco Webex On-Line Meeting

<https://townofburlington.webex.com/townofburlington/j.php?MTID=mee7657229c9c282f3a00ced59ea7546a>

Meeting number (access code): 2340 062 0823 Meeting password: JVe658EnSt2

+1-408-418-9388,,23400620823## United States Toll Dial 23400620823@townofburlington.webex.com

“This meeting/hearing of The Burlington Select Board will be held in-person at the location provided on this notice. Members of the Public are welcome to attend this in-person meeting. Please note that while an option for remote attendance and/or participation is being provided as a courtesy to the public, the meeting/hearing will not be suspended or terminated if technological problems interrupt the virtual broadcast, unless otherwise required by law. Members of the public with particular interest in any specific item on this agenda should make plans for in-person vs. virtual attendance accordingly.”

AGENDA

Submitted 9/29/2022

GENERAL SESSION

	Pledge of Allegiance	6:00 p.m.
648	Citizen's Time	6:01 p.m.
649 Appointment:	Fire Chief	6:15 p.m.
650 Approval:	Election Warrant - November	6:20 p.m.
651 Approval:	Drake Road – Conservation Land	6:25 p.m.
652 Approval:	Employee Health Insurance Rates	6:30 p.m.
653 Approval:	Town Center Beer Garden – date change	6:35 p.m.

• October 6, 2022



Select Board Meeting
October 3, 2022
Page 2 of 2

- | | | | |
|-----|-----------------|---|-----------|
| 654 | Approval: | Lahey Health 5K | 6:40 p.m. |
| 655 | Public Hearing: | Al Maidah – 184 Cambridge Street <ul style="list-style-type: none">• Change of Manager• Change of Officers/Director/LLC Manager• Issuance/Transfer of Stock/New Stockholder | 6:45 p.m. |
| 656 | Discussion: | Town Common Policy | 6:50 p.m. |
| 657 | | Subcommittee Reports | |
| 658 | | Chairman’s Report | |
| 659 | | Town Administrator’s Report | |

Select Board

Item #

648

SELECT BOARD
Meeting Agenda Item

Meeting date 10/3/2022

Requesting Department:

Select Board

Request Title for Agenda:

CITIZEN'S TIME

Description:

Any person wishing to talk will have up to 3 minutes which will be strictly enforced by the Chair. If the number of people exceeds 5 the time will be decreased to 2 minutes per person. The topics maybe halted immediately by the Chair. Individual participation based on topic shall be limited to once every 3 meetings unless on a different topic.

MGL, Town Bylaw, Town Policy referenced (if applicable):

Purpose:

To allow public participation in a control manner

Back up included:

N/A

Suggested Motion:

none

Motion made and seconded by: Resulting Vote (who was not present or abstained)

Select Board

Item #

649

Select Board

Item #

650

Burlington Election 1 – 2 – 3 Quick Guide

There are 3 ways that you can participate in the upcoming State Election on November 8th

1) Mail back your Vote by Mail application by **November 1st** for a ballot to be mailed out to you in time for the Election

2) Come to Early In Person voting from **October 22nd** until **November 4th** held at the Town Hall, Main Hearing Room, 29 Center ST. Here are the hours that we will be open: 

- Saturday, October 22; 9 AM – 3 PM
- Monday, October 24; 12 PM – 4:00 PM
- Tuesday, October 25; 12 PM – 4:00 PM
- Wednesday, October 26; 12 PM – 7 PM
- Thursday, October 27; 12 PM – 4:00 PM
- Friday, October 28; 8:30 AM - 1 PM
- Saturday, October 29; 11 AM – 5 PM – **also Last day for Voter Registration**
- Monday, October 31; 8:30 AM – 4:30 PM
- Tuesday, November 1; 8:30 AM – 4:30 PM
- Wednesday, November 2; 8:30 AM – 7 PM
- Thursday, November 3; 8:30 AM – 4:30 PM
- Friday, November 4; 8:30 AM – 5 PM

3) Finally, if you prefer come on Election Day, **November 8th** to the Burlington High School and vote in person!! The polls will be open from 7 AM to 8 PM that day.

Important deadline days are in **RED**. IF you have any questions call the office at 781-270-1660 or email vote@Burlington.org

COMMONWEALTH OF MASSACHUSETTS
WILLIAM FRANCIS GALVIN
SECRETARY OF THE COMMONWEALTH

WARRANT FOR 2022 STATE GENERAL ELECTION

Middlesex SS.

To the Constable of the City/Town of Burlington

GREETINGS:

In the name of the Commonwealth, you are hereby required to notify and warn the inhabitants of said city or town who are qualified to vote in Primaries to vote at:

All Precincts

123 Cambridge ST, Burlington High School Gym

on **TUESDAY, THE EIGHT DAY OF NOVEMBER, 2022**, from 7:00 A.M. to 8:00 P.M. for the following purpose:

To cast their votes in the State General Election for the candidates for the following offices and questions:

GOVERNOR.	FORTHIS COMMONWEALTH
LIEUTENANT GOVERNOR.	FORTHIS COMMONWEALTH
ATTORNEY GENERAL.	FOR THIS COMMONWEALTH
SECRETARY OF STATE.	FOR THIS COMMONWEALTH
TREASURER.	FOR THIS COMMONWEALTH
AUDITOR.	FOR THIS COMMONWEALTH
REPRESENTATIVE IN CONGRESS.	SIXTH DISTRICT
COUNCILLOR.	THIRD DISTRICT
SENATOR IN GENERAL COURT.	FOURTH MIDDLESEX DISTRICT
REPRESENTATIVE IN GENERAL COURT.	TWENTY-FIRST MIDDLESEX DISTRICT
DISTRICT ATTORNEY	NORTHERN DISTRICT
SHERIFF	MIDDLESEX COUNTY

Question #1

Proposed Amendment to the Constitution

Do you approve of the adoption of an amendment to the constitution summarized below, which was approved by the General Court in joint sessions of the two houses on June 12, 2019 (yeas 147 – nays 48); and again on June 9, 2021 (yeas 159 – nays 41)?

SUMMARY

This proposed constitutional amendment would establish an additional 4% state income tax on that portion of annual taxable income in excess of \$1 million. This income level would be adjusted annually, by the same method used for federal income-tax brackets, to reflect increases in the cost of living. Revenues from this tax would be used, subject to appropriation by the state Legislature, for public education, public colleges and universities; and for the repair and maintenance of roads, bridges, and public transportation. The proposed amendment would apply to tax years beginning on or after January 1, 2023.

A YES VOTE would amend the state Constitution to impose an additional 4% tax on that portion of incomes over one million dollars to be used, subject to appropriation by the state Legislature, on education and transportation.

A NO VOTE would make no change in the state Constitution relative to income tax.

Question #2

QUESTION 2: Law Proposed by Initiative Petition

Do you approve of a law summarized below, on which no vote was taken by the Senate or the House of Representatives on or before May 3, 2022?

SUMMARY

This proposed law would direct the Commissioner of the Massachusetts Division of Insurance to approve or disapprove the rates of dental benefit plans and would require that a dental insurance carrier meet an annual aggregate medical loss ratio for its covered dental benefit plans of 83 percent. The medical loss ratio would measure the amount of premium dollars a dental insurance carrier spends on its members' dental expenses and quality improvements, as opposed to administrative expenses. If a carrier's annual aggregate medical loss ratio is less than 83 percent, the carrier would be required to refund the excess premiums to its covered individuals and groups. The proposed law would allow the Commissioner to waive or adjust the refunds only if it is determined that issuing refunds would result in financial impairment for the carrier.

The proposed law would apply to dental benefit plans regardless of whether they are issued directly by a carrier, through the connector, or through an intermediary. The proposed law would not apply to dental benefit plans issued, delivered, or renewed to a self-insured group or where the carrier is acting as a third-party administrator.

The proposed law would require the carriers offering dental benefit plans to submit information about their current and projected medical loss ratio, administrative expenses, and other financial information to the Commissioner. Each carrier would be required to submit an annual comprehensive financial statement to the Division of Insurance, itemized by market group size and line of business. A carrier that also provides administrative services to one or more self-insured groups would also be required to file an appendix to their annual financial statement with information about its self-insured business. The proposed law would impose a late penalty on a carrier that does not file its annual report on or before April 1.

The Division would be required to make the submitted data public, to issue an annual summary to certain legislative committees, and to exchange the data with the Health Policy Commission. The Commissioner would be required to adopt standards requiring the registration of persons or entities not otherwise licensed or registered by the Commissioner and criteria for the standardized reporting and uniform allocation methodologies among carriers.

The proposed law would allow the Commissioner to approve dental benefit policies for the purpose of being offered to individuals or groups. The Commissioner would be required to adopt regulations to determine eligibility criteria.

The proposed law would require carriers to file group product base rates and any changes to group rating factors that are to be effective on January 1 of each year on or before July 1 of the preceding year. The Commissioner would be required to disapprove any proposed changes to base rates that are excessive, inadequate, or unreasonable in relation to the benefits charged. The Commissioner would also be required to disapprove any change to group rating factors that is discriminatory or not actuarially sound.

The proposed law sets forth criteria that, if met, would require the Commissioner to presumptively disapprove a carrier's rate, including if the aggregate medical loss ratio for all dental benefit plans offered by a carrier is less than 83 percent.

The proposed law would establish procedures to be followed if a proposed rate is presumptively disapproved or if the Commissioner disapproves a rate.

The proposed law would require the Division to hold a hearing if a carrier reports a risk-based capital ratio on a combined entity basis that exceeds 700 percent in its annual report.

The proposed law would require the Commissioner to promulgate regulations consistent with its provisions by October 1, 2023. The proposed law would apply to all dental benefit plans issued, made effective, delivered, or renewed on or after January 1, 2024.

A YES VOTE would regulate dental insurance rates, including by requiring companies to spend at least 83% of premiums on member dental expenses and quality improvements instead of administrative expenses, and by making other changes to dental insurance regulations.

A NO VOTE would make no change in the law relative to the regulations that apply to dental insurance companies..

Question #3

Law Proposed by Initiative Petition

Do you approve of a law summarized below, on which no vote was taken by the Senate or the House of Representatives on or before May 3, 2022?

SUMMARY

This proposed law would increase the statewide limits on the combined number of licenses for the sale of alcoholic beverages for off-premises consumption (including licenses for “all alcoholic beverages” and for “wines and malt beverages”) that any one retailer could own or control: from 9 to 12 licenses in 2023; to 15 licenses in 2027; and to 18 licenses in 2031.

Beginning in 2023, the proposed law would set a maximum number of “all alcoholic beverages” licenses that any one retailer could own or control at 7 licenses unless a retailer currently holds more than 7 such licenses.

The proposed law would require retailers to conduct the sale of alcoholic beverages for off-premises consumption through face-to-face transactions and would prohibit automated or self-checkout sales of alcoholic beverages by such retailers.

The proposed law would alter the calculation of the fine that the Alcoholic Beverages Control Commission may accept in lieu of suspending any license issued under the State Liquor Control Act. The proposed law would modify the formula for calculating such fee from being based on the gross profits on the sale of alcoholic beverages to being based on the gross profits on all retail sales.

The proposed law would also add out-of-state motor vehicle licenses to the list of the forms of identification that any holder of a license issued under the State Liquor Control Act, or their agent or employee, may choose to reasonably rely on for proof of a person’s identity and age.

A **YES VOTE** would increase the number of licenses a retailer could have for the sale of alcoholic beverages to be consumed off premises, limit the number of “all-alcoholic beverages” licenses that a retailer could acquire, restrict use of self-checkout, and require retailers to accept customers’ out-of-state identification.

A **NO VOTE** would make no change in the laws governing the retail sale of alcoholic beverages.

Question #4

Do you approve of a law summarized below, which was approved by the House of Representatives and the Senate on May 26, 2022?

SUMMARY

This law allows Massachusetts residents who cannot provide proof of lawful presence in the United States to obtain a standard driver’s license or learner’s permit if they meet all the other qualifications for a standard license or learner’s permit, including a road test and insurance, and provide proof of their identity, date of birth, and residency. The law provides that, when processing an application for such a license or learner’s permit or motor vehicle registration, the registrar of motor vehicles may not ask about or create a record of the citizenship or immigration status of the applicant, except as otherwise required by law. This law does not allow people who cannot provide proof of lawful presence in the United States to obtain a REAL ID.

To prove identity and date of birth, the law requires an applicant to present at least two documents, one from each of the following categories: (1) a valid unexpired foreign passport or a valid unexpired Consular Identification document; and (2) a valid unexpired driver’s license from any United States state or territory, an original or certified copy of a birth certificate, a valid unexpired foreign national identification card, a valid unexpired foreign driver’s license, or a marriage certificate or divorce decree issued by any state or territory of the United States. One of the documents presented by an applicant must include a photograph and one must include a date of birth. Any documents not in English must be accompanied by a certified translation. The registrar may review any documents issued by another country to determine whether they may be used as proof of identity or date of birth.

The law requires that applicants for a driver’s license or learner’s permit shall attest, under the pains and penalties of perjury, that their license has not been suspended or revoked in any other state, country, or jurisdiction.

The law specifies that information provided by or relating to any applicant or license-holder will not be a public record and shall not be disclosed, except as required by federal law or as authorized by Attorney General regulations, and except for purposes of motor vehicle insurance.

The law directs the registrar of motor vehicles to make regulations regarding the documents required of United States citizens and others who provide proof of lawful presence with their license application.

The law also requires the registrar and the Secretary of the Commonwealth to establish procedures and regulations to ensure that an applicant for a standard driver's license or learner's permit who does not provide proof of lawful presence will not be automatically registered to vote.

The law takes effect on July 1, 2023.

A YES VOTE would keep in place the law, which would allow Massachusetts residents who cannot provide proof of lawful presence in the United States to obtain a driver's license or permit if they meet the other requirements for doing so.

A NO VOTE would repeal this law.

Question #5

Shall the Town of Burlington accept sections 3 to 7 inclusive, of Chapter 44B of the General Laws, as approved by its legislative body, a summary of which appears below:

Summary:

Sections 3 to 7 of Chapter 44B of the General Laws of Massachusetts, also known as the Community Preservation Act, establish a dedicated funding source to acquire and preserve open space, parks and conservation land, protect public drinking water supplies and scenic areas, protect farmland and forests from future development, restore and preserve historic properties, and help meet local families' housing needs. In the Town of Burlington, the funding source for these community preservation purposes will be a surcharge of 1.5% on the annual property tax assessed on real property beginning in fiscal year 2024, and by annual distributions made by the state from a trust fund created by the Act.

If approved, the following will be exempt from the surcharge:

1. Property owned and occupied as a domicile by any person who qualifies for low-income housing or low- or moderate-income senior housing in the Town, as defined in Section 2 of said Act;
2. \$100,000 of the assessed valuation of each taxable parcel of class one residential property as defined in M.G.L. c. 59 §2A.
3. \$100,000 of the assessed valuation of each taxable parcel of class three, commercial, and class four, industrial, properties as defined in M.G.L. c.59, §2A.

A taxpayer receiving a regular property tax abatement or exemption will also receive a pro rata reduction in surcharge. A Community Preservation Committee composed of local citizens will make recommendations on the use of the funds and all expenditures must be approved by Town Meeting.

A Community Preservation Committee composed of local citizens will be established by town by-law to study community preservation resources, possibilities and needs and to make annual recommendations to town meeting on spending the funds. All expenditures must be approved by Town Meeting.

The question is approved and the statute accepted if a majority of the voters voting on the ballot question vote "yes."

Hereof fail not and make return of this warrant with your doings thereon at the time and place of said voting.

Given under our hands this 3rd day of October, 2022.
(month)

Selectmen of: Burlington
(City or Town)

POSTING BY CONSTABLE
(Indicate method of service of warrant.)

_____, 2022.
Constable (month and day)

Warrant must be posted by **November 1, 2022** (at least *seven days prior* to the **November 8, 2022** State Election).

Select Board

Item #

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Select Board

Item #

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TOWN OF BURLINGTON
Treasurer & Collector's Office

Gary J. Gianino
Treasurer/Collector

To: Select Board
From: Gary J Gianino 
Subject: 2022 Health Insurance Premiums
Date: September 29, 2022

Christine Sinacola, Benefits Administrator and I will be before the board on October 3, 2022 to discuss the 2023 Health Insurance Program and Proposed Premium adjustments. Attached please find the following documents:

Changes to coverages to the existing health plans:

- NONE

Health Insurance Proposed Rates Effective Calendar Year 2023

Active Employees:

BLUE CROSS:

- BLUE CARE ELECT PPO 4.0%
- BLUE CROSS HMO BLUE 4.0%

HARVARD PILGRIM HEALTH:

- HARVARD PILGRIM BEST BUY 4.0%
- HARVARD PILGRIM HSA PLAN 0.0%

Retirees:

VARIOUS MEDICARE PLANS

- BLUE CROSS MEDEX 0.8%
- BLUE CROSS-MANAGED BLUE 0.3%
- HARVARD MEDICARE ADHANCED 4.1%
- TUFTS PREFERRED HMO 4.0% estimate
- TUFTS PREFERRED SUPPLEMENT 4.0% estimate

The carrier sets these increases.

Attached Documents:

1. Premium Summary
2. Health Plan Coverage- Active

HEALTH INSURANCE PROPOSED RATES EFFECTIVE JANUARY 1, 2023

ACTIVE EMPLOYEE HEALTH PLANS

	2021	2022	2023	Town	Employee
Increase on Blue Care Elect	2.0%	0.0%	4.0%	50.0%	50.0%
Increase on Blue Cross HMO Blue	2.0%	0.0%	4.0%	70.0%	30.0%
Increase on Harvard Pilgrim HMO	2.0%	0.0%	4.0%	70.0%	30.0%
Increase in Harvard HSA plan	2.0%	0.0%	0.0%	70.0%	30.0%

Zero Increase of Premiums for 2022. Voted September 15, 2021 by IAC.
 4% increase in BC plans and HVD best buy 0% increase in HSA Voted 9.14.22 IAC

Est. 2023 Enrollment	CONTRIBUTION		2022 RATES			PROPOSED INCREASE	PROPOSED 2023 RATES			Monthly Increase Per Person		Increase Per 24 Pay Period
	Town	EE	Total Premium	Town Share	Employee Share		Total Premium	Town Share	Employee Share	Town	Employee	
BLUE CARE ELECT PPO												
Individual	8	50.00%	1,149.50	574.75	574.75	45.98	1,195.48	597.74	597.74	22.99	22.99	11.50
Family	1	50.00%	3,080.66	1,540.33	1,540.33	123.23	3,203.89	1,601.94	1,601.94	61.61	61.61	30.81
BLUE CROSS HMO BLUE												
Individual	150	70.00%	957.90	670.53	287.37	38.32	996.22	697.35	298.86	26.82	11.49	5.75
Family	120	70.00%	2,567.27	1,797.09	770.18	102.69	2,669.96	1,868.97	800.99	71.88	30.81	15.40
HARVARD PILGRIM BEST BUY												
Individual	173	70.00%	842.01	589.41	252.60	33.68	875.69	612.98	262.71	23.57	10.11	5.05
Family	246	70.00%	2,135.63	1,494.94	640.69	85.43	2,221.06	1,554.74	666.32	59.80	25.63	12.81
HARVARD PILGRIM HSA PLAN												
Individual	42	70.00%	642.60	449.82	192.78	0.00	642.60	449.82	192.78	0.00	0.00	-
Family	27	70.00%	1,713.60	1,199.52	514.08	0.00	1,713.60	1,199.52	514.08	0.00	0.00	-

767

Participants

MEDICARE PLANS - (Supplement to MEDICARE)

	2021	2022	2023
BLUE CROSS MEDEX	1.40%	1.35%	0.80%
BLUE CROSS MANAGED BLUE	1.20%	1.02%	0.30%
HARVARD MEDICARE ENHANCE	3.20%	1.50%	4.10%
TUFTS PREFERRED - HMO	4.30%	4.40%	4.00% est
TUFTS PREFERRED SUPPLEMENT	5.10%	3.00%	4.00% est

	Est. 2023 Enrollment	2022 Rates						CALENDAR YEAR 2023		
		CONTRIBUTION		Town Share	Employee Share	Set INCREASE	Total Premium	Town Share	Employee Share	
		Town	EE							
<u>ISS MEDEX</u>	51	50.00%	50.00%	454.09	227.04	227.04	3.63	457.72	228.86	228.86
<u>ISS MANAGED BLUE</u>	224	90.00%	10.00%	390.08	351.07	39.01	1.17	391.25	352.13	39.13
<u>Retirees after 07/01/2006</u>	4	85.00%	15.00%	390.08	331.57	58.51	1.17	391.25	332.56	58.69
<u>Retirees after 07/01/2018</u>	129	80.00%	20.00%	390.08	312.07	78.02	1.17	391.25	313.00	78.25
	19	70.00%	30.00%	390.08	273.06	117.02	1.17	391.25	273.88	117.38
<u>MEDICARE ENHANCE</u>	81	90.00%	10.00%	471.34	424.21	47.13	19.33	490.67	441.60	49.07
<u>Retirees after 07/01/2006</u>	91	80.00%	20.00%	471.34	377.07	94.27	19.33	490.67	392.53	98.13
<u>Retirees after 07/01/2018</u>	1	75.00%	25.00%	471.35	353.51	117.84	19.33	490.67	368.00	122.67
	20	70.00%	30.00%	471.34	329.94	141.40	19.33	490.67	343.47	147.20
<u>EFERRED - HMO</u>	2	90.00%	10.00%	356.00	320.40	35.60	14.24	370.24	333.22	37.02
<u>Retirees after 07/01/2006</u>	5	80.00%	20.00%	356.00	284.80	71.20	14.24	370.24	296.20	74.05
<u>Retirees after 07/01/2018</u>	1	70.00%	30.00%	356.00	249.20	106.80	14.24	370.24	259.17	111.07
<u>EFERRED SUPPLEMENT</u>	31	90.00%	10.00%	441.87	397.68	44.19	17.67	459.54	413.59	45.95
<u>Retirees after 07/01/2006</u>	71	80.00%	20.00%	441.87	353.50	88.37	17.67	459.54	367.64	91.91
<u>Retirees after 07/01/2018</u>	33	70.00%	30.00%	441.87	309.31	132.56	17.67	459.54	321.68	137.86

Town of Burlington
Health Plan Coverage Options
January 2023

	Burlington Blue Cross HMO	Burlington Harvard Pilgrim HMO	Burlington Harvard Pilgrim HSA HMO
Individual			
Family			
Deductible	\$1,000 Individual-\$2,000 Family	\$1,000 Individual-\$2,000 Family	\$3,000 Individual-\$6,000 Family
Primary Care	\$20	\$20	Deductible, then covered in full
Specialist	\$20	\$20	Deductible, then covered in full
Chiropractor	\$20	\$20 co-pay (\$500 limit per year)	Deductible, then covered in full
Acupuncture	Not covered	\$20 co-pay (20 visits per year)	Deductible then covered in full (20 visits per year)
Imaging	Deductible then \$100 co-pay (Copay waived if performed at a free standing facility)	Deductible then \$100 co-pay (Co-pay waived if performed at a free standing facility)	Deductible, then covered in full
Prescription-Pharmacy	\$20, \$30, \$50	\$20, \$30, \$50	Deductible then \$20, \$30, \$50
Prescription-Mail Order	\$20, \$30, \$50	\$20, \$30, \$50	Deductible then \$20, \$30, \$50
Outpatient Facility	Deductible then \$0	Deductible then \$0	Deductible, then covered in full
Outpatient Physician	\$0	Deductible then \$0	Deductible, then covered in full
ER	\$200 co-pay	Deductible then \$200 co-pay	Deductible, then covered in full
Urgent Care	\$20	\$20	Deductible, then covered in full
Hospital Admission	Deductible then \$0	Deductible then \$0	Deductible, then covered in full
In Patient Mental Health	\$0	Deductible then \$0	Deductible, then covered in full
Substance Abuse Inpatient	\$0	Deductible then \$0	Deductible, then covered in full
PreNatal Visit	\$0	\$0	\$0
Delivery and Inpatient	Deductible then \$0	Deductible then \$0	Deductible, then covered in full
Home Health Care	\$0	Deductible then \$0	Deductible, then covered in full
Rehabilitation	Deductible then \$20 (up to 60 days per calendar year)	Deductible then \$0 Limited to 60 combined visits per year.	Deductible, then covered in full Limited to 60 combined visits per year.
Habilitation Services	Deductible then \$20 co-pay (Limited to 60 visits per calendar year) Exceptions for early intervention	Deductible then \$0 Limited to 60 consecutive days per year.	Deductible, then covered in full Limited to 60 combined visits per year.
	Burlington Blue Cross HMO	Harvard Pilgrim HMO	Harvard Pilgrim HSA HMO
Skilled Nursing Services	\$0 (up to 100 days per calendar year)	Deductible then \$0 Limited to 100 days per year.	Deductible, then covered in full Limited to 100 days per year.
Durable Medical Equipment	Deductible then 20% coinsurance	Deductible then \$0	Deductible, then covered in full
Hospice	\$0	Deductible then \$0	Deductible, then covered in full
Eye Exam	1 exam every 24 months \$0 co-pay (unless medical diagnosis)	1 exam every year, \$20 co-pay	1 exam every year, \$20 co-pay
Out of Pocket Maximum	\$2,000 per member per calendar year \$4,000 per family per calendar year	\$2,000 per member per calendar year \$4,000 per family per calendar year	\$4,000 per member per calendar year \$8,000 per family per calendar year

NOTE:

Harvard Pilgrim HMO has a deductible rollover that applies to any deductible amount that is incurred for services during the last three months of the calendar year and is applied toward the deductible requirement for the next calendar year.

Select Board

Item #

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Town of Burlington
Special One-Day Alcoholic Beverage License Application
License Fee: \$75.00 to Town of Burlington

Select One:



All Alcohol



Wine/Malt Only

Name of Applicant and/or Organization Applying (name to appear on license):

Town of Burlington Economic Development Office

Full Address: 29 Center Street, Burlington, MA 01803

Applicant's Cell Number: _____ Organization Phone: 781-270-1938

Applicant's Email: emurphy@burlington.org Organization Email: ED@burlington.org

Event Date: October 6, 2022 Hours of Event (from/to) 4:30pm - 8:30pm

Specify name and address of event: Town Center Pocket Park, 184 Cambridge Street

Expected number of attendees: 400 Expected number of vehicles: 150 Number of valets: 0

Have the individual(s) who will be serving alcohol completed an appropriate server-training program: Yes.
Bartenders and/or servers of alcohol, beer and/or wine must have completed an appropriate Massachusetts Alcoholic Beverages Service Training program. Servers must keep certifications with them.

Describe the manner in which alcohol will be served to the guests to ensure compliance with existing laws (check IDs, table service/bar, etc.) and specify the manner by which service of such beverages, if minors are in attendance, will be controlled. Minors are not allowed within the area where alcohol beverages are dispensed.

There will be a temporary secured location (see attached map) and the beer bar set up in that location.

Two/Three TIPS certified employees will be responsible for carding and placing bracelents on all participants' ages 21+, manned by multiple TIPS certified employees who will serve beer and monitor the crowd and alcohol consumption.

We have been assured that this event will be well staffed and monitored closely.

The Town is contracting with Craft'd Company to provide security and necessary logistics.

***The September 22, 2022 Beer Garden was cancelled due to rain. The postponed date is October 6, 2022.

CONTACTS:

- **Contact the Fire Department regarding sprinklers and state crowd manager requirements. 781-270-1925**
- **Contact the Police Department to ascertain the necessary detail. Officer Keith Shepard 781-505-4965.**
- **Contact the Building Department to receive a certificate of inspection and recommendations. 781-270-1615**

Attach a **floor plan of the event area**, showing the exact location where alcoholic beverages will be delivered, sold/served and consumed, and indicate all entrances and exits. The area must be contained so as to not be breached.

If not using a State approved service, Special One-Day licensees must purchase alcoholic beverage from a licensed supplier. Special licensees cannot purchase alcoholic beverages and cannot allow their alcohol server establishments to purchase liquor from a package store and cannot accept donations of alcoholic beverages from anyone, without prior permission. For a list of licensed suppliers, visit: <http://www.mass.gov/abcc/pdf/forms/activelicenseelist/wholesaler.pdf>

By exercising the privileges of this Special One-Day License in serving persons alcoholic beverages, the Licensee is potentially exposed to significant liability and **Licensee is required to carry a minimum of \$1,000,000 of liquor Liability Insurance.** The Town of Burlington shall not be liable to the Licensee or to others if injury or damage shall result from the exercise of this Special One-Day License. By signing this form, the Applicant acknowledges that he/she understands and will comply with all applicable liquor regulations and requests set forth by the Licensing Authority of the Town of Burlington.

Melisa Tintocalis

9/27/2022

Applicant's Signature

Date

Select Board

Item #

654

**Lahey Health 5K Cancer Walk and Run
Burlington, MA
41 Mall Road**

cf. www.usatf.org/routes/view.asp?rID=538246
measured by Marshall McCloskey,

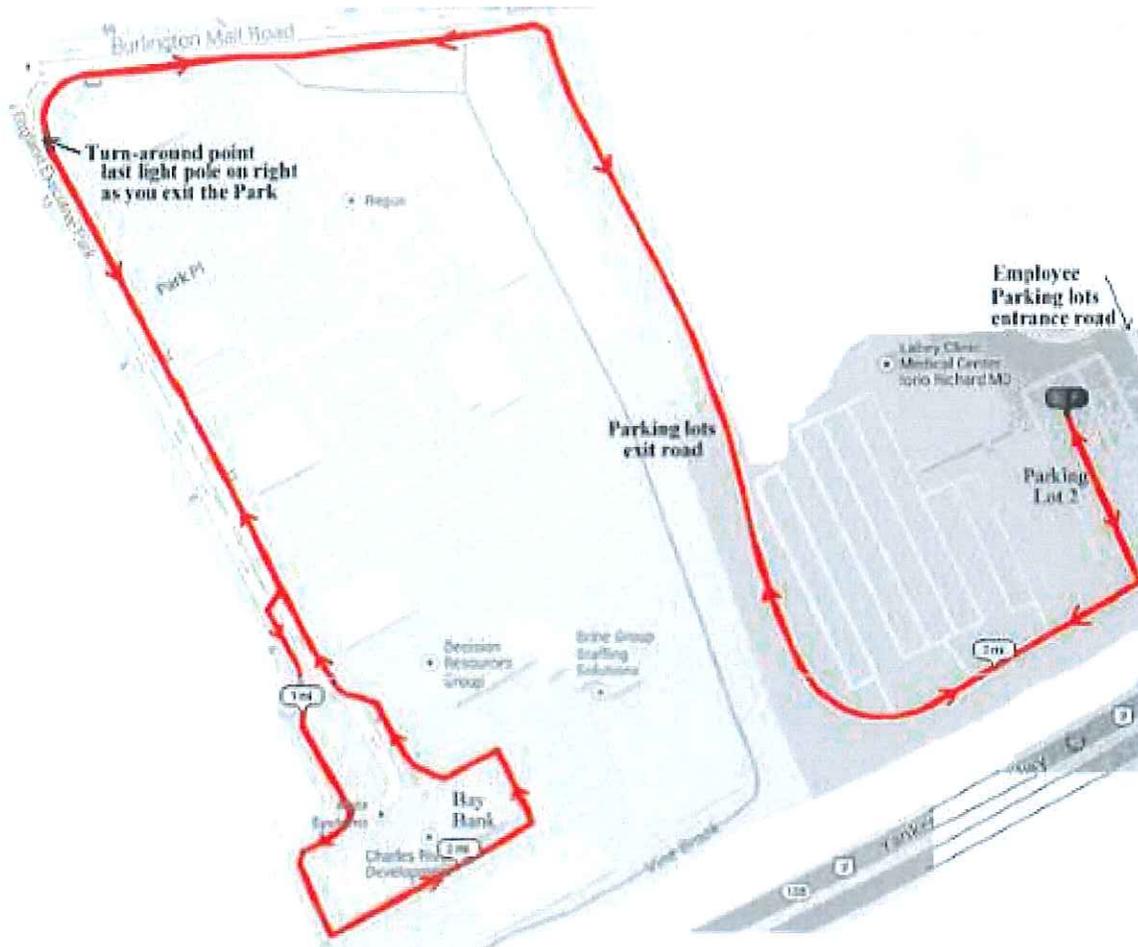


USATF Certification #MA14011JK

Drop 0 m/Km, Separation 0%

The start and finish (same point) is opposite the C-9 pole in the parking lot. The 1 Mile mark is 2' 8" beyond the hatched crosswalk, and 17' before the drain in the road near that point. The 2 mile mark is 18' after the end of the back of the BayBank building - i.e. the right side of the building looking at the back. The 3 mile mark is 26' beyond the drain at the entrance to parking lot 4. (beyond/before refer to the direction the runners are running.)

The runners run on a paved path separated from Burlington Mall Road by a metal barrier. They run the loop in New England Executive Park around the back of the Bay Bank Building twice, back to the turn-around point which is at the last light pole before Burlington Mall Road on the left as you enter the Park, then back again to the Bay Bank Building over the same route.



PLEASE NOTE: This message is intended for the use of the person to whom it is addressed. It may contain information that is privileged, confidential and exempt from disclosure under applicable law. If you are not the intended recipient, your use of this message for any purpose is strictly prohibited. If you have received this communication in error, please delete the message and notify the sender so that we may correct our records. See our web page at <http://www.lahey.org> for a full directory of Lahey sites, staff, services and career opportunities.

Susan McEachern
Administrative Assistant
Select Board / Town Administrator's Office
Town of Burlington
29 Center Street
Burlington, MA 01803
P:(781)270-1850
smceachern@burlington.org

[Quoted text hidden]

Perry, Maria E. <Maria.E.Perry@lahey.org>
To: Susan McEachern <smceachern@burlington.org>

Wed, Sep 28, 2022 at 11:57 AM

Hello Susan

Registration is expected to open at 645am and race should kickoff at 800am. Based on past event operating plans race should start cleanup at 10am.

Please let me know if you have any additional questions.

Lastly, do you happen to know where we will be in the October 3 BOS agenda?

Thank you for working with me on this event!

Regards,

Maria Perry
Associate Director, Special Events
Beth Israel Lahey Health
C 617-666-0077

From: Susan McEachern <smceachern@burlington.org>
Sent: Wednesday, September 28, 2022 11:15:33 AM
To: Perry, Maria E. <Maria.E.Perry@lahey.org>
Subject: Re: Lahey 5K - Event Date Change (Now 6/11/23) and New BOS Mtg Date (10/3/22)

IMPORTANT: The sender of this email is from a source outside of Beth Israel Lahey Health. Please do not click on links or open attachments in this email unless you are certain it is safe to do so. If you are not certain this email is safe, please contact the BILH Help Desk.

[Quoted text hidden]

All email messages and attached content sent from and to this email account are public records unless qualified as an exemption under the Massachusetts Public Records Law.

Susan McEachern <smceachern@burlington.org>
To: "Perry, Maria E." <Maria.E.Perry@lahey.org>

Wed, Sep 28, 2022 at 12:06 PM

Hi Maria,

Thank you for that information. I do not have a set time on the agenda yet, as soon as we have it scheduled I will let you know.

Thanks,
Susan McEachern



Lyn Mills <lmills@burlington.org>

Lahey Clinic Road Race

Thomas Browne <tbrowne@bpd.org>

Wed, Aug 3, 2022 at 11:33 AM

To: Kim Pigott <kpigott@burlington.org>, David Outerbridge <douterbridge@bpd.org>, Lyn Mills <lmills@burlington.org>

Cc: Robert Kirchner <rkirchner@bpd.org>

Hi Kim,

They have been in contact with Deputy Kirchner....he is aware and will weigh in with comments prior to the Select Board meeting.

Thanks,

Tom

Thomas P. Browne

Chief of Police

Burlington Police Department

45 Center St.

Burlington, MA 01803

(781) 505-4901

tbrowne@bpd.org

[Quoted text hidden]

All email messages and attached content sent from and to this email account are public records unless qualified as an exemption under the [Massachusetts Public Records Law](#).

Select Board

Item #

655

LEGAL NOTICE



TOWN OF BURLINGTON
SELECT BOARD PUBLIC
HEARING

The Select Board hereby gives notice that it will hold a Public Hearing on **October 3, 2022 at or after 6:00 P.M.** at the Town Hall, 29 Center Street, Burlington, MA, second floor main meeting room and virtual by Webex to consider the application for approval of Change of Manager/Change of Officer- Director-LLC Manager/Change of Stock Interest for Al Maidah Cuisine 184 Cambridge St. Burlington MA.

The plans and supporting documentation are available for public inspection in the Town Administrator's Office during business hours Monday, Tuesday and Thursday 8:30 a.m. - 4:30 p.m., Wednesday 8:30 a.m. - 7:00 p.m. and Friday 8:30 a.m. - 1:00 p.m. The plans will be available on the Town's website: <https://www.burlington.org/556/Public-Hearings> Select Board public hearing notices are printed in the *Burlington Daily Times Chronicle* and may also be downloaded from the following site:

<https://www.masspublicnotices.org/Search.aspx>

Monday October 3, 2022

<https://townofburlington.webex.com/townofburlington/j.php?MTID=m91f36a148ef571038f2147baea600f26>

Meeting number: 2340 062 0823 Password: JVe658EnSt2

Join by video system Dial 23400620823@townofburlington.webex.com You can also dial 173.243.2.68 and enter your meeting number.

Join by phone +1-408-418-9388 United States Toll Access code: 2340 062 0823

The public hearing of The Burlington Select Board will be held in-person at the location provided on this notice. Members of the Public are welcome to attend this in-person meeting. Please note that while an option for remote attendance and/or participation is being provided as a courtesy to the public, the public hearing will not be suspended or terminated if technological problems interrupt the virtual broadcast, unless otherwise required by law. Members of the public with particular interest in any specific item on this agenda should make plans for in-person vs. virtual attendance accordingly."

SELECT BOARD:

Nicholas C. Priest, Chairman

Michael S. Runyan, Vice Chairman

Joseph E. Morandi

James M. Tigges

Michael W. Espejo



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 MULTIPLE AMENDMENTS

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)

04670-RS-0160

ENTITY/ LICENSEE NAME
 Aisha Jinwala, Inc. / Al Maidah Cuisine

ADDRESS
 184 Cambridge Street

CITY/TOWN
 Burlington

STATE
 Massachusetts

ZIP CODE
 01803

For the following transactions (Check all that apply):

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

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

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



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

APPLICATION FOR MULTIPLE AMENDMENTS

1. BUSINESS ENTITY INFORMATION

Entity Name	Municipality	ABCC License Number
Aisha Jinwala, Inc.	Burlington	04670-RS-0160

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.

Change of Manager and Issuance of Stock and Re-structuring of Stock Interests. A Brother and his Sister and her Husband own the Corporation.

APPLICATION CONTACT

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

Name	Title	Email	Phone
Courtney John Ball	Attorney		

2. AMENDMENT-Change of License Classification

<input type="checkbox"/> Change of License Category	Last-Approved License Category	
All Alcohol, Wine and Malt, Wine Malt and Cordials	Requested New License Category	
<input type="checkbox"/> Change of License Class	Last-Approved License Class	
Seasonal or Annual	Requested New License Class	
<input type="checkbox"/> Change of License Type*	Last-Approved License Type	
i.e. Restaurant to Club *Certain License Types CANNOT change once issued*	Requested New License Type	

3. AMENDMENT-Change of Business Entity Information

<input type="checkbox"/> Change of Corporate Name	Last-Approved Corporate Name:	
	Requested New Corporate Name:	
<input type="checkbox"/> Change of DBA	Last-Approved DBA:	
	Requested New DBA:	
<input type="checkbox"/> Change of Corporate Structure	Last-Approved Corporate Structure	
LLC, Corporation, Sole Proprietor, etc	Requested New Corporate Structure	

4. AMENDMENT-Pledge Information

<input type="checkbox"/> Pledge of License	To whom is the pledge being made:	
<input type="checkbox"/> Pledge of Inventory		
<input type="checkbox"/> Pledge of Stock		

5. AMENDMENT-Change of Manager

Change of License Manager

A. MANAGER INFORMATION

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

Proposed Manager Name Date of Birth SSN

Residential Address

Email Phone

Please indicate how many hours per week you intend to be on the licensed premises Last-Approved License Manager

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
09/05/2022	current	Management Training	Aisha Jinwala, Inc. / Al Maidah Cuisine	Sarfaraz Jinwala
10/2010	04/30/2021	Owner (cook/server, etc.)	JMP Fine Indian Cuisine, Boston, MA	Asmabanu Jinwala

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

6. AMENDMENT-Change of Officers, Stock or Ownership Interest

Change of Officers/Directors
 Change of Ownership Interest (LLC Managers/LLP Partners, Trustees)
 Change of Stock (E.g. New Stockholder/ Transfer or Issuance of Stock)

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
Asmabanu Jinwala	43 Wilmington Road, Burlington, MA 01803		

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
President and Director	45	<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
Mohmadshahid Shaikh	43 Wilmington Road, Burlington, MA 01803	00	

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
Treasurer and Director	45	<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
Sarfaraz Jinwala	43 Wilmington Road, Burlington, MA 01803		

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
Vice President, Secretary and Director	10	<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

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
		<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

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
		<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

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
		<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? Please provide a copy of the management agreement. Yes No

6. AMENDMENT-Change of Officers, Stock or Ownership Interest

6B. CURRENT OFFICERS, STOCK OR OWNERSHIP INTEREST

List the individuals and entities of the current ownership. Attach additional pages if necessary utilizing the format below.

Name of Principal	Title/Position	Percentage of Ownership
Sarfaraz Jinwala	President and Director	50
Asmabanu Jinwala	Secretary and Treasurer	50

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. AMENDMENT-Change of Premises Information

Alteration of Premises: (must fill out attached financial information form)

7A. ALTERATION OF PREMISES

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

PROPOSED DESCRIPTION OF PREMISES

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

Total Sq. Footage	<input type="text"/>	Seating Capacity	<input type="text"/>	Occupancy Number	<input type="text"/>
Number of Entrances	<input type="text"/>	Number of Exits	<input type="text"/>	Number of Floors	<input type="text"/>

Change of Location: (must fill out attached financial information form)

7B. CHANGE OF LOCATION

Last-Approved Street Address	<input type="text"/>
Proposed Street Address	<input type="text"/>

DESCRIPTION OF PREMISES

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

Total Sq. Footage	<input type="text"/>	Seating Capacity	<input type="text"/>	Occupancy Number	<input type="text"/>
Number of Entrances	<input type="text"/>	Number of Exits	<input type="text"/>	Number of Floors	<input type="text"/>

OCCUPANCY OF PREMISES

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

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

Lease

Landlord Name

Landlord Phon

Landlord Email

Landlord Address

Lease Beginning Date

Rent per Month

Lease Ending Date

Rent per Year

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

Yes No

Select Board

Item #

656

TOWN OF BURLINGTON
Use of Burlington Town Common
And Sculpture Park

Use of the Town Common and Sculpture Park areas (together referred to herein as “Town Common”) are subject to the following policies and procedures, and prior approval by the Town Administrator or the Select Board.

Policy & Procedure

All requests for use of the Town Common must be approved in advance by the Town Administrator. Certain requests may require further approval by the Select Board.

REQUEST FOR USE PROCEDURE

Requests shall be submitted in writing to the Town Administrator at least 30 days prior to the event, and provide the following information:

Individual, group, or organization making request along with a description of the organization including any local, national, or international affiliation, a brief history of the organization, the organization’ website address, its nonprofit status, and any other relevant information.

Person in charge – name, address, phone numbers.

Description of activity or event

Date of event – Rain Date (within the same week of proposed date)

Time of event, including start and end time

The need for vehicles to be used and type of vehicles.

The request will be reviewed by the Town Administrator for compliance with the Policy below. Additional information will be requested if necessary. The Town may consider requests made less than 30 days’ prior to the proposed event in its sole discretion.

A letter of approval or disapproval will be sent by United States mail or via electronic mail to the person making the request.

Policy

Use of the Town Common may be restricted to individuals and non-profit groups and organizations that are registered with the Massachusetts Secretary of State and Attorney General’s Office, as well as Town-sponsored events. The purpose of this policy is to promote public safety and good order and protect Town property and resources. The Town will not allow for events that are deemed a threat to public safety, as determined by the Town, in its sole discretion. Multiple events may be allowed on the same day/time if it is determined that they may occur simultaneously without conflict.

All activities and events scheduled on the Town Common must be approved in advance by the Town Administrator. Overnight events are prohibited.

While the reservation for the initial date shall be honored on a "first-come, first-served" basis, reservations for the subsequent dates may not be granted if the Town deems that doing so unduly restricts the use of the Town Common and/or Gazebo by other individuals and organizations.

One portable toilet will be made available for events at no charge. Additional toilets may be made available upon request and upon receipt of payment of associated fees for use.

No vehicles may drive or park upon the Town Common unless authorized by the Town Administrator. The town reserves the right to restrict any vehicular activity for any reason and upon the recommendation of the Burlington Parks and Recreation Director.

An executed liability waiver will be required for all events. Depending on the size and nature of the activity or event, the Town Administrator may require the following additional information:

- Certificates of insurance naming the Town as additional insured.
- Bond
- Deposit
- Police detail
- Custodial coverage
- DPW or Rec. Dept. detail

Care must be taken to prevent damage to the Gazebo, all monuments and stones, trees, shrubs, flower beds, benches, walkways, grass and all other structures and natural features.

The following are PROHIBITED on Town Common property:

- Controlled substances, including tobacco and marijuana
- Alcohol (unless a license has been granted by the Select Board)
- Glass containers
- Open flames, campfires, candlelight vigils (controlled cooking permitted)
- Digging or earth removal

Notwithstanding the foregoing, alcohol may be permitted where the proper one day license is obtained from the licensing authorities and all proper insurance and indemnification related to serving alcohol is obtained and provided to the Town.

All food products and by-products, like water from melted ice that was used for keeping raw fish or meats cold, must be removed from the town common, and not dumped onto

the grass. People sit on the grass all summer long. If there is a question that policing this will be difficult or impossible, the activity will be denied.

Individuals and organizations are responsible for obtaining all necessary permits, including but not limited to, a permit from the Building Inspector for temporary displays or structures, or a permit from the Board of Health for the sale of foods.

Applicant will need to coordinate electricity needs with the Director of Parks and Recreation at least one week prior to the scheduled event.

Dumpsters and/or portable toilets used for events shall be restricted to a specific location near Dearborn and Cambridge Street, as designated and directed by the Town. After the event, the sponsoring group must clean up the Town Common to pre-event condition within 24 hours after the close of the event. Individuals and organizations using the Town Common shall be responsible for any damage incurred by or as a result of their use and are responsible for ensuring that all refuse generated by their use is collected and disposed of properly. If the Town's Department of Public Works is needed to restore any portion of the area to its condition prior to usage, the individual or organization responsible will be billed for these services which may be deducted from any deposit at the Town's sole determination.

All situations not defined in this policy, or requests for exceptions to this policy, must be ruled upon by the Select Board.

- Violations of these regulations will be grounds for immediate suspension of the approved use and/or denial of future use of the common. *

Any requests that involve raising or displaying a flag on the Town Common must also comply with the Town Flag Raising policy. Notwithstanding the foregoing, permitted users of the Town Common may decorate the gazebo but only for the duration of the permitted event and further no such decorations shall be affixed in such a manner that will cause damage to any property or the Town.

Application for Use of Town Common

1.) Name of individual or non-profit entity/organization:

2.) Contact information (email, phone number, and address):

3.) Description of proposed use:

4.) If the applicant is an organization, please provide a description of the organization including any local, national, or international affiliation, a brief history of the organization, the organization's website address (in any), its nonprofit status, and any other relevant information:

5.) Date, time, and duration of event/use:

6.) Explain need for temporary structures, portable toilets, vehicular requirements, etc., if any, and estimated number of people in attendance:

7.) By submitting this application, I hereby acknowledge that I am in receipt of and that I have read and understand the attached Policy for Use of Town Common and agree to abide by all the strictures set forth therein.

Signature

Date

Print Name & Title (if applicable)