



May 1, 2012 ---- April 30, 2013

Fee \$25.00

CITY OF BURLINGTON
SPECIAL EVENT
ENTERTAINMENT PERMIT APPLICATION

[X] Indoor [] Outdoor

PART I
ORGANIZATION

All information in this section is required

BURLINGTON CLERK
TREASURER'S OFFICE

2013 FEB 11 P 12:22

RECEIVED

- 1. Corporation/Sole Proprietor name THIRD PLACE, INC
2. D/B/A (Business Name) AMERICAN FLATBREAD BURLINGTON HEARTH 3. Bus. Phone 861-2999
4. Business Address 115 ST. PAUL ST. BURLINGTON VT 05401
5. Mailing Address SAME
6. Contact person MATT WILSON 7. Contact Phone 802-989-0648
8. Email contact address matt@flatbreadhearth.com

PART II
OPERATION

- 1. Do you currently have a Liquor License? Yes or No
2. Do you currently have an Entertainment Permit/Special Event Permit? Yes or No
3. Proposed Date(s) for this Special Event 2/15/13 ; 2/17/13
4. Proposed Hours for this Special Event 7:00 pm - 2:00 am
5. Proposed Location for this Special Event Specify if event will be on City street or right-of-way
SIGNAL KITCHEN, 71 MAIN ST, BURLINGTON

For this Proposed location please answer the following questions:

- a) Occupancy Load fire watch: 236 standing; no fw 99
b) # of Restrooms 3
c) # of Egresses 2
d) Date of last Fire/Safety Check 6/12
e) Dancing by Patrons? Yes or No
f) Amplified Music? Yes or No
g) Will additional staff and/or security be required? Yes or No

(Continued on back)

**PART III
DESCRIPTION OF ENTERTAINMENT**

Please give DETAILED description of the type of entertainment for which you are applying:

Description We are applying to extend our indoor entertainment permit because we are catering the live musical performances that are likely to go later than our current entertainment permit.

RECEIVED
2013 FEB 11 P 12:28
BURLINGTON CLERK
TREASURER'S OFFICE

STATEMENT OF APPLICANT: Under the pains and penalties of perjury, I affirm that the preceding answers are true to the best of my knowledge and belief. I have read, understand and agree to comply with all City and State conditions, laws, ordinances, regulations and statutes.

DATE SIGNED: 2/11/13
SIGNATURE OF APPLICANT [Signature]

PRINT NAME: MATTHEW WILSON

RELATIONSHIP TO BUSINESS PARTNER

OFFICE USE ONLY

LO - 10205 chk#

Fee Paid \$ 25.00 Date: 2/11/13 Fee Returned \$ _____ Date: _____

At their meeting of 2/13/13, the Burlington City Council License Committee recommended Approval Denial _____

At their meeting of _____, the Burlington City Council _____ this SPECIAL entertainment permit application.