

# **Truro Select Board Special Meeting**

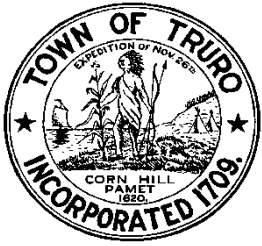
**Thursday, June 4, 2020**

**Remote Meeting-9:00am**

This will be a remote meeting. Citizens can view the meeting on Channel 18 in Truro and on the web on the "Truro TV Channel 18" button under "Helpful Links" on the homepage of the Town of Truro website. Click on the green "Watch" button in the upper right of the page. **To provide comment during the meeting please call in toll free at 1 866 899 4679 and enter the following access code when prompted: 443-201-045.** Please note that there may be a slight delay (15-30 seconds) between the meeting and the live-stream (and television broadcast). If you are watching the meeting and calling in, please lower the volume on your computer or television during public comment so that you may be heard clearly. We ask that you identify yourself when calling in to help us manage multiple callers effectively. Citizens may also provide public comment for this meeting by emailing the Town Manager at [rpalmer@truro-ma.gov](mailto:rpalmer@truro-ma.gov) with your comments.

## **SPECIAL MEETING**

- 1. Open Meeting**
- 2. Public Comment**
- 3. Discussion & Possible Vote on Town Manager Screening Process**
- 4. Discussion on Farmers' Market & Possible Vote on Use of Town Property**
- 5. Review and Approve Seasonal 2020 License: Jules Besch Stationers (Transient Vendor)**
- 6. Adjourn**



# TOWN OF TRURO

## Select Board Agenda Item

**DEPARTMENT:** Licensing Department

**REQUESTOR:** Nicole Tudor, Executive Assistant

**REQUESTED MEETING DATE:** June 4, 2020

**ITEM:** Approval of Seasonal License Renewals for 2020:  
Transient Vendor License: Jules Besch Stationers, 3 Great Hollow Road

**EXPLANATION:** The 2020 Seasonal License renewal for the following: Jules Besch Stationers and the supporting documentation are under the authority of the Select Board as Local Licensing Authorities. Except for food service licenses, if you approve this for renewal, they will be held until Governor Baker's closure of non-essential businesses has ended and only upon compliance with all regulations and receipt of the necessary fees. The Health Department does not license Jules Besch Stationers.

Mass General Law	Licenses & Permits Issued by Board of Selectmen	Names of Businesses
Chapter 101 § 2	<b>Transient Vendor</b> (Seasonal Retail)	<b>Jules Besch Stationers</b> 3 Great Hollow Road

**FINANCIAL SOURCE (IF APPLICABLE):** N/A

**IMPACT IF NOT APPROVED:** The applicant will not be issued their 2020 Transient Vendor (Seasonal Retail) to operate Jules Besch Stationers.

**SUGGESTED ACTION:** *MOTION TO approve the 2020 Transient Vendor (Seasonal Retail) Licenses for Jules Besch Stationers, upon compliance with all regulations and receipt of the necessary fees and Governor Baker's closure of non-essential businesses has ended.*

**ATTACHMENTS:**

1. 2020 Renewal Application-Jules Besch Stationers



# TOWN OF TRURO

PO Box 2030, Truro MA 02666

Tel: 508-349-7004, Extension: 131 or 124 Fax: 508-349-5508

**\$ PAID**  
\$75.00  
#9177  
NT

## LICENSE APPLICATION: Condominiums, Cottage Colonies, Motels, Campgrounds, Lodging, Gas Station/Retail Service, Transient Vendor

### Section 1 – License Type & Hours of Operation

Please check the appropriate box the best describes the license type(s).

☐ New      ☒ Renewal

FACILITY:      # UNITS

HOURS OF OPERATION:

☐ Motel      \_\_\_\_\_

☐ Annual      ☒ Seasonal

☐ Cottage Colony      \_\_\_\_\_
Opening Date: 6-5-20 (?)
☐ Condominium      \_\_\_\_\_
Closing Date: 12-1-20
☐ Campground      \_\_\_\_\_
Days of the Week Open: daily (June - Sept)  
Thurs - Sun (Oct, Nov)
☐ Lodging      \_\_\_\_\_

☒ Transient Vendor

☐ Gas Station (Please submit your Service Station Compliance Form & Third Part Underground Storage Tank Inspection Report (FP 289))

### Section 2 – Business Information

Federal Employers Identification Number (FEIN/SS) \_\_\_\_\_

MICHAEL TUCK

JULES BESCH STATIONERS, INC.

Print Name of Applicant

Business Name

Owner Name

3 GREAT HOLLOW RD TRURO

PO BOX 1169 TRURO

Street Address of Business

Mailing Address of Business

508 487-0395

Business Phone Number

Business E-Mail Address

### Section 3 –MANAGER INFORMATION

☐ Check if New Manager (if checked, MUST submit Application to Name a Manager)

#### **Name of Onsite Manager:**

Name: MICHAEL TUCK Unit Number: \_\_\_\_\_

Mailing Address: BOX 780 TRURO

Phone: (24 Hour Contact): [REDACTED] Email Address: \_\_\_\_\_

**Manager's Signature (REQUIRED)**

#### **Name of Offsite Manager:**

Name: same Business Name: \_\_\_\_\_

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

Phone: (24 Hour Contact): [REDACTED] Email Address: \_\_\_\_\_

**Manager's Signature (REQUIRED)**

#### **Name of Co- Manager:**

Name: \_\_\_\_\_ Business Name: \_\_\_\_\_

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

Phone: (24 Hour Contact): \_\_\_\_\_ Email Address: \_\_\_\_\_

**Co-Manager's Signature (REQUIRED)**

### Section 4 – ATTESTATION

Pursuant to M.G. L. Ch. 62C, sec. 49A, I certify under the penalties of perjury that I, to my best knowledge and belief, have filed all state tax returns and paid all local state taxes required under law and the information I have provided is true and accurate. Any misstatement in this application, or violation of state or applicable town bylaws or regulations, shall be considered sufficient cause for refusal, suspension or revocation of the license.

[Signature]  
Signature of Applicant

MICHAEL TUCK  
Print Name

5-13-20  
Date

### Additional Applications & Documentation

#### **REQUIRED FOR ALL MOTELS, COTTAGE COLONIES, CONDOMINIUMS & CAMPGROUNDS**

- ☐ Smoke detector/fire protection certification
- ☐ IF YOU HAVE EMPLOYEES- Workers Compensation Affidavit & Certificate of Insurance
- ☐ IF YOU DO NOT HAVE EMPLOYEES- Workers Compensation Affidavit
- ☐ Business certificate with the clerk's office

#### **ADDITIONAL (SEPARATE) APPLICATIONS THAT MAY PERTAIN TO YOUR OPERATION**

- ☐ Application for Pool or Hot Tub Permit
  - ☐ Application to Name a Manager
  - ☐ Entertainment License
  - ☐ Application to sell Tobacco
  - ☐ Application for Food Service Permit
- (rev 9/2017)



**The Commonwealth of Massachusetts**  
**Department of Industrial Accidents**  
**1 Congress Street, Suite 100**  
**Boston, MA 02114-2017**  
**www.mass.gov/dia**

**Workers' Compensation Insurance Affidavit: General Businesses.**  
**TO BE FILED WITH THE PERMITTING AUTHORITY.**

**Applicant Information**

**Please Print Legibly**

Business/Organization Name: JULES BESCH STATIONERS, INC

Address: PO BOX 1169

City/State/Zip: TRURO, MA 02666 Phone #: 508 487-0395

**Are you an employer? Check the appropriate box:**

1. ☐ I am an employer with \_\_\_\_\_ employees (full and/or part-time).\*
2. ☐ I am a sole proprietor or partnership and have no employees working for me in any capacity.  
[No workers' comp. insurance required]
3. ☒ We are a corporation and its officers have exercised their right of exemption per c. 152, §1(4), and we have no employees. [No workers' comp. insurance required]\*\*
4. ☐ We are a non-profit organization, staffed by volunteers, with no employees. [No workers' comp. insurance req.]

**Business Type (required):**

5. ☒ Retail
6. ☐ Restaurant/Bar/Eating Establishment
7. ☐ Office and/or Sales (incl. real estate, auto, etc.)
8. ☐ Non-profit
9. ☐ Entertainment
10. ☐ Manufacturing
11. ☐ Health Care
12. ☐ Other \_\_\_\_\_

\*Any applicant that checks box #1 must also fill out the section below showing their workers' compensation policy information.

\*\*If the corporate officers have exempted themselves, but the corporation has other employees, a workers' compensation policy is required and such an organization should check box #1.

***I am an employer that is providing workers' compensation insurance for my employees. Below is the policy information.***

Insurance Company Name: \_\_\_\_\_

Insurer's Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Policy # or Self-ins. Lic. # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**Attach a copy of the workers' compensation policy declaration page (showing the policy number and expiration date).**

Failure to secure coverage as required under Section 25A of MGL c. 152 can lead to the imposition of criminal penalties of a fine up to \$1,500.00 and/or one-year imprisonment, as well as civil penalties in the form of a STOP WORK ORDER and a fine of up to \$250.00 a day against the violator. Be advised that a copy of this statement may be forwarded to the Office of Investigations of the DIA for insurance coverage verification.

***I do hereby certify, under the pains and penalties of perjury that the information provided above is true and correct.***

Signature: [Signature] Date: 5-13-20

Phone #: 508 487-1759

**Official use only. Do not write in this area, to be completed by city or town official.**

City or Town: \_\_\_\_\_ Permit/License # \_\_\_\_\_

Issuing Authority (circle one):

1. Board of Health 2. Building Department 3. City/Town Clerk 4. Licensing Board 5. Selectmen's Office  
6. Other \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone #: \_\_\_\_\_





# TOWN OF TRURO

P.O. Box 2030, Truro, MA 02666

Tel: 508-349-7004, Extension: 110 or 124 Fax: 508-349-5505

## TAX STATUS REQUEST FOR LICENSING (from the Select Board's Office)

Date 4/16/2020

Owner's Name Michael Truck

Business Name Tules Besch Stationers, Inc.

Business Address 3 Great Hollow Road

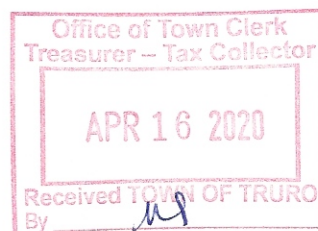
Map and Parcel 42/237.2

Please verify whether the Real Estate and Personal Property taxes to this property are up to date for the current fiscal year.

*All set through FY 19.*

Molly Stevens  
Tax Collector's Signature

4/21/2020  
Date



5-28-20

EMILY BEEBE  
TRURO HEALTH DEPT.

HEALTH DEPARTMENT  
TOWN OF TRURO

JUN 01 2020

RECEIVED BY:

IN ANTICIPATION OF REOPENING FOR THE 2020  
SEASON, WE SUBMIT PRECAUTIONARY PLANS.

ALL PERSONS (INCLUDING MYSELF) SHALL WEAR MASKS  
AT ALL TIMES. HAND SANITIZER WILL BE OFFERED  
ON ENTERING, AND HAND WASHING ENCOURAGED IF  
DESIRED BEFORE LEAVING. AIR FLOW SHALL BE  
MAINTAINED CONSTANTLY WITH WINDOWS OPENED  
ON ALL SIDES OF BUILDING, FANS AND AIR  
CONDITIONERS WHEN NEEDED. AS I WILL BE  
PERSONALLY RUNNING SHOP (NO EMPLOYEES), LIMITING  
CAPACITY TO 8-10 PEOPLE WILL BE MONITORED.  
PLANS ALSO INCLUDE OUTDOOR SEATING FOR WAITING.

THANK YOU.



MICHAEL TUCK  
JULES BESCH STATIONERS  
3 GREAT HOLLOW RD.  
TRURO  
508-487-0395