



**LAKE COMO BOROUGH
1740 MAIN STREET
P.O. BOX 569
LAKE COMO, NJ 07719
(732) 681-3232
MINUTES**

**DATE: SEPTEMBER 1, 2015
REGULAR MEETING IMMEDIATELY FOLLOWING WORKSHOP**

MEETING CALLED TO ORDER

Mayor Wilton called the meeting to order at 7:30pm

SALUTE TO FLAG AND MOMENT OF SILENT PRAYER

SUNSHINE LAW

INTRODUCTION AS REQUIRED UNDER THE SUNSHINE LAW: ADEQUATE NOTICE OF THE MEETING HAS BEEN PROVIDED BY THE ADOPTION OF A RESOLUTION BY THE MAYOR AND COUNCIL ON THE SIXTH DAY OF JANUARY 2015 IN WHICH RESOLUTION THE TIME AND PLACE OF AGENDA AND REGULAR MEETINGS COMMENCING WITH JANUARY 6, 2015 WERE SET FORTH. NOTICE OF SAME WAS DELIVERED TO THE ASBURY PARK PRESS AND THE COAST STAR AND A COPY OF SAME IS POSTED ON THE BULLETIN BOARD IN THE BOROUGH HALL. ALL MEETINGS ARE OPEN TO THE PUBLIC.

ROLL CALL

Douglas Witte	Present
Kevin Higgins	Present
Virginia Kropac	Present
John Carvelli	Excused Absence
Hawley Scull	Present
Michael Noonan	Present

APPROVAL OF MINUTES

Councilwoman Kropac made a motion to approve the minutes from the August 18, 2015 Regular Meeting seconded by Councilman Noonan, all are in favor.

COMMUNICATIONS

No Communications

REPORTS OF COMMITTEES

- Councilman Noonan reported that now that Lake Como is in ownership of the website, a friend of his is willing to donate his time to update the website at no cost to the Borough. Councilman Noonan reported that pertaining to the parking meters, Lake Como will have to go out to public bid for this project. All other matters are in order.

- Councilwoman Scull reported that beginning Wednesday September 16th Lake Como will host Mommy & Me classes in the meeting room. The surveys for residents close in two weeks and Councilwoman Scull urged all residents to complete the survey and give their input. Councilwoman Scull asked if she could form a small committee to meet with John Ciuffo and go over the survey results. All other matters are in order.
- Councilwoman Kropac reported that the date of the next Tourism Commission meeting was changed from September 21, 2015 to September 14, 2015 at 7:30pm. Lake Como Day will be held on October 3rd from 2:00pm-8:00pm and once again will be accompanied by fireworks. Councilwoman Kropac reported that we are still waiting to hear about the application that was submitted for the Community Development Block Grant. Lastly, Councilwoman Kropac congratulated Mayor Wilton for winning \$1,500 for the recreation program in the Belmar Chase. All other matters are in order.
- Councilman Higgins reported that there will be a fundraiser in conjunction with the St. Vincent DePaul Society on September 26, 2015 from 3:00pm-7:00pm. The fundraiser, We Take Care of Our Own, has received a positive response and volunteers have been receiving donations for the gift auction. The second reading of the easement ordinance is on for the tonight for the Hastings property. Councilman Higgins reported that we are working on getting a repaving schedule from Keily and Creamer and that will begin once NJNG finished their project and leaves town and Creamer already began repairing concrete on Main Street. All other matters are in order.
- Councilman Witte reported that all matters are in order.
- Mayor Wilton reported that the business roundtable resulted in Paul's Tavern receiving their façade grant and had new awnings installed. The Valerie Fund reached out to Mayor Wilton to declare September 2015 Childhood Cancer Awareness Month and Sickle Cell Awareness Month. Proclamations will be done at the next meeting to bring awareness to these causes. Mayor Wilton thanked everyone who helped out with the Belmar Chase and it was nice to bring some money back to Lake Como. The money will be put to good use in the recreation department. All other matters are in order.

UNFINISHED BUSINESS

No Unfinished Business

PUBLIC COMMENTS ON NEW BUSINESS

Councilman Witte made a motion to open the meeting to the public seconded by Councilman Higgins, all are in favor.

No Public Comments on New Business

Councilman Witte made a motion to close the meeting to the public seconded by Councilman Higgins, all are in favor.

CONSENT AGENDA

All items listed under this section are considered to be routine by the Borough Council and will be enacted by one motion. There will be no separate discussion on these items. If discussion is desired, that item will be removed from the Consent Agenda and will be considered separately.

Resolution 2015-112
Resolution Appointing for Financial Consultant Services

Resolution 2015-113
Executive Session – Personnel Matters

Councilman Witte made a motion to approve the items on the Consent Agenda seconded by Councilman Higgins, all are in favor.

NEW BUSINESS

Ordinance 2015-907
Second Reading and Public Hearing
Hastings Easement

Offered by Councilman Higgins seconded by Councilwoman Kropac.

Councilman Higgins made a motion to open this Ordinance to the public seconded by Councilwoman Kropac, all are in favor.

No Public Comments

Councilman Higgins made a motion to close this Ordinance to the public seconded by Councilwoman Scull, all are in favor.

Roll Call Vote as Follows:

Yes: Councilmembers Witte, Higgins, Kropac, Scull and Noonan

No: None

Abstain: None

Absent: Councilman Carvelli

PUBLIC COMMENTS

Councilman Witte made a motion to open the meeting to the public seconded by Councilman Higgins, all are in favor.

- Kaitlyn Kanzler of the Coast Star came before the Council to let everyone know that she will no longer be covering Lake Como as their reporter. She thanked everyone for working with her and promised to train our new reporter very well. Mayor Wilton thanked Kaitlyn for all her work in representing Lake Como.

Councilman Witte made a motion to close the meeting to the public seconded by Councilman Higgins, all are in favor.

ALCOHOLIC BEVERAGE CONTROL BOARD

Councilwoman Kropac made a motion to sit as the Alcoholic Beverage Control Board seconded by Councilman Higgins, all are in favor.

ROLL CALL

Douglas Witte	Present
Kevin Higgins	Present
Virginia Kropac	Present
John Carvelli	Excused Absence
Hawley Scull	Present
Michael Noonan	Present

License Number 1347-44-008-003
Person-to-Person Transfer Hearing
Colony Market

Applicant Mr. Pinal Patel came before the Board to express his plans with the property located at 508 18th Avenue. Mr. Patel stated that once the tax clearance comes through and the closing is finalized he plans to shut down and renovate the store portion of this building. Once that is done he will decide what to do with the residence upstairs.

Councilman Higgins made a motion to carry this application to the September 15, 2015 meeting seconded by Councilwoman Kropac, all are in favor.

Councilman Higgins made a motion to sit as the Alcoholic Beverage Control Board seconded by Councilwoman Kropac, all are in favor.

At this point in the meeting councilwoman Scull made a motion to enter into executive session, seconded by Councilman Noonan. The Council will reconvene for purpose of adjournment.

NEXT MEETING

THE NEXT REGULAR MEETING OF THE MAYOR AND COUNCIL WILL BE HELD ON TUESDAY, SEPTEMBER 15, 2015 IMMEDIATELY FOLLOWING THE 7:30PM WORKSHOP MEETING IN THE LAKE COMO MEETING ROOM. ALL MEETINGS ARE OPEN TO THE PUBLIC.

MOTION TO ADJOURN

Councilwoman Kropac made a motion to adjourn seconded by Councilman Higgins, all are in favor.

Respectfully Submitted
Amy L. Boney
Deputy Borough Clerk

The minutes of this meeting are not verbatim. Please call Borough Hall at (732)681-3232 to schedule an appointment to hear the tape(s) of this meeting in its entirety. All tapes are subject to being destroyed 80 days after the approval of the Minutes.

RESOLUTION NO. 2015-112
FINANCIAL CONSULTANT SERVICES

WHEREAS, Mayor Wilton is appointing Hodulik and Morrison, PA, Highland Park, NJ to provide financial consultant services by providing assistance in the maintenance of the Borough's general ledger and its subsidiary ledgers of the Borough of Lake Como.

NOW THEREFORE, BE IT RESOLVED that the Mayor and Council of the Borough of Lake Como authorizes the Mayor and Borough Clerk to enter into a Contract with Hodulik and Morrison PA, Highland Park, NJ for said services.

Dated: 9/1/2015

Brian T. Wilton
Mayor

Louise A. Mekosh, RMC,CMC,CMFO
Borough Clerk/Administrator

RESOLUTION 2015-113

WHEREAS, the Open Public Meetings Act, P.L. 1975, Chapter 231 permits the exclusion of the public from a meeting in certain circumstances; and

WHEREAS, the Mayor and Council is of the opinion that such circumstances presently exist; and

WHEREAS, the Governing body wishes to discuss:

Personnel Matters

Minutes will be kept and once the matter involving the confidentiality of the above no longer requires that confidentiality, then the minutes can be made public.

NOW THEREFORE BE IT RESOLVED that the public be excluded from this meeting.

Dated: 09/01/2015

Brian T. Wilton
Mayor

Louise A. Mekosh, RMC, CMC, CMFO
Borough Clerk/Administrator

BOROUGH OF LAKE COMO, MONMOUTH COUNTY, STATE OF NEW JERSEY

ORDINANCE NO. 2015-907

**ORDINANCE OF THE BOROUGH OF LAKE COMO
ACCEPTING A UTILITY EASEMENT FROM JOHN HASTINGS
ON A PORTION OF LOT 6 IN BLOCK 31**

WHEREAS, in order to complete the Borough's water improvement project an easement over and under property known as Block 31 Lot 6 to install underground water lines is required; and

WHEREAS, John Hastings, the owner of the property, has agreed to convey an Easement to the Borough upon the terms set forth as Exhibit A attached hereto including consideration of \$4,000.00; and

WHEREAS, the Borough Engineer has reviewed the metes and bounds description attached to the Deed of Easement and has found same to be in conformity with the Project and hereby recommends acceptance of the Deed of Easement; and

WHEREAS, the Borough Council has, after consultation with its legal and engineering professionals, determined that it is in the public interest to accept the Deed of Easement and pay consideration therefore;

NOW, THEREFORE, BE IT ORDAINED by the Borough Council of the Borough of Lake Como, County of Monmouth, and State of New Jersey as follows:

SECTION 1: The Council, Borough Clerk and Borough Attorney are hereby authorized and directed to take all steps and execute any documents which are reasonably necessary to accept the Deed of Easement;

SECTION 2: The Treasurer is authorized and directed to issue a check in the amount of \$4,000.00 payable to John Hastings from the Ordinance Number 14-896 Bond proceeds;

SECTION 3: All Ordinances or parts of Ordinances inconsistent herewith are hereby repealed to the extent of such inconsistency;

SECTION 4: If any section, paragraph, subsection, clause or provision of this Ordinance shall be adjudged invalid, such adjudication shall apply only to the section, paragraph,

subsection, clause or provision so adjudged and the remainder of the Ordinance shall be deemed valid and affective;

SECTION 5: This Ordinance shall take effect upon final passage and publication as provided by law.

SO ORDAINED, as aforesaid.

ADOPTED ON FIRST READING
DATED:

LOUISE A. MEKOSH,
Borough Clerk

ADOPTED ON SECOND READING
DATED:

LOUISE A. MEKOSH,
Borough Clerk

APPROVAL BY THE MAYOR ON THIS ____ DAY OF _____, 2015

BRIAN WILTON,
Mayor

Prepared by:

MARGUERITE M. SCHAFFER, ESQ.

DEED OF EASEMENT FOR UTILITIES

THIS DEED OF EASEMENT made this _____ day of _____, 2015 between **JOHN HASTINGS** of 22 Farrand Drive, Parsippany, New Jersey hereinafter called "**GRANTOR**" and the **BOROUGH OF LAKE COMO**, a Municipal Corporation of the State of New Jersey, hereinafter called the "**GRANTEE**,"

WITNESSETH:

FOR AND IN CONSIDERATION of the sum of Four Thousand Dollars (\$4000.00) and other good and valuable consideration, the Grantor does hereby grant, transfer and convey unto the Grantee, its successors and assigns, a permanent open and unobstructed utility easement, which consists of a strip of land of variable width, a part of Lot 6 in Block 31 on the Tax Map of the Borough of Lake Como commonly known as 405 Seventeenth Avenue, hereinafter referred to as "the Property." The easement area is more particularly described on SCHEDULE "A", which is attached hereto and made a part hereof.

SAID PERMANENT EASEMENT shall and is intended to provide access in perpetuity over, under and across the Grantor's property as described herein for the purpose of constructing, operating, improving, modifying, replacing or maintaining an underground water piping system and necessary improvements related thereto together with the right of ingress and egress over, under and across all adjoining lands of the owner as may be reasonably necessary for the exercise of the rights granted herein. Said permanent easement, including the benefits and burdens, are binding upon and inure to the benefit of all persons owning or claiming any interest in the Property, and shall be deemed to run with the land and shall not be severed from the land which is benefitted by the same.

Grantors further grant to Grantee a TEMPORARY CONSTRUCTION EASEMENT if required over the easement premises and outside of the actual location of the easement for the purpose of installing, constructing, replacing or removing as necessary from time to time, the equipment required or desired for the use and purposes named above. Construction will not begin until after September 7, 2015.

Grantor reserves the right to use the easement premises in any manner which will not damage, impair, prevent or interfere with Grantee's utilities equipment or its exercise of the rights granted hereunder. Grantor will not build any structure upon or substantially alter the easement area, without the advance written consent of the Grantee.

The Grantee, its successors and assigns shall have the right to install piping below grade within the easement area. Grantee shall be obligated to restore, stabilize and seed all areas disturbed, repave if paving disturbed and replace any plants or trees damaged during the installation, maintenance or repair of any structures within the easement area.

TR#: _____

STATE OF NEW JERSEY
DEPARTMENT OF LAW AND PUBLIC SAFETY
DIVISION OF ALCOHOLIC BEVERAGE CONTROL

Action ID Code

FEE: _____

[] [] [] []
A W D U

DATE: _____

RETAIL LIQUOR LICENSE APPLICATION

STATE ASSIGNED LICENSE NUMBER

1347 - 44 - 008 - 004

DATE APPLICATION FILED:

03 / 24 / 2015

[For DIVISION use only _____]

CODE TYPE OF LICENSE (CHECK ONE)

CLASS C LICENSES [R.S. 33:1-12]

THIS APPLICATION IS FOR:

- 31 _____ Club
- 32 _____ Plenary Retail Consumption
w/Broad Package Privilege
- 33 _____ Plenary Retail Consumption
- 36 _____ Plenary Retail Consumption
(Hotel/Motel Exception)
- 37 _____ Plenary Retail Consumption
(Theatre Exception)
- 35 _____ Seasonal Retail Consumption
(November 15 through April 30)
- 34 _____ Seasonal Retail Consumption
(May 1 through Nov. 14)
- 44 X _____ Plenary Retail Distribution
- 43 _____ Limited Retail Distribution

- _____ A New License
- X _____ Person to Person Transfer
(incl. Partnership change,
except Ltd. Partnership)
- _____ Place to Place Transfer
(including expansion of premises)
- _____ Change of Corporate Structure
- _____ Extension of License (To Executor,
Receiver, Administrator, etc.)
- _____ Renewal of License
- _____ Amendment of Application on File
- _____ Other _____

OTHER

- 14 _____ Annual State Permit
(R.S. 33:1-42. NJAC 13:2-52)

This Area is Reserved for Municipal Use

Municipal Fee \$ 360⁰⁰

Effective Date: _____ / _____ / _____

(As Stated in Resolution. Date of resolution unless otherwise established.)

State Fee: \$ _____

Date Denied _____ / _____ / _____

(As Stated in Resolution)

Refund Amount \$ _____

Special Conditions Attached: _____ Yes _____ No

Type or Print Name (Last name, first, middle Initial) of Municipal Clerk or ABC Secretary

Signature of Municipal Clerk or ABC Secretary

STATE ASSIGNED LICENSE NUMBER: 1347 - 44 - 008 - 004

Application is made on behalf of: 2

- 1 = An Individual
- 2 = Business Corporation
- 3 = A Partnership
- 4 = Unincorporated Club
- 5 = Incorporated Club
- 6 = Limited Partnership
- 7 = Limited Liability Company

2.1 NAME(S) AS IT DOES OR WILL APPEAR ON THE LICENSE CERTIFICATE (NOT "TRADE" NAME):
License may held by individual (last name, first, middle Initial), partnership or Corporation.

KARAN TWO , INC.

(Last Name, First, Middle Initial or Corporate Name)

2.2 ACTUAL ADDRESS WHERE THE LICENSE IS TO BE USED (SITED PREMISES) N/A

Street Address 508 18TH AVENUE
 Number Street Name
 Municipality LAKECOMO NEW JERSEY Zip 07719

Telephone number of business (732) 919 2026
 Area Exchange Number

2.3 If no licensed premises exists or if mailing address is different than the "actual address" given above, provide the mail address: (Insert N/A If not applicable).

Street Address NOT APPLICABLE
 Number Street Name
 P.O.Box # _____ Municipality _____ State NJ
 Zip _____ Telephone (____) _____ - _____

2.4 New Jersey Sales Tax Certificate of Authority No. 471-520-690/000

2.5 TRADE NAME(S) UNDER WHICH BUSINESS IS TO BE CONDUCTED. ALL TRADE NAMES MUST BE LISTED AND REGISTERED WITH THE N.J. SECRETARY OF STATE [If a corporation] OR COUNTY CLERK [If a partnership or sole proprietor]:

COLONY MARKET

2.6 THE FOLLOWING QUESTIONS ARE TO BE ANSWERED BY ALL APPLICANTS OTHER THAN APPLICANTS FOR A NEW LICENSE:

- A. IS THE LICENSE ACTIVELY USED AT AN OPERATING PLACE OF BUSINESS?
X Yes _____ No
- B. IF NO, GIVE THE DATE THE BUSINESS STOPPED OPERATING (OR THE DATE THE LICENSE WAS ORIGINALLY ISSUED IF NEVER SITED AT AN OPERATING BUSINESS):
____ / ____ / ____
- C. IF THE LICENSE IS INACTIVE AND THE APPLICATION IS FOR A TRANSFER, WILL THE LICENSE BE USED AT AN OPERATING PLACE OF BUSINESS AFTER APPROVAL?
____ Yes X No

2.7 THE FOLLOWING QUESTIONS ARE TO BE ANSWERED BY AN APPLICANT FOR A NEW LICENSE:

- A. WILL THE LICENSE BE USED AT AN OPERATING PLACE OF BUSINESS IMMEDIATELY UPON ISSUANCE?
____ Yes _____ No N/A
- B. NO. PROVIDE ANTICIPATED DATE OF LICENSE ACTIVATION:
____ / ____ / ____

STATE ASSIGNED LICENSE NUMBER: 1347 - 44 - 008 - 004

The following questions identify information about the licensed premises. This describes the area or place which is to be licensed for the sale, service, consumption, delivery, receipt, or storage of alcoholic beverages if the license is Inactive and NOT SITED AT A PLACE OF BUSINESS, answer question 31 only, entering N/A for "not applicabl?" [If you use N/A as a response to questions 3.1, question 2.2 on Page 2 should also be answered N/A].

3.1 HOW MANY SEPARATE BUILDINGS ARE TO BE INCLUDED UNDER THIS LICENSE? N/A

If more than one building is to be included under this license, a separate page number three is to be submitted covering each building.

An up-to-date sketch of the entire licensed premises should be submitted for inclusion in the State ABC license file.

3.2 BUILDING NO. 1 OF 1 TO BE LICENSED.

3.3 IS THE ENTIRE BUILDING TO BE LICENSED? Yes X No

If the answer to question 3.3 is "No", specify which floors are to be under license and wch ones are not by answering the following questions:

3.4	Basement	<u> </u> Yes	<u> </u> No	All of It	<u> </u> Yes	<u> </u> No
	1st floor	<u> X </u> Yes	<u> </u> No	All of It	<u> X </u> Yes	<u> </u> No
	2nd floor	<u> </u> Yes	<u> X </u> No	All of It	<u> </u> Yes	<u> </u> No
	3rd floor	<u> </u> Yes	<u> </u> No	All of It	<u> </u> Yes	<u> </u> No

Specify each additional floor number to be Included under this license:

If only part of any floor is to be licensed, attach a more detailed explanation with sketches to clearly delineate licensed from unlicensed areas.

3.5 ARE ANY GROUNDS ADJACENT TO THE BUILDING UNDER LICENSE TO BE INCLUDED AS PART OF THE LICENSED PREMISES?

 Yes X No

3.6 IS THERE ANY UNLICENSED AREA LOCATED BETWEEN BUILDINGS UNDER THIS LICENSE OR BETWEEN LICENSED ADJACENT GROUNDS?

 Yes X No

IF ANSWER IS "YES," ATTACH A SKETCH OF THE LICENSED AND UNLICENSED AREAS SHOWING DIMENSIONS IN FEET.

3.7 DOES THE APPLICANT OWN THE BUILDING? Yes X No

IF "YES", IS THERE A MORTGAGE ON THE BUILDING? X Yes No

DOES THE APPLICANT LEASE THE BUILDING? X Yes No

If there is a mortgage on the property, answer question 3.8. If the licensed premise is leased, answer question 3.9.

3.8 MORTGAGEE (HOLDER OF MORTGAGE):

INDUS AMERICAN BANK

(Last Name, First Name, Middle Initial or Corporate Name)

Street Address 10 SCHALKS CROSSING ROAD SUITE # 102
Number Street Name

P.O. Box # Municipality PLAINSBORO State NEW JERSEY
Zip 08563 -

3.9 LANDLORD (HOLDER OF LEASE):

KARAN TWO REALTY LLC

(Last Name, First Name, Middle Initial or Corporate Name)

Street Address 22 RUSSET LANE
Number Street Name

P.O. Box # Municipality FARMIGDALE State NJ

STATE ASSIGNED LICENSE NUMBER: 1347 - 44 - 008 - 004

Zip 07727 - _____

4.1 IS THE NEAREST ENTRANCE OF THE PLACE TO BE LICENSED WITHIN 200 FEET OF THE NEAREST ENTRANCE OF ANY CHURCH OR SCHOOL? _____ Yes No

IF ANSWER IS "YES", IS A WAIVER SIGNED BY THE APPROPRIATE OFFICIAL ATTACHED TO THIS APPLICATION? _____ Yes _____ No

4.2 DOES THE APPLICANT INTEND TO USE ANY VEHICLES FOR TRANSPORT OR DELIVERY OF ALCOHOLIC BEVERAGES? _____ Yes No (TRANSIT INSIGNIA IS NECESSARY BEFORE BEVERAGES MAY BE TRANSPORTED.)

4.3 HAS THE APPLICANT FILED AN ANNUAL SPECIAL TAX REGISTRATION AND RETURN FORM (ATF F 5630.5) WITH THE BUREAU OF ALCOHOL, TOBACCO AND FIREARMS?
_____ Yes _____ No **NOT APPLICABLE**

IF "YES", DATE FILED: _____ / _____ / _____

4.4 WILL ANY BUSINESS OTHER THAN THE SALE OF ALCOHOLIC BEVERAGES BE CONDUCTED ON THE PREMISES TO BE LICENSED? Yes _____ No

IF THE ANSWER IS "YES". INDICATE THE NATURE OF THE BUSINESS AND WHO WILL CONDUCT IT BY RESPONDING TO THE FOLLOWING QUESTIONS:

- | | | |
|---|---|--------------------------------|
| <input type="checkbox"/> Restaurant | <input type="checkbox"/> Applicant | <input type="checkbox"/> Other |
| <input type="checkbox"/> Catering | <input type="checkbox"/> Applicant | <input type="checkbox"/> Other |
| <input type="checkbox"/> Hotel/Motel | <input type="checkbox"/> Applicant | <input type="checkbox"/> Other |
| <input type="checkbox"/> Amusements | <input type="checkbox"/> Applicant | <input type="checkbox"/> Other |
| <input checked="" type="checkbox"/> N.J. Lottery | <input checked="" type="checkbox"/> Applicant | <input type="checkbox"/> Other |
| <input type="checkbox"/> Grocery or Delicatessen | <input type="checkbox"/> Applicant | <input type="checkbox"/> Other |
| <input checked="" type="checkbox"/> Other (specify) | <input checked="" type="checkbox"/> Applicant | <input type="checkbox"/> Other |

0250 - 44 - 001 - 012

4.5 IF SOMEONE OTHER THAN THE APPLICANT WILL OPERATE THE OTHER BUSINESS ON THE LICENSED PREMISES, ANSWER THIS QUESTION. IF THERE IS MORE THAN ONE INDIVIDUAL OR COMPANY, ATTACH A SEPARATE PAGE LISTING THE REQUESTED INFORMATION FOR EACH OPERATOR.

Business to be operated NOT APPLICABLE

Name of Company/Individual _____
(Last Name, First Name or Corporate Name)

Street Address _____

Municipality _____ Number _____ Street Name _____ State _____

Zip _____ - _____ NJ Sales Tax Certificate of Authority No. _____

STATE ASSIGNED LICENSE NUMBER: 1347 - 44 - 008 - 004

ALL APPLICANTS ANSWER THE FOLLOWING

6.1 HAS THE APPLICANT EVER BEEN DENIED A LIQUOR LICENSE IN NEW JERSEY?

 Yes X No

IF THE ANSWER TO THIS QUESTION IS "YES"; ANSWER THE FOLLOWING:

Type of License or Permit Denied: Retail Wholesale Transportation
 Warehouse Manufacturer

Unit of Government which denied License or Permit: _____

Date of Denial (approximate If not known) / /

Reason for Denial _____

6.2 HAS ANY CORPORATION, PARTNERSHIP OR INDIVIDUAL MENTIONED IN THIS APPLICATION, OTHER THAN THE APPLICANT, BEEN DENIED A LIQUOR LICENSE OR PERMIT? Yes X No

IF THE ANSWER IS "YES", ANSWER THE FOLLOWING:

Name of Entity _____

Type of License or Permit Denied: Retail Wholesale Transportation
 Warehouse Manufacturer

Unit of Government which denied License or Permit: _____

Date of Denial (approximate If not known) / /

Reason for Denial _____

6.3 HAS THE APPLICANT OR ANY OTHER PERSON, CORPORATION OR ENTITY MENTIONED IN THIS LICENSE APPLICATION, OR ANYONE WITH A BENEFICIAL INTEREST IN IT, HAD AN INTEREST IN A NEW JERSEY ALCOHOLIC BEVERAGE LICENSE WHICH WAS SURRENDERED, SUSPENDED OR HAD A PENALTY IMPOSED IN LIEU OF SUSPENSION, NOT RENEWED, REVOKED OR CANCELLED WITHIN THE 10 YEARS PRIOR TO THE DATE OF THIS APPLICATION? Yes X No

IF THE ANSWER IS "YES", PROVIDE DETAILS OF EACH BELOW (Complete a separate page 6 for each action):

Name of individual _____

DATE OF ACTION / / DOCKET NO.

PENALTY WAS IMPOSED BY: _____
[Indicate whether by Div., ABC or Identify Local Issuing Authority]

PENALTY CONSISTED OF:

 FINED \$ NOT RENEWED
 [Amount]
 SUSPENDED REVOKED CANCELLED
 [no. of days]
 OTHER [explain] _____

6.4 HAS THE APPLICANT OR ANY OTHER PERSON OR CORPORATION MENTIONED IN THIS LICENSE APPLICATION, OR ANYONE WITH A BENEFICIAL INTEREST IN THE BUSINESS UNDER LICENSE OR TO BE LICENSED EVER BEEN CONVICTED OF A CRIMINAL OFFENSE? Yes X No

A. IF THE ANSWER IS "YES", ANSWER THE FOLLOWING:

Name of Individual _____

Date of Birth / / Conviction Date: / /
State Court Of Jurisdiction

Description of offense (specific charge) _____

Disposition (fine, penalty, etc.) _____

Nature of Interest In entity to be licensed _____

B. If applicable, provide the date the Director of N.J. Division of Alcoholic Beverage Control issued an order approving or disapproving disqualification removal: / / (NO license may be issued without an order from the Director, Division of Alcoholic Beverage Control determining no disqualification or removing disqualification. (See R.S. 33:1-31.2 and N.J.A.C. 13:2-15)).

Provide Agency Docket No. [NN]- _____

STATE ASSIGNED LICENSE NUMBER: 1347 - 44 - 008 - 004

ALL APPLICANTS OTHER THAN CLUB LICENSE ANSWER THE FOLLOWING

7.1 DOES THE APPLICANT, A MEMBER OF THE APPLICANT'S IMMEDIATE FAMILY (SPOUSE, CHILDREN, PARENTS, IN-LAWS OR SIBLINGS), OR ANY PERSON WITH A BENEFICIAL INTEREST IN THE SUBJECT LICENSE OF 11-115 APPLICATION, HAVE ANY INTEREST IN ANY OTHER NEW JERSEY ALCOHOLIC BEVERAGE LICENSE?

Yes No

IF THE ANSWER IS "YES", COMPLETE THE FOLLOWING BY LISTING THE NEW JERSEY LIQUOR LICENSE TWELVE DIGIT NUMBER(S), AND THE NAME(S) OF THE PERSON(S) OR CORPORATION(S) WHO HOLD(S) SUCH INTEREST. USE ADDITIONAL PAGE(S)AS NEEDED.

A. License number 1529 - 44 - 001 - 004

Name KARAN ONE INC.
(Last Name, First, Middle Initial or Corporate Name)

Relationship to applicant SELF

B. License number 1529 - 44 - 001 - 004

Name KARAN ONE INC.
(Last Name, First, Middle Initial or Corporate Name)

Relationship to applicant SPOUSE

B. License number ____ - ____ - ____ - ____

Name _____
(Last Name, First, Middle Initial or Corporate Name)

Relationship to applicant _____

7.2 WOULD ANY PERSON OR CORPORATION NAMED IN THIS APPLICATION FAIL TO QUALIFY FOR OWNERSHIP OF THE LICENSE IF APPLYING AS AN INDIVIDUAL, BECAUSE OF AGE, CRIMINAL CONVICTION OR PROHIBITED INTERESTS IN OTHER LICENSES?

Yes No

IF THE ANSWER IS "YES", ANSWER THE FOLLOWING BY INSERTING THE NAME OF THE INDIVIDUAL OR CORPORATION, THE SOCIAL SECURITY NUMBER AND DATE OF BIRTH IF AN INDIVIDUAL. USE ADDITIONAL PAGE(S) 7 AS NEEDED.

Name _____
(Last Name, First, Middle Initial or Corporate Name)

Social Security number ____ - ____ - ____ - ____ or

N.J Sales Tax Certificate of Authority No. _____

Date of birth ____ / ____ / ____

STATE ASSIGNED LICENSE NUMBER: 1347 - 44 - 008 - 004

ALL APPLICANTS ANSWER THE FOLLOWING

8.1 DOES THE APPLICANT OR ANYONE MENTIONED IN THIS APPLICATION OWE THE STATE OF NEW JERSEY OR THE UNITED STATES ANY LICENSE FEE. PENALTY, INTEREST OR ALCOHOLIC BEVERAGE TAX. WHICH HAS ACCRUED PURSUANT TO THE ALCOHOLIC BEVERAGE TAX LAW, THE ALCOHOLIC BEVERAGE LAW, OR ANY OTHER NEW JERSEY OR FEDERAL LAW? Yes No

8.2 HAS THE LICENSE BEEN ISSUED, OR IS IT BEING REQUESTED TO BE ISSUED FOR A HOTEL/MOTEL, AS AN EXCEPTION TO THE POPULATION RESTRICTION UNDER THE PROVISIONS OF R.S. 33:1-12.20? Yes No

IF THE ANSWER IS "YES" IS IT FOR A HOTEL/MOTEL FACILITY OF 50 OR 100 ROOMS?
CHECK ONE: 50 ROOMS 100 ROOMS

8.3 HAS THE LICENSE BEEN ISSUED, OR IS IT BEING REQUESTED TO BE ISSUED AS AN EXCEPTION TO THE TWO LICENSE LIMITATION LAW (R.S. 33:1-12:32) FOR A MOTEL/MOTEL, RESTAURANT, BOWLING ALLEY OR INTERNATIONAL AIRPORT? Yes No

IF THE ANSWER IS "YES", CHECK ONE OF THE FOLLOWING: HOTEL/MOTEL
 RESTAURANT BOWLING ALLEY INTERNATIONAL AIRPORT

THE FOLLOWING ARE TO BE ANSWERED WHEN APPLICATION IS FOR A LICENSE TRANSFER.

8.4 LICENSE NUMBER SOUGHT TO BE TRANSFERRED 1347 - 44 - 008 - 004

8.5 IF THIS IS A REQUEST FOR A PERSON TO PERSON TRANSFER, INSERT NAME(S) OF PERSON (Last Name First), PARTNERSHIP OR CORPORATION CURRENTLY HOLDING THE LICENSE:

YAVARONE JAMES A

(Last Name, First Name, Middle Initial or Corporate Name)

8.6 IF THIS IS A REQUEST FOR A PLACE TO PLACE TRANSFER OF A POCKET LICENSE (NO SITED PREMISES) MARK AN X HERE: N/A

IF THIS IS A REQUEST FOR A PLACE TO PLACE TRANSFER OF A SITED LICENSE, INSERT THE ADDRESS OF THE CURRENT SITE FROM WHICH THE LICENSE IS TO BE TRANSFERRED.

Street Address N/A
Municipality _____ Number _____ Street Name _____ Zip _____ - _____
New Jersey

THE FOLLOWING ARE TO BE ANSWERED BY APPLICANTS FOR A NEW LICENSE OR A LICENSE TRANSFER.

8.7 INSERT THE ANTICIPATED DATES WHEN PUBLIC NOTICE OF APPLICATION WILL BE PUBLISHED. PUBLICATION MAY NOT BE SOONER THAN THE DATE OF FILING OF THIS APPLICATION.

Date of first notice 04 / 02 / 2015 Date of Second notice 04 / 09 / 2015

8.8 NAME OF NEWSPAPER TO PUBLISH NOTICE _____

8.9 THE FOLLOWING ARE TO BE ANSWERED BY CORPORATIONS REPORTING A CHANGE OF CORPORATE STRUCTURE WHEREIN A NEW STOCKHOLDER ACQUIRES MORE THAN 1 PER CENT OF THE STOCK OF THE LICENSED COMPANY (ONE PUBLICATION OF NOTICE REQUIRED).

Date of notice _____ / _____ / _____
Name of newspaper publishing notice NOT APPLICABLE

THE FOLLOWING QUESTIONS ARE FOR CLUB LICENSE APPLICANTS ONLY:

8.10 HAS THE CLUB BEEN IN ACTIVE OPERATION IN THE STATE OF NEW JERSEY FOR AT LEAST THREE YEARS CONTINUOUSLY IMMEDIATELY PRIOR TO THE SUBMISSION OF ITS APPLICATION FOR A LICENSE? Yes No

8.11 IS THE APPLICANT A CONSTITUENT UNIT, CHARTERED OR OTHERWISE DULY ENFRANCHISED CHAPTER OR MEMBER CLUB OF A NATIONAL OR STATE ORDER? Yes No

8.12 HAS THE CLUB HAD EXCLUSIVE POSSESSION AND USE OF CLUB QUARTERS FOR THREE CONTINUOUS YEARS? Yes No

8.13 DOES THE CLUB HAVE AT LEAST 60 VOTING MEMBERS? Yes No

STATE ASSIGNED LICENSE NUMBER: 1347 - 44 - 008 - 004

ALL APPLICANTS ANSWER THE FOLLOWING

9.1 DOES ANY INDIVIDUAL PARTNERSHIP, CORPORATION OR ASSOCIATION OTHER THAN THE APPLICANT HAVE AN INTEREST DIRECTLY OR INDIRECTLY IN THE LICENSE APPLIED FOR OR IS THE STOCK OF ANY STOCKHOLDER HELD IN ESCROW OR PLEDGED IN ANY WAY?

Yes No

IF THE ANSWER IS "YES", ANSWER THE FOLLOWING, USING A SEPARATE PAGE 9 FOR EACH INDIVIDUAL OR CORPORATION OF INTEREST. ATTACH A SEPARATE PAGE OF EXPLANATION IF MORE SPACE IS NEEDED.

Name of Individual (Last Name First) or Corporation

INDUS AMERICAN BANK

(Last Name, First Name, Middle Initial or Corporate Name)

Street Address 10 SCHALKS CROSSING ROAD SUITE # 102
Number Street Name

P.O. Box # _____ Municipality PLAINSBORO State NEW JERSEY

Zip 08536 - _____

Describe Nature of Interest STOCK PLEDGFE TO SECURE NOTE

9.2 DOES ANY INDIVIDUAL, PARTNERSHIP, CORPORATION, OR ASSOCIATION HOLD ANY CHATTEL MORTGAGE OR CONDITIONAL BILL OF SALE OR OTHER SECURITY INTEREST ON ANY FURNITURE, FIXTURES, GOODS OR EQUIPMENT TO BE USED IN CONNECTION WITH THE BUSINESS TO BE OPERATED UNDER THE LICENSE APPLIED FOR?

Yes No

IF THE ANSWER IS "YES", ANSWER THE FOLLOWING USING A SEPARATE PAGE 8 FOR EACH INDIVIDUAL OR CORPORATION TO BE REPORTED ATTACH A SEPARATE PAGE OF EXPLANATION IF MORE SPACE IS NEEDED.

Name of Individual (Last Name First) or Corporation

SMALL BUSINESS ADMINISTRATION, INDUS AMERICAN BANK

(Last Name, First Name, Middle Initial or Corporate Name)

Street Address _____
Number Street Name

P.O. Box # _____ Municipality _____ State _____

Zip _____ - _____

Describe Nature of Interest TO SECURE THE MORTGAGE NOTE

9.3 HAS THE APPLICANT AGREED TO PERMIT ANYONE NOT HAVING AN OWNERSHIP INTEREST IN THE LICENSE TO RECEIVE OR AGREED TO PAY ANYONE (BY WAY OF RENT, SALARY, OR OTHERWISE) ALL OR ANY PERCENTAGE OF THE GROSS RECEIPTS OR NET PROFIT OR INCOME DERIVED FROM THE BUSINESS TO BE CONDUCTED UNDER THE LICENSE APPLIED FOR?

Yes No

IF THE ANSWER IS "YES", ANSWER THE FOLLOWING USING A SEPARATE PAGE 9 FOR EACH INDIVIDUAL OR CORPORATION TO BE REPORTED. ATTACH A SEPARATE PAGE OF EXPLANATION IF MORE SPACE IS NEEDED.

Name of Individual (Last Name First) or Corporation

(Last Name, First Name, Middle Initial or Corporate Name)

Street Address _____
Number Street Name

P.O. Box # _____ Municipality _____ State _____

Zip _____ - _____

Describe Nature of Interest _____

APPLICANTS THAT ARE SOLE PROPRIETORS OP PARTNERSHIPS GO TO PAGE 10A
CORPORATIONS COMPLETE PAGE 1

STATE ASSIGNED LICENSE NUMBER: 1347 - 44 - 008 - 004

QUESTIONS TO BE ANSWERED BY CORPORATIONS ONLY. ANY CORPORATION THAT IS REPORTED TO HAVE AN INTEREST IN THE BUSINESS TO BE LICENSED, WHETHER THE LICENSEE COMPANY, THE PARENT CORPORATION OF THE LICENSED COMPANY, HOLDING COMPANY, OR OTHERWISE AFFILIATED IN THE CORPORATE CHAIN MUST ANSWER THE FOLLOWING USING SEPARATE PAGE 10 AND 10A FOR EACH CORPORATION. ANSWER QUESTIONS ON BOTH PAGE 10 AND 10A FOR EACH CORPORATION.

10.1 Name of corporation KARAN TWO INC A NEW JERSEY CORPORATION

10.2 Street address of home office 22 RUSET LANE
Municipality FARMINGDALE State NJ Zip 07727-1134

10.3 NJ Sales Tax Certificate of Authority Number 471-520-690/000

10.4 IF CORPORATION ADDRESS IN NUMBER 10.2 ABOVE IS OUT OF STATE, REPORT BELOW THE ADDRESS OF ANY OFFICE LOCATION IN NEW JERSEY. INSERT N/A IF NONE.

Street Address _____
Number _____ Street Name _____
Municipality _____ New Jersey Zip _____ - _____

10.5 IS THE CORPORATION NOW AN EXISTING, VALID CORPORATION? Yes No

10.6 DATE CHARTERED OR INCORPORATED 08 / 06 / 2014 STATE NJ

10.7 CERTIFICATE OF INCORPORATION NUMBER 0400-6785-02

10.8 IF NOT INCORPORATED UNDER THE LAWS OF NEW JERSEY, HAS THE CORPORATION RECEIVED AN AUTHORIZATION TO CONDUCT BUSINESS IN NEW JERSEY FROM THE NEW JERSEY OFFICE OF THE SECRETARY OF STATE?
 Yes No

10.9 HAS THE CORPORATION CHARTER EVER BEEN REVOKED BY THE OFFICE OF THE SECRETARY OF STATE IN NEW JERSEY?
 Yes No

IF THE ANSWER IS "YES", INSERT THE DATE OF REVOCATION, OR IF SUSPENDED, THE BEGINNING AND ENDING DATE OF THE SUSPENSION:
Date of revocation _____ / _____ / _____
Beginning date _____ / _____ / _____
Ending ate _____ / _____ / _____

10.10 INSERT THE NAME AND ADDRESS OF REGISTERED OR AUTHORIZED AGENT IN NEW JERSEY UPON WHOM SERVICE OF PROCESS IN ANY PROCEEDINGS AGAINST THE APPLICANT, PURSUANT TO THE NEW JERSEY ALCOHOLIC BEVERAGE LAW, THE ALCOHOLIC BEVERAGE TAX LAW, OR PROCEEDINGS IN A STATE OR U.S. DISTRICT COURT MAY BE MADE:

Name PATEL PINAL
(Last Name, First Name, Middle Initial or Corporation)
Street Address 22 RUSET LANE
Municipality FARMINGDALE State: NJ
Zip 07727 - 1134 Telephone number of business (732) 604 - 0292
Area Exchange Number

10.11 IF THE LICENSED COMPANY IS OWNED BY OTHER CORPORATION(S) OR IN A CORPORATE CHAIN, ATTACH A DIAGRAM DEPICTING THE CORPORATE RELATIONSHIPS AND THE PERCENTAGE OF STOCK INTEREST IN THE COMPANY TO BE LICENSED, OWNED BY OTHER CORPORATIONS OR OTHER NON-CORPORATE ENTITIES INDIVIDUALS, PARTNERSHIPS. ASSOCIATIONS).

STATE ASSIGNED LICENSE NUMBER: 1347 - 44 - 008 - 004

ALL APPLICANTS ANSWER THE FOLLOWING [ADD PAGES AS NECESSARY]

SOLE OWNERS AND PARTNERSHIPS: Complete the page in full.

LIMITED PARTNERSHIP: All information about a general partner or partners of a limited partnership must be reported, whether the general partner is an individual or a corporation. A list of the names and addresses of all limited partners must be submitted as an attachment to this application with an identification of the percentage of each limited partner as it relates to total ownership of the business entity to be licensed.

CORPORATIONS: All corporation applicants or licensees and any corporation that has an ownership interest in the corporation under license or to be licensed must have been reported on page 10. Information on this page, 10A, will identify all officers, directors, and stockholders holding one percent or more of the shares of the respective company. Club licenses must list names of officers and directors and attach a current membership list.

NAME OF CORPORATION OR CLUB COVERED BY THIS PAGE (COMPLETE ONLY IF APPLICANT OR STOCKHOLDER IS A CORPORATION OR PARTNERSHIP).

KARAN TWO INC. T/A COLONY MARKET

Name of Individual (last name first), stockholder, partner, officer or director:

PATEL **PINAL** **P.**

Last Name First Middle Initial

Home Street Address 22 RUSET LANE
Number Street Name

P.O. Box # _____ Municipality FARMINGDALE State NJ

Zip 07727 - 1134

Social Security number 145 -94 -5962 Date of birth 06 / 27 / 1974

Home telephone number (732) 919 - 2026
Area Exchange Number

Office telephone number (732) - 604 - 0292
Area Exchange Number

% of business owned or controlled 100% Number of shares 100

Check position that applies: Sole owner Partner X Stockholder
 X President Vice President X Secretary X Treasurer Director
 Trustee Manager Agent Executor/Administrator Receiver
 Beneficiary Other (specify) _____

Name of Individual (last name first)

Last Name First Middle Initial

Home Street Address _____
Number Street Name

P.O. Box # _____ Municipality _____ State _____

Zip _____ - _____

Social Security number _____ - _____ - _____ Date of birth ____/____/____

Home telephone number () - _____
Area Exchange Number

Office telephone number () - _____
Area Exchange Number

% of business owned or controlled _____ Number of shares _____

Check position that applies: Sole owner Partner Stockholder
 President Vice President Secretary Treasurer Director
 Trustee Manager Agent Executor/Administrator Receiver
 Beneficiary Other (specify) _____

STATE ASSIGNED LICENSE NUMBER: : 1347 - 44 - 008 - 004

LICENSE PERIOD APPLIED FOR

FROM 07 / 01 / 2015 TO 06 / 30 / 2016

DATE: 03 / 24 / 2015

State of NEW JERSEY)

County of MONMOUTH)

As provided by law (R.S. 33:1-35),

(Check One

1. The Individual Applicant: _____

2. Members of the Partnership Applicant

3. PINAL P. PATEL of KARAN TWO INC. T/A COLONY MARKET

(President/Vice-President) (Corporation or Club Name)

consent(s) that the licensed premises and all portions of the building constituting the licensed premises, including all rooms, cellars, closets, out-buildings, passageways, vaults, yards, attics, and every part of the structure of which the licensed premises are a part and all buildings used in connection therewith which are in his/her/their possession or under his/her/their control, may be inspected and searched without warrant at all hours by the Director of the Division of Alcoholic Beverage Control, his or her duly authorized deputies, inspectors, or investigators and all other sworn law enforcement officers, and being duly sworn according to law, upon her/their oath(s), depose(s) and say(s) that he/she is (they are) the person(s) duly authorized to sign the application, that in instance of corporate ownership, the signatory is authorized by corporate resolution to sign on behalf of the corporations; and that the contents of this application represent complete disclosure of fact, and that the contents of this application are true.

(Signature of Individual Applicant / sole proprietor)

NAME:

(Corporations Only)

Attestation by Corporate Secretary

(Partnership Name)

(Signature of Partner)

Attest:

P

KARAN TWO INC.

Corporate Name)

(Partnership Name)

By: Pinal P. Patel
(Signature of Corporate President or Vice President)

(Signature of Partner)

Secretary P
Signature

(Signature of Partner)

Affix Corporate Seal

Sworn to and subscribed before me
this 24TH day of MARCH, 2015

AFFIDAVIT MUST BE SIGNED HERE

→ Rupam B. Patel
(Signature of Officer Administering Oath)

BY DULY AUTHORIZED
NOTARY PUBLIC

RUPAM B. PATEL
(Print Name of Officer Administering Oath)

OR AN ATTORNEY AT LAW
OF NEW JERSEY

(Title of Officer Administering Oath)

RUPAM B. PATEL
Notary Public, State of New Jersey
Qualified in Middlesex County
Commission Expires ~~7-19-2014~~

7-28-2016