



BOROUGH OF LAKE COMO
1740 MAIN STREET
LAKE COMO, NJ 07719
(732) 681-3232
AGENDA

DATE: JANUARY 20, 2026 7:30 PM
REGULAR MEETING

MEETING CALLED TO ORDER

SALUTE TO FLAG AND MOMENT OF SILENT REFLECTION

SUNSHINE LAW

Introduction as required under the Sunshine Law: Adequate notice of this meeting has been provided by the adoption of a Resolution by the Mayor and Council on the sixth day of January 2026 in which Resolution the time and place of Agenda and Regular Meetings commencing with January 6, 2026 were set forth. Notice of same was delivered to the Asbury Park Press, the Coast Star and TAPinto and a copy of the notice was posted on the borough website at www.lakecomonj.org and on the bulletin board in Borough Hall. All meetings are open to the public.

ROLL CALL

Hawley Scull
Christopher D'Antuono
Peter Ventrice
Heather Albala-Doyle
Andrew Reiners

APPROVAL OF MINUTES

Minutes from the January 7, 2026 Meeting

COMMUNICATIONS, PROCLAMATIONS & PRESENTATIONS

REPORTS OF COMMITTEES

UNFINISHED BUSINESS

PUBLIC COMMENTS ON NEW BUSINESS

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.

NEW BUSINESS

Special Events Permit Application
Huntington's Disease Society of America 5k

Special Events Permit Application
Belmar – Lake Como St. Patrick's Day Parade

Special Events Permit Application
Kilt Run

Special Events Permit Application
Lake Como 5k

Special Events Permit Application
Belmar 5

Resolution 2026-36
Executive Session
Offered by Councilman Ventrice

Resolution 2026-37
Temporary Budget
Offered by Councilman D'Antuono

Resolution 2026-38
Payment of Bills
Offered by Councilwoman Albala-Doyle

Resolution 2026-39
Payment of NJNG Bill
Offered by Councilman Reiners

Resolution 2026-40
Authorizing the Borough to Join
NJ Solutions Joint Health Insurance Fund
Offered by Councilman D'Antuono

Resolution 2026-41
Approving Execution of the Project Agreement
With Monmouth County
Offered by Councilwoman Albala-Doyle

Resolution 2026-42

CDBG Resolution Authorizing Mayor to Sign
Certification Prohibiting Excess Force and Use of Federal
Funds for Lobbying
Offered by Councilwoman Scull

PUBLIC COMMENTS

ALCOHOLIC BEVERAGE CONTROL BOARD

Resolution 2026-43
Person-To-Person Transfer
Karan Two Inc. to Aria Spirits Inc.

NEXT MEETING

The next regular meeting of the Mayor and Council will be held on Tuesday, February 3, 2026, at 7:30 PM in the Lake Como Meeting Room. All meetings are open to the public.

MOTION TO ADJOURN



Borough of Lake Como

1740 Main Street, P.O. Box 569 • Lake Como, New Jersey 07719-0569
(732) 681-3232 • FAX (732) 681-8981

Brian T. Wilton
Mayor

Louise A. Mekosh
Borough Clerk/Administrator

*****MUST BE TYPED OR PRINTED NEATLY*****

SPECIAL EVENTS PERMIT APPLICATION

PLEASE COMPLETE THE FOLLOWING INFORMATION, AS REQUIRED BY
BOROUGH ORDINANCE NO. 93-576.

DATE AND TIME OF EVENT: May 2, 2026; 8:30am to 10:00am

NAME OF APPLICANT/ORGANIZATION: Huntington's Disease Society of America, NJ Chapter

ADDRESS: 505 8th Avenue, Suite 902

TOWN: New York STATE: NY ZIP: 10018

TELEPHONE NUMBER: [REDACTED]

ON SCENE PERSON RESPONSIBLE FOR EVENT: Joseph Cosentino

ADDRESS: 9 Jarombek Dr., Towaco, NJ 07082

PHONE NUMBER: [REDACTED]

WILL THERE BE AN ADMISSION CHARGE TO ATTEND?: ☒ YES ☐ NO

IF YES, HOW MUCH?: \$30-40

LIABILITY INSURANCE COVERAGE? ☒ YES ☐ NO

AMOUNT OF COVERAGE: \$1 million / occurrence

***Certificate of Insurance MUST be submitted with the application
before application will be reviewed***



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Brian T. Wilton
Mayor

Louise A. Mekosh
Borough Clerk/Administrator

SPECIAL EVENTS PERMIT APPLICATION

DATE AND HOURS FOR WHICH THE PERMIT IS DESIRED:

Saturday, May 2, 2026 - Volunteers begin setup 8am, run / walk concluded by 10am

ALL RUNS MUST BEGIN PRIOR TO 10:00AM

LOCATION OF EVENTS AND COMPLETE DETAILS AS TO HOW THE APPLICANT INTENDS TO PROVIDE FOR SECURITY AND TRAFFIC CONTROL:

Run will begin and end at Bar A parking lot. Volunteers will be placed throughout course, with signs on the street as outlined in the attached map. Volunteers will be instructed to setup traffic control equipment provided by Belmar PD, consistent with direction provided by Belmar PD in prior years

DESCRIBE ALL BOROUGH RESOURCES AND/OR SERVICES THAT WILL BE REQUIRED TO BE PROVIDED IN CONNECTION WITH THE EVENT:

Belmar PD - officers for key intersections and road closures, and cones for traffic control

APPROXIMATE NUMBER OF CONTESTANTS, PARTICIPANTS, SPECTORS, AND/OR OTHER PEOPLE THAT COULD RESONABLY BE ANTICIPATED TO ATTEND THE EVENT: 200-250

THE BOROUGH OF LAKE COMO RESERVES THE RIGHT TO CANCEL ANY SPECIAL EVENT DUE TO CIRCUMSTANCES BEYOND ITS CONTROL, SUCH AS STORMS OR ANY NATURAL DISASTER.


SIGNATURE OF APPLICANT

10/17/2025

DATE



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/18/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Arthur J. Gallagher Risk Management Services, LLC 300 Madison Avenue 28th Floor New York NY 10017	CONTACT NAME: PHONE (A/C, No, Ext): 212-994-7100 E-MAIL ADDRESS:	FAX (A/C, No): 212-994-7047
INSURED Huntington's Disease Society of America, Inc. 505 Eighth Avenue New York NY 10018	INSURER(S) AFFORDING COVERAGE INSURER A : AmGUARD Insurance Company INSURER B : INSURER C : INSURER D : INSURER E : INSURER F :	NAIC # 42390

COVERAGES

CERTIFICATE NUMBER: 1915971027

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y		C1GP608714	11/16/2025	11/16/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 3,000,000 \$
A	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			C2GP605928	11/16/2025	11/16/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			C3GP603506	11/16/2025	11/16/2026	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y / N <input type="checkbox"/>	N / A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

The County of Monmouth, its officers, officials, employees, and volunteers. The Borough of Lake Como and the Borough of Lake Como police department is located at 1730 Main St. Lake Como NJ 07719 are named as additional insured with respects to general liability for ongoing operations performed by named insured, as required by written contract.

Chapter/Affiliate Name: NJ Chapter
Event: Jersey Shore 5K & Team Hope Walk
Date: May 2, 2026
Location: Bar Anticipation 703 16th Ave Lake Como NJ 07719

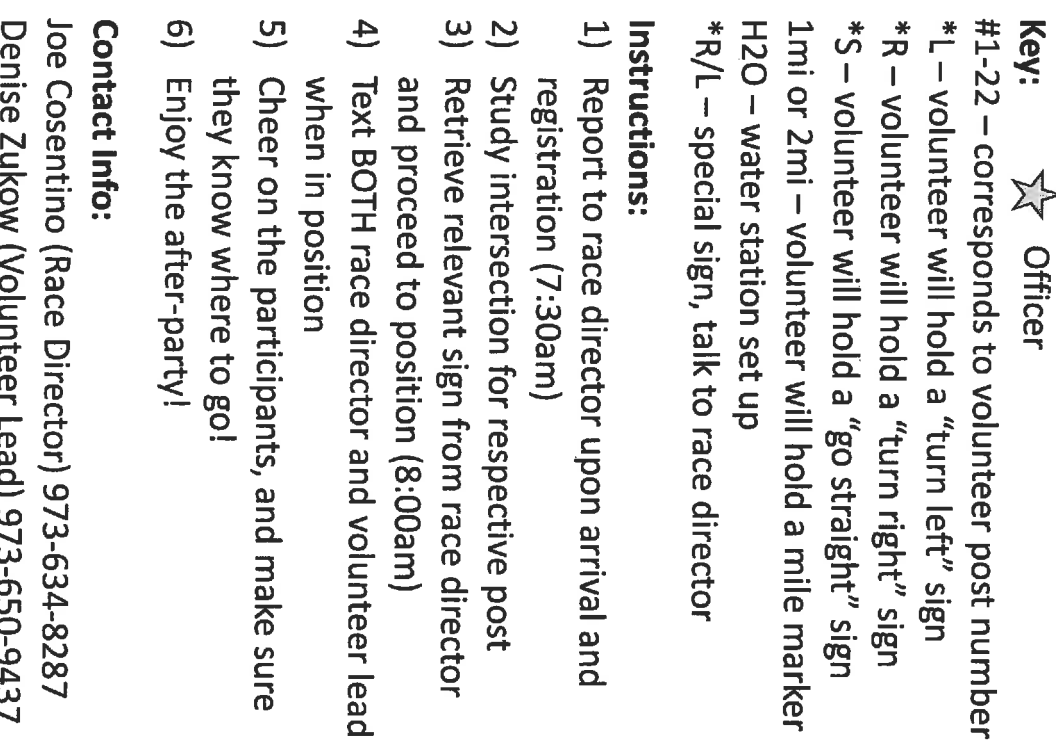
CERTIFICATE HOLDER**CANCELLATION**

Borough of Lake Como
1740 Main Street
PO Box 569
Como NJ 07719

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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#1-22 – corresponds to volunteer post number

***L – volunteer will hold a “turn left” sign**

*R – volunteer will hold a “turn right” sign

***S – volunteer will hold a “go straight” sign**

1mi or 2mi – volunteer will hold a mile marker
H2O – water station set up

***R/L – special sign, talk to race director**

Instructions:

- 1) Report to race director upon arrival and registration (7:30am)
- 2) Study intersection for respective post
- 3) Retrieve relevant sign from race director and proceed to position (8:00am)
- 4) Text BOTH race director and volunteer lead when in position
- 5) Cheer on the participants, and make sure they know where to go!
- 6) Enjoy the after-party!

Contact Info:

Joe Cosentino (Race Director) 973-634-8287
Denise Zukow (Volunteer Lead) 973-650-9437

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Kevin G. Higgins
Mayor

Andrew Huisman
Administrator

*****MUST BE TYPED OR PRINTED NEATLY*****

SPECIAL EVENTS PERMIT APPLICATION

PLEASE COMPLETE THE FOLLOWING INFORMATION, AS REQUIRED BY
BOROUGH ORDINANCE NO. 93-576.

EVENT NAME:	Belmar Lake Como St. Patrick's Day Parade
DATE OF EVENT:	March 1, 2026
TIME OF EVENT:	8 : 00 am pm until 4 : 00 am pm Events must begin by 9:00am
APPLICANT/ORGANIZATION:	Belmar Lake Como Parade Committee
APPLICANT ADDRESS:	PO Box 331 Belmar, NJ 07719
TELEPHONE NUMBER:	

DAY OF EVENT CONTACT INFORMATION

PERSON RESPONSIBLE FOR EVENT: Chip Cavanagh

NUMBER OF VOLUNTEERS FOR EVENT: 50

(Volunteers must be over the age of 18 and must be wearing safety vests at all times)

ADDRESS: 1840 Fernwood Road
Lake Como, NJ 07719

PHONE NUMBER: [REDACTED]

WILL THERE BE AN ADMISSION CHARGE TO ATTEND?: _____ YES ☒ NO _____

IF YES, HOW MUCH?: \$ _____

LIABILITY INSURANCE COVERAGE? _____ YES ☒ NO _____

AMOUNT OF COVERAGE: \$ _____

HAVE YOU APPLIED TO BELMAR & SPRING LAKE? ☒ YES _____ NO _____

EVENTS WITH MORE THAN 500 PARTICIPANTS MUST APPLY TO WALL TWP.

IF NO, WHY? _____

***Certificate of Insurance MUST be submitted with the application**
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Andrew Huisman
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SPECIAL EVENTS PERMIT APPLICATION

LOCATION OF EVENTS AND COMPLETE DETAILS AS TO HOW THE APPLICANT INTENDS TO PROVIDE FOR SECURITY AND TRAFFIC CONTROL. EVENTS WITH OVER 500 PARTICIPANTS CANNOT USE VOLUNTEERS:

North Blvd and 18th Avenue for staging, Main Street for the parade route

We will use ware filled barricades to secure North Blvd. We will have volunteers to stage participants on North Blvd.

DESCRIBE ALL BOROUGH RESOURCES AND/OR SERVICES THAT WILL BE REQUIRED TO BE PROVIDED IN CONNECTION WITH THE EVENT:

Public Works to barricade streets

APPROXIMATE NUMBER OF CONTESTANTS, PARTICIPANTS, SPECTORS, AND/OR OTHER PEOPLE THAT COULD RESONABLY BE ANTICIPATED TO ATTEND THE EVENT: 20,000

THE BOROUGH OF LAKE COMO RESERVES THE RIGHT TO CANCEL ANY SPECIAL EVENT DUE TO CIRCUMSTANCES BEYOND ITS CONTROL, SUCH AS STORMS OR ANY NATURAL DISASTER.

Chip Cavanagh

SIGNATURE OF APPLICANT

01/16/2026

DATE

FOR OFFICE USE ONLY

Date Application Received

Received by

Date Application Reviewed & Approved by DPW

Reveiwed by

Date Application Reviewed & Approved by Police

Reviewed by

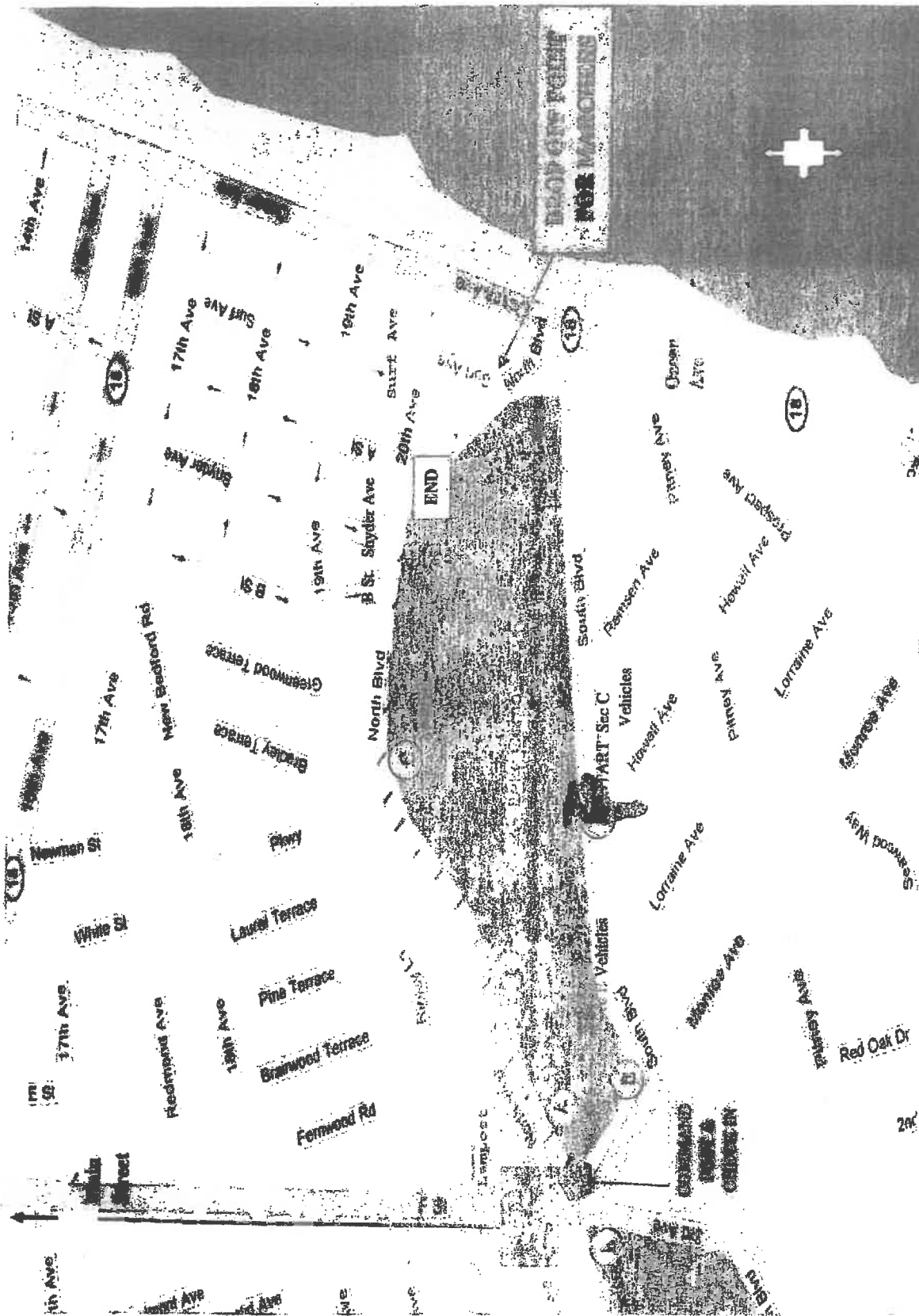
Price from Police Department

Date Approved by Mayor & Council

Belmar/Lake Como St. Patrick's Day Parade Official Parade Rules and Regulations

1. Absolutely NO Alcoholic Beverages are permitted in the line of march, in the staging area or along the parade route.
2. The Parade Chairman, representing the Parade Committee, reserves the right to refuse participation to any individual or group deemed offensive or in bad taste.
3. The Parade does not promote any political cause or election campaign; therefore there will be NO distribution of political fliers or endorsements of any kind.
4. All signs and banners MUST be approved by the Parade Chairman before 11:30 am on Parade Day.
5. There will be NO throwing candy, gum, leaflets or distribution of any type from any individual group, vehicle or float.
6. There will be no stopping at the Reviewing Stand to insure a steady flow of the Parade and Line of March.

On this day as we honor St. Patrick and the Irish who have come before us, let us demonstrate our pride in our Irish heritage and culture in a dignified forum and make this an enjoyable event for all.





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Andrew Huisman
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SPECIAL EVENTS PERMIT APPLICATION

PLEASE COMPLETE THE FOLLOWING INFORMATION, AS REQUIRED BY
BOROUGH ORDINANCE NO. 93-576.

EVENT NAME: BAR A KILT RUN & WALK 2 MILE
DATE OF EVENT: SAT. MARCH 14, 2026
TIME OF EVENT: 10:00 am / pm until 11:00 am / pm
Events must begin by 9:00am
APPLICANT/ORGANIZATION: CHIP CAVANAGH
APPLICANT ADDRESS: 1840 FERNWOOD ROAD
LAKE Como, NJ 07719
TELEPHONE NUMBER: [REDACTED]

DAY OF EVENT CONTACT INFORMATION

PERSON RESPONSIBLE FOR EVENT: CHIP CAVANAGH
NUMBER OF VOLUNTEERS FOR EVENT: 30
(Volunteers must be over the age of 18 and must be wearing safety vests at all times)
ADDRESS: 1840 FERNWOOD RD.
LAKE Como, NJ 07719
PHONE NUMBER: [REDACTED]
WILL THERE BE AN ADMISSION CHARGE TO ATTEND?: X YES NO
IF YES, HOW MUCH?: \$ 30 - \$40
LIABILITY INSURANCE COVERAGE? X YES NO
AMOUNT OF COVERAGE: \$ 1,000,000
HAVE YOU APPLIED TO BELMAR & SPRING LAKE? YES X NO
EVENTS WITH MORE THAN 500 PARTICIPANTS MUST APPLY TO WALL TWP.
IF NO, WHY? N/A

***Certificate of Insurance MUST be submitted with the application**

before application will be reviewed*

Insure Cert will be provided prior to the event



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Andrew Huisman
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SPECIAL EVENTS PERMIT APPLICATION

LOCATION OF EVENTS AND COMPLETE DETAILS AS TO HOW THE APPLICANT INTENDS TO PROVIDE FOR SECURITY AND TRAFFIC CONTROL. EVENTS WITH OVER 500 PARTICIPANTS CANNOT USE VOLUNTEERS:

Volunteer course marshals & Police will be
utilized for security safety & traffic control
at all intersections on the race course

DESCRIBE ALL BOROUGH RESOURCES AND/OR SERVICES THAT WILL BE REQUIRED TO BE PROVIDED IN CONNECTION WITH THE EVENT:

Public Works Police, & barricades for
street closures & traffic control

APPROXIMATE NUMBER OF CONTESTANTS, PARTICIPANTS, SPECTORS, AND/OR OTHER PEOPLE THAT COULD RESONABLY BE ANTICIPATED TO ATTEND THE EVENT: 400

THE BOROUGH OF LAKE COMO RESERVES THE RIGHT TO CANCEL ANY SPECIAL EVENT DUE TO CIRCUMSTANCES BEYOND ITS CONTROL, SUCH AS STORMS OR ANY NATURAL DISASTER.


SIGNATURE OF APPLICANT

12/18/25
DATE

FOR OFFICE USE ONLY

Date Application Received

Received by

Date Application Reviewed & Approved by DPW

Reveiwed by

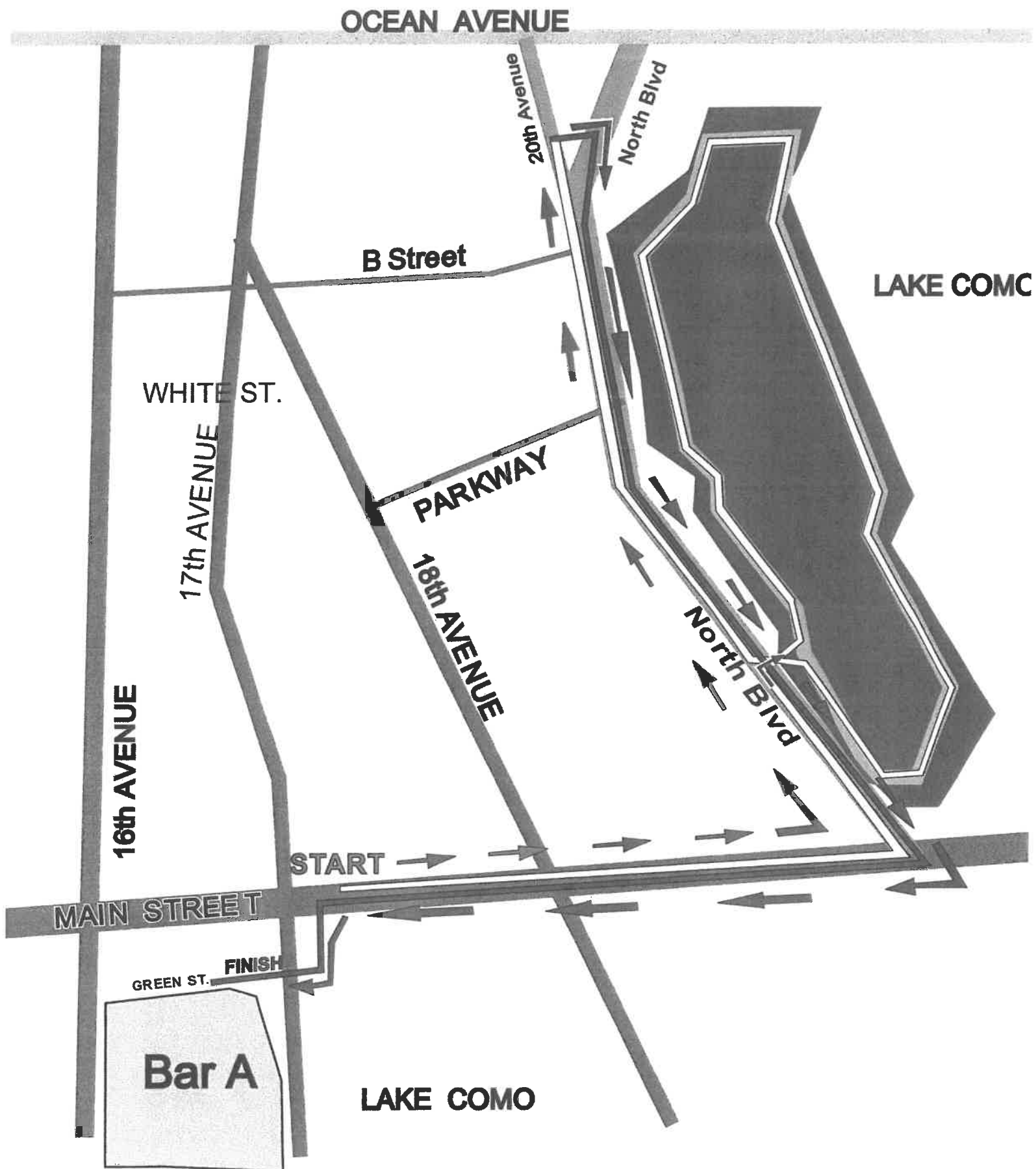
Date Application Reviewed & Approved by Police

Reviewed by

Price from Police Department

Date Approved by Mayor & Council

12/18/05
ABoney





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Kevin G. Higgins
Mayor

Andrew Huisman
Administrator

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SPECIAL EVENTS PERMIT APPLICATION

PLEASE COMPLETE THE FOLLOWING INFORMATION, AS REQUIRED BY
BOROUGH ORDINANCE NO. 93-576.

EVENT NAME: Lake Como 5K
DATE OF EVENT: April 25, 2026
TIME OF EVENT: 10:00 am until 11:00 am
Events must begin by 9:00am
APPLICANT/ORGANIZATION: Jersey Shore Running Club
APPLICANT ADDRESS: P.O. Box 7492
Shrewsbury, NJ 07702
TELEPHONE NUMBER: _____

DAY OF EVENT CONTACT INFORMATION

PERSON RESPONSIBLE FOR EVENT: Vicki Trerotola
NUMBER OF VOLUNTEERS FOR EVENT: 30+
(Volunteers must be over the age of 18 and must be wearing safety vests at all times)
ADDRESS: 30 Wilson Ave
Manalapan, NJ 07726
PHONE NUMBER: [REDACTED]
WILL THERE BE AN ADMISSION CHARGE TO ATTEND?: X YES _____ NO
IF YES, HOW MUCH?: \$ 30 - \$40
LIABILITY INSURANCE COVERAGE? X YES _____ NO
AMOUNT OF COVERAGE: \$ 2,000,000
HAVE YOU APPLIED TO BELMAR & SPRING LAKE? X YES _____ NO
EVENTS WITH MORE THAN 500 PARTICIPANTS MUST APPLY TO WALL TWP.
IF NO, WHY? < 500

***Certificate of Insurance MUST be submitted with the application**

before application will be reviewed*

Insurance Certificate will be provided prior to the event



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Kevin G. Higgins
Mayor

Andrew Huisman
Administrator

SPECIAL EVENTS PERMIT APPLICATION

LOCATION OF EVENTS AND COMPLETE DETAILS AS TO HOW THE APPLICANT INTENDS TO PROVIDE FOR SECURITY AND TRAFFIC CONTROL. EVENTS WITH OVER 500 PARTICIPANTS CANNOT USE VOLUNTEERS:

Volunteer course marshals & Police (BPD)
at all intersections for security & traffic control

DESCRIBE ALL BOROUGH RESOURCES AND/OR SERVICES THAT WILL BE REQUIRED TO BE PROVIDED IN CONNECTION WITH THE EVENT:

Police (BPD)
Barricades

APPROXIMATE NUMBER OF CONTESTANTS, PARTICIPANTS, SPECTORS, AND/OR OTHER PEOPLE THAT COULD RESONABLY BE ANTICIPATED TO ATTEND THE EVENT: 450

THE BOROUGH OF LAKE COMO RESERVES THE RIGHT TO CANCEL ANY SPECIAL EVENT DUE TO CIRCUMSTANCES BEYOND ITS CONTROL, SUCH AS STORMS OR ANY NATURAL DISASTER.

304

SIGNATURE OF APPLICANT

12/25/25
DATE

FOR OFFICE USE ONLY

Date Application Received

Received by

Date Application Reviewed & Approved by DPW

Reveiwed by

Date Application Reviewed & Approved by Police

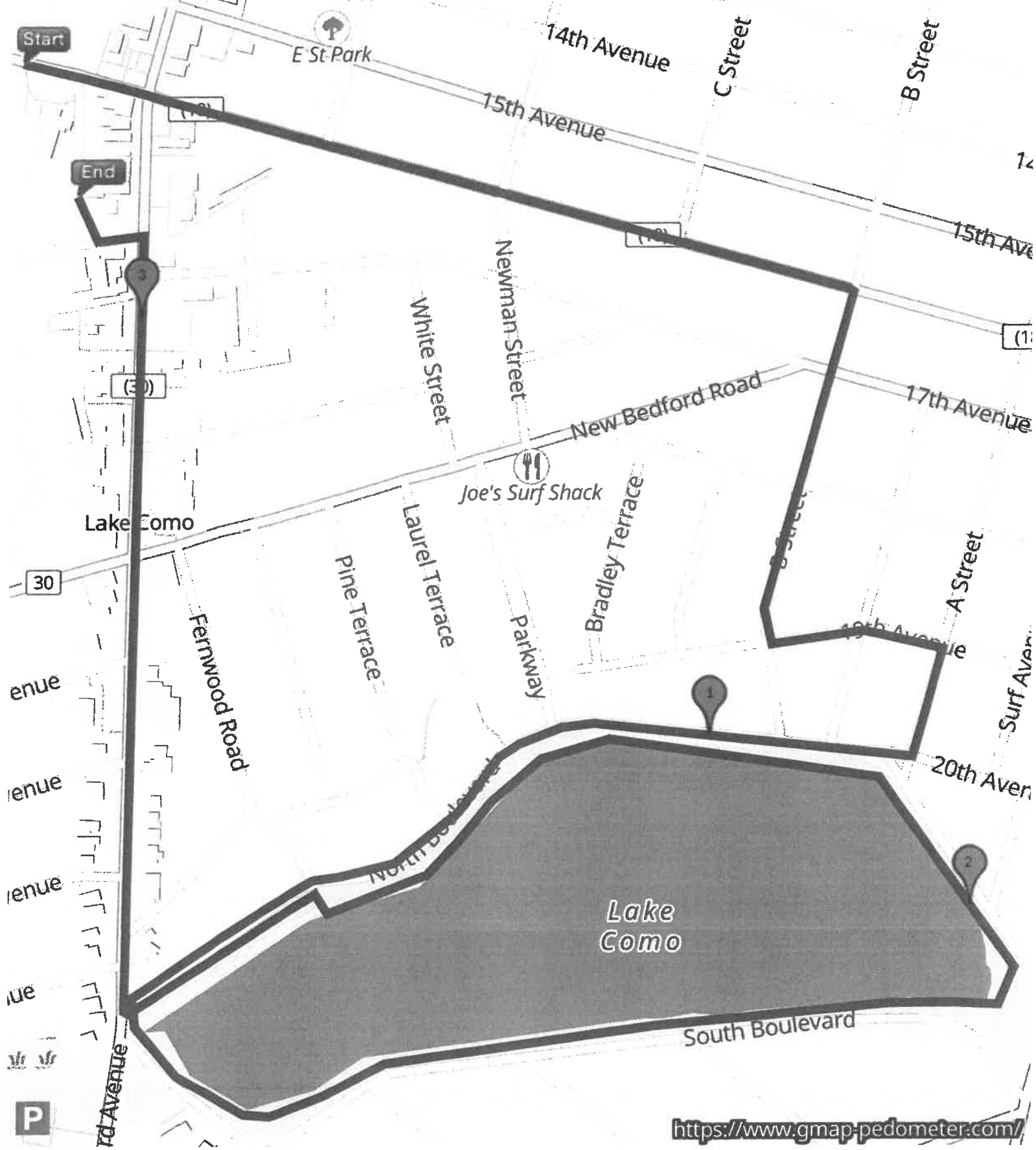
Reviewed by

Price from Police Department

Date Approved by Mayor & Council

12/18/25
ABoney

3.1019 mi Lake Como 5k





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Kevin G. Higgins
Mayor

Andrew Huisman
Administrator

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SPECIAL EVENTS PERMIT APPLICATION

PLEASE COMPLETE THE FOLLOWING INFORMATION, AS REQUIRED BY
BOROUGH ORDINANCE NO. 93-576.

EVENT NAME: BELMAR FIVE MILE RUN
DATE OF EVENT: SATURDAY, SEPT. 5, 2026
TIME OF EVENT: 8:00 am / pm until 9:30 am / pm
Events must begin by 9:00am
APPLICANT/ORGANIZATION: BELMAR GOODWILL HOSE CO.
APPLICANT ADDRESS: 610 7th AVE. PO Box 21
 BELMAR, N.J 07719
TELEPHONE NUMBER: Eugene CAVANAGH [REDACTED]

DAY OF EVENT CONTACT INFORMATION

PERSON RESPONSIBLE FOR EVENT: DAN NAPOLITAN
NUMBER OF VOLUNTEERS FOR EVENT: 200
(Volunteers must be over the age of 18 and must be wearing safety vests at all times)
ADDRESS: 1731 PASCAL PL
 WALL, NJ 07719
PHONE NUMBER: [REDACTED]
WILL THERE BE AN ADMISSION CHARGE TO ATTEND?: X YES NO
IF YES, HOW MUCH?: \$ 35 - \$ 50
LIABILITY INSURANCE COVERAGE? X YES NO
AMOUNT OF COVERAGE: \$ 200,000
HAVE YOU APPLIED TO BELMAR & SPRING LAKE? X YES NO
EVENTS WITH MORE THAN 500 PARTICIPANTS MUST APPLY TO WALL TWP.
IF NO, WHY?

***Certificate of Insurance MUST be submitted with the application**
before application will be reviewed*

INSURANCE CERTIFICATE WILL BE PROVIDED PRIOR TO THE EVENT



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SPECIAL EVENTS PERMIT APPLICATION

LOCATION OF EVENTS AND COMPLETE DETAILS AS TO HOW THE APPLICANT INTENDS TO PROVIDE FOR SECURITY AND TRAFFIC CONTROL. EVENTS WITH OVER 500 PARTICIPANTS CANNOT USE VOLUNTEERS:

PART OF THE 5 MILE RACE GOES AROUND LAKE
COMO. WE WILL UTILIZE VOLUNTEER COURSE
MARSHALS, FIREMEN & POLICE FOR SECURITY &
TRAFFIC CONTROL

DESCRIBE ALL BOROUGH RESOURCES AND/OR SERVICES THAT WILL BE REQUIRED TO BE PROVIDED IN CONNECTION WITH THE EVENT:

PUBLIC WORKS TO PLACE BARRICADES FOR
STREET CLOSURES AND POLICE FOR TRAFFIC
CONTROL

APPROXIMATE NUMBER OF CONTESTANTS, PARTICIPANTS, SPECTORS, AND/OR OTHER PEOPLE THAT COULD RESONABLY BE ANTICIPATED TO ATTEND THE EVENT: 3000

THE BOROUGH OF LAKE COMO RESERVES THE RIGHT TO CANCEL ANY SPECIAL EVENT DUE TO CIRCUMSTANCES BEYOND ITS CONTROL, SUCH AS STORMS OR ANY NATURAL DISASTER.

Manuel Napoleton
SIGNATURE OF APPLICANT

DATE

FOR OFFICE USE ONLY

Date Application Received

Received by

Date Application Reviewed & Approved by DPW

Reveiwed by

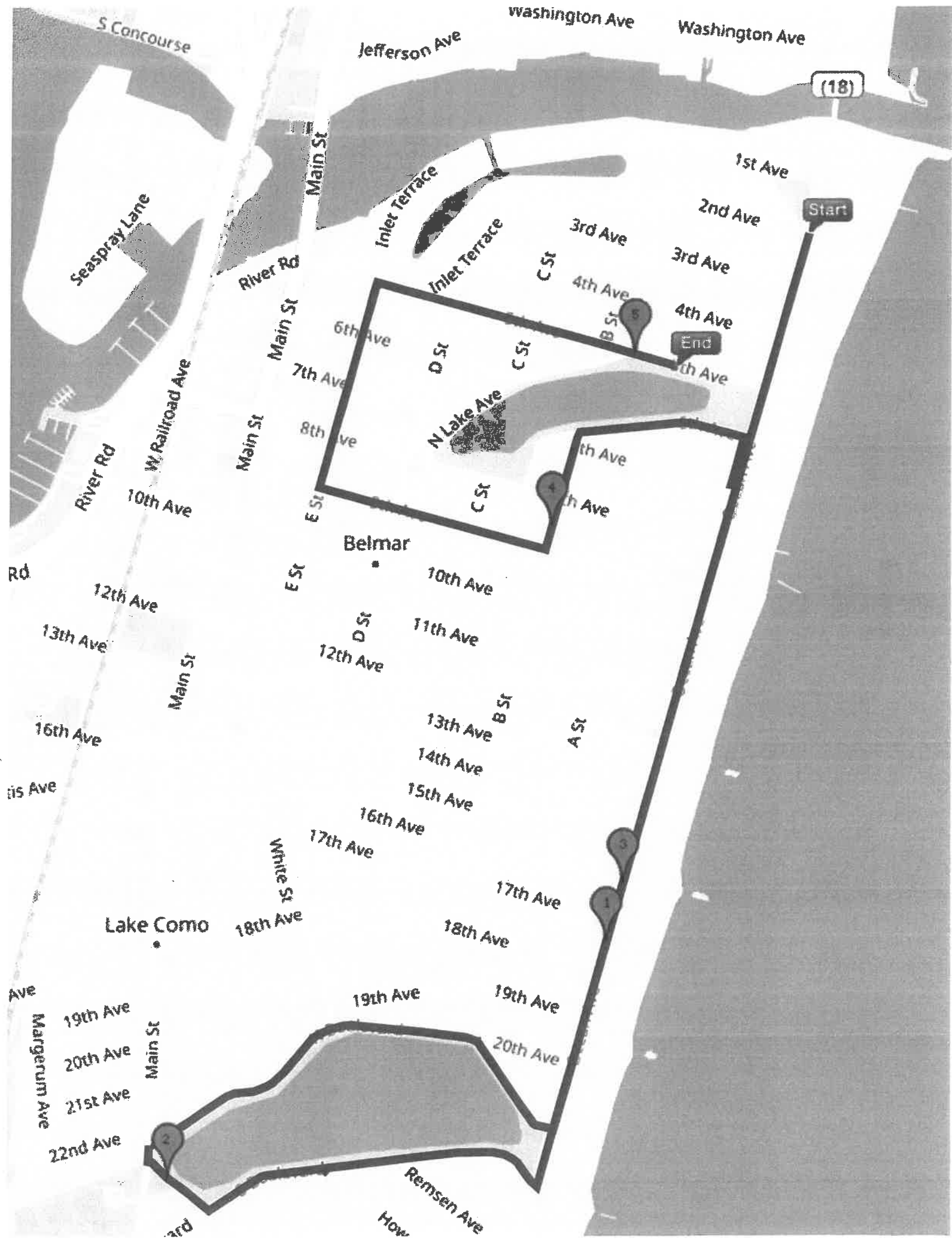
Date Application Reviewed & Approved by Police

Reviewed by

Price from Police Department

Date Approved by Mayor & Council

12/18/25
ABoney



RESOLUTION 2026-36
RESOLUTION OF THE BOROUGH OF LAKE COMO COUNCIL
EXECUTIVE SESSIONS

WHEREAS, the Borough Council of the Borough of Lake Como must discuss matters which are not appropriate for discussion in a public meeting; and

WHEREAS, these subjects are within the exceptions to the Open Public Meetings Act and are permitted to be discussed in Closed Session pursuant to N.J.S.A. 10:4-12b; and

WHEREAS, the Borough Council intends to discuss matters as follows:

- ☐ Pursuant to N.J.S.A. 10:4-12b(1), "any matter which, by provision of federal law or State statute or rule of court shall be rendered confidential or excluded from the provisions of subsection a." of N.J.S.A. 10:4-12, public meetings. The nature of the matter, described as specifically as possible without undermining the need for confidentiality, is:
- ☐ Pursuant to N.J.S.A. 10:4-12b(2), "any matter in which the release of information would impair a right to receive funds from the Government of the United States". The nature of the matter, described as specifically as possible without undermining the need for confidentiality, is:
- ☐ Pursuant to N.J.S.A. 10:4-12b(3), "any material the disclosure of which constitutes an unwarranted invasion of individual privacy such as records, data, reports, recommendations, or other personal material of any educational, training, social service, medical, health, custodial, child protection, rehabilitation, legal defense, welfare, housing, relocation, insurance and similar program or institution operated by a public body pertaining to any specific individual admitted to or served by such institution or program, including but not limited to information relative to the individual's personal and family circumstances, and any material pertaining to admission, discharge, treatment, progress or condition of any individual, unless the individual concerned (or, in the case of a minor or incompetent, his guardian) shall request in writing that the same be disclosed publicly." The nature of the matter, described as specifically as possible without undermining the need for confidentiality, is:
- ☐ Pursuant to N.J.S.A. 10:4-12b(4), "any collective bargaining agreement, or the terms and conditions which are proposed for inclusion in any collective bargaining agreement, including the negotiation of the terms and conditions thereof with employees or representatives of employees of the public body." The collective bargaining contract(s) discussed are between the Commission and:
- ☐ Pursuant to N.J.S.A. 10:4-12b(5), "any matter involving the purchase, lease or acquisition of real property with public funds, the setting of banking rates or investment of public funds, where it could adversely affect the public interest if discussion of such matter were disclosed." The nature of the matter, described as specifically as possible without undermining the need for confidentiality, is:
- ☐ Pursuant to N.J.S.A. 10:4-12b(6), "any tactics and techniques utilized in protecting the safety and property of the public, provided that their disclosure could impair such protection. Any investigations of violations or possible violations of the law." The nature of the matter, described as specifically as possible without undermining the need for confidentiality, is:

- ☒ Pursuant to N.J.S.A. 10:4-12b(7), "any pending or anticipated litigation or contract negotiation other than in subsection b. (4)" of N.J.S.A. 10:4-12 "in which the public body is or may become a party. Any matters falling within the attorney-client privilege, to the extent that confidentiality is required in order for the attorney to exercise his ethical duties as a lawyer." The nature of the matter, described as specifically as possible without undermining the need for confidentiality, is: legal advice and attorney-client privilege
- ☐ Pursuant to N.J.S.A. 10:4-12b(8), "any matter involving the employment, appointment, termination of employment, terms and conditions of employment, evaluation of the performance of, promotion or discipline of any specific prospective public officer or employee or current public officer or employee employed or appointed by the public body, unless all individual employees or appointees whose rights could be adversely affected request in writing that such matter or matters be discussed at a public meeting." The nature of the matter, described as specifically as possible without undermining the need for confidentiality, is: personnel matters
- ☐ Pursuant to N.J.S.A. 10:4-12b(9), "any deliberation of a public body occurring after a public hearing that may result in the imposition of a specific civil penalty upon the responding party or the suspension or loss of a license or permit belonging to the responding party as a result of an act or omission for which the responding party bears responsibility." The nature of the matter, described as specifically as possible without undermining the need for confidentiality, is:

WHEREAS, the length of the Closed Session is estimated to be 30 minutes after which the public meeting of the Borough Council shall reconvene, and action may be taken.

NOW, THEREFORE, BE IT RESOLVED that the Borough Council will recess into Closed Session for only the aforesaid subject(s); and

BE IT FURTHER RESOLVED that the Borough Council hereby declares that its discussion of the aforesaid subject(s) will be made public at a time when the public's interest in disclosure is greater than any privacy or governmental interest being protected from disclosure in accordance with the Open Public Meetings Act.

Dated: January 20, 2026

Kevin G. Higgins, Mayor

Hawley G. Scull, Council President

CERTIFICATION

I hereby certify the foregoing Resolution to be a true and exact copy of a Resolution adopted by the Borough of Lake Como Council at its meeting held on January 20, 2026.

Amy L. Boney, RMC
Borough Clerk

RESOLUTION 2026-37
A RESOLUTION OF THE MAYOR AND COUNCIL OF THE BOROUGH
OF LAKE COMO PROVIDING FOR THE MAKING OF A TEMPORARY
APPROPRIATION.

WHEREAS, N.J.S. 40A:4-19 provides that where any contract, commitment or payments are to be made prior to the final adoption of the Calendar Year 2026 budget, temporary appropriations should be made for the purpose and amounts required in the manner and time therein provided, and

WHEREAS, the date of this resolution is within the first 30 days of the fiscal year, and

WHEREAS, not exceeding 35% of the total operating appropriations in the 2025 budget, exclusive of any appropriations made for interest and debt service charges, capital improvement and public assistance, may be temporarily appropriated for 2026;

NOW, THEREFORE, BE IT RESOLVED by the Mayor and Council of the Borough of Lake Como, County of Monmouth, State of New Jersey, that the attached temporary appropriations be made and a certified copy of this resolution be transmitted to the Chief Financial Officer for her records.

Dated: January 20, 2026

Kevin G. Higgins
Mayor

Hawley G. Scull
Council President

Certification

I hereby certify that the foregoing Resolution to be a true and exact copy of the Resolution adopted by the Lake Como Borough Council at its meeting held on January 20, 2026.

Amy L. Boney, RMC
Borough Clerk

Account Id	Description	2026 Temp Budget
6-10- -001-101	A&E S&W	51,600.00
6-10- -001-102	MAYOR AND COUNCIL S&W	5,917.50
6-10- -001-103	MUNICIPAL CLERK S&W	26,100.00
6-10- -001-202	A&E STATIONARY PRINT & ADVERT	1,560.00
6-10- -001-203	MUNICIPAL CLERK OE	1,050.00
6-10- -001-204	MAYOR AND COUNCIL OE	930.00
6-10- -001-299	A&E MISC. OTHER EXPENSE	5,250.00
	Totals	92,407.50
6-10- -003-101	FINANCIAL ADMIN S&W	39,000.00
6-10- -003-201	FINANCIAL ADMIN OE	5,500.00
6-10- -003-203	AUDIT SERVICES - OE	13,950.00
	Totals	58,450.00
6-10- -004-101	ASSESSMENT TAXES S&W	7,650.00
6-10- -004-201	ASSESSMENT OF TAXES OE	4,500.00
	Totals	12,150.00
6-10- -005-101	COLLECTION OF TAXES S&W	7,500.00
6-10- -005-201	COLLECTION OF TAXES OE	5,000.00
	Totals	12,500.00
6-10- -008-201	TAX SALE OE	0.00
	Totals	0.00
6-10- -009-155	Legal Services Fees Redevelopment	0.00
6-10- -009-203	LEGAL SERVICES - FEES	21,000.00
6-10- -009-299	BOROUGH ATTORNEY	7,650.00
	Totals	28,650.00
6-10- -010-165	Engineering Services Redevelopment	0.00
6-10- -010-201	ENGINEERING OE	19,500.00
	Totals	19,500.00
6-10- -011-101	PUBLIC BUILDINGS & GROUNDS S&W	0.00
6-10- -011-201	PUBLIC BLDGS & GROUNDS OE	20,100.00
	Totals	20,100.00
6-10- -012-101	PLANNING BOARD S&W	1,260.00
6-10- -012-201	PLANNING BOARD OE	3,000.00
	Totals	4,260.00
6-10- -013-301	WORKMEN'S COMPENSATION	29,289.50
6-10- -013-302	SURETY BOND PREMIUMS	4,649.00
6-10- -013-303	INSURANCE - OTHER GENERAL LIABILITY	29,479.50
6-10- -013-304	EMPLOYEE GROUP INSURANCE	150,000.00
6-10- -013-305	GROUP INS O/S CAPS	0.00
	Totals	213,418.00
6-10- -014-201	Fire Safety Other Expenses	75.00
6-10- -014-225	FIRE ALARM SYSTEM	75.00
6-10- -014-301	Fire Safety Marshal Interlocal Belmar	0.00
	Totals	150.00

6-10- -015-301	MUNICIPAL PROSECUTOR	7,170.00
6-10- -015-401	POLICE CONTRACT	450,000.00
	Totals	457,170.00
6-10- -017-201	EMERGENCY MANAGEMENT OE	0.00
	Totals	0.00
6-10- -018-101	STREETS & ROADS S&W	88,650.00
6-10- -018-201	STREETS & ROADS OE	18,000.00
	Totals	106,650.00
6-10- -019-201	SOLID WASTE COLLECTION OE	37,500.00
	Totals	37,500.00
6-10- -020-201	RECYCLING OE	20,850.00
	Totals	20,850.00
6-10- -021-201	LANDFILL/SOLID WST DSPSL OE	28,800.00
	Totals	28,800.00
6-10- -022-101	BOARD OF HEALTH/VITAL STAT S&W	1,950.00
6-10- -022-201	PUBLIC HEALTH AND SERVICES OE	1,500.00
	Totals	3,450.00
6-10- -024-201	CELEBRATION OF PUBLIC EVENT OE	750.00
	Totals	750.00
6-10- -025-201	ADV. OF YOUTH ACTIVITIES OE	600.00
	Totals	600.00
6-10- -026-101	BUILDING INSPECTOR S&W	3,960.00
	Totals	3,960.00
6-10- -027-101	PLUMBING INSPECTOR S&W	2,880.00
	Totals	2,880.00
6-10- -028-101	FIRE INSPECTOR S&W	2,880.00
	Totals	2,880.00
6-10- -029-201	ELECTRICAL INSPECTOR S&W	2,880.00
	Totals	2,880.00
6-10- -030-101	CONSTRUCTION CODE S&W	34,740.00
6-10- -030-102	CODE ENFORCEMENT S&W	4,812.60
6-10- -030-103	CODE ENFORCMENT S&W - OUTSIDE CAP	11,013.98
6-10- -030-201	CONST. CODE OFFICIAL OE	5,700.00
6-10- -030-202	CODE ENFORCEMENT OE	150.00
6-10- -030-301	ZONING OFFICIAL S&W	1,620.00
6-10- -030-501	INTERLOCAL:MUNICIPAL COURT	0.00
6-10- -030-801	Interlocal: Fire Department	0.00
6-10- -030-901	Interlocal: EMS Regional	53,703.60
	Totals	111,740.18
6-10- -031-201	STREET LIGHTING OE	10,350.00
	Totals	10,350.00
6-10- -032-201	ENVIRONMENTAL - OTHER EXPENSES	300.00
	Totals	300.00
6-10- -033-201	Senior Citizens Activities	300.00

	Totals	300.00
6-10- -110-000	STATUTORY EXPENDITURES	0
6-10- -110-401	CONTRIB TO PERS	106,156.28
6-10- -110-402	SOCIAL SECURITY SYSTEM	24,000.00
6-10- -110-404	PFRS	13,888.00
	Totals	144,044.28
6-10- -200-101	COURT S&W	12,720.00
6-10- -200-102	PUBLIC DEFENDER	900.00
6-10- -200-201	COURT OE	1,200.00
	Totals	14,820.00
6-10- -201-101	CLEAN COMMUNITIES S&W	0.00
	Totals	0.00
6-10- -202-201	RECYCLING TONNAGE GRANT OE	0.00
	Totals	0.00
6-10- -208-101	COPS IN SHOP	0.00
	Totals	0.00
6-10- -210-201	DCA LEAP Grant	0.00
	Totals	0.00
6-10- -300-302	PAYMENT OF NOTE PRINCIPAL	0.00
6-10- -300-304	INTEREST ON NOTES	0.00
	Totals	0.00
6-10- -350-000	Emergency Authorizations	0
	Totals	0.00
6-10- -400-311	TELEPHONE CURRENT	5,190.00
	Totals	5,190.00
6-10- -500-001	CAPITAL IMPROVEMENT FUND	0.00
6-10- -500-002	Police Capital Improvements	0.00
6-10- -500-003	Capital Outlay Fire Dept Improvements	0.00
6-10- -500-004	Capital Outlay Public Works	50,000.00
	Totals	50,000.00
6-10- -600-001	RESERVE FOR UNCOLLECTED TAXES	0.00
	Totals	0.00
	Final Totals	1,466,699.96

Account Id	Description	2026 Temp Budget
6-20- -100-101	WATER/SEWER S&W	36,000.00
6-20- -100-201	WATER/SEWER OE	30,600.00
	Totals	66,600.00
6-20- -110-000	STATUTORY EXPENDITURES	0
6-20- -110-402	SOCIAL SECURITY SYSTEM	2,754
6-20- -110-410	OVEREXPENDITURE OF APPROPRIATIONS	0
	Totals	2,754.00
6-20- -150-001	PURCHASE OF WATER	100,000.00
	Totals	100,000.00
6-20- -200-000	CAPITAL IMPROVEMENTS	0
	Totals	0.00
6-20- -250-001	SOUTH MONMOUTH REG. SEW AUTH.	171,300.00
	Totals	171,300.00
6-20- -280-002	INTEREST ON BONDS	52,219.62
6-20- -280-003	Payment of Bond Principal	38,865.38
	Totals	91,085.00
	Final Totals	431,739.00

Resolution 2026 - 38

Be it resolved by the Mayor and Council of the Borough of Lake Como that the proper officers be directed and authorized to make payment from the following accounts:

<u>CURRENT ACCOUNT:</u>	
Per Attached Bill List:	\$ 497,343.90
<u>WATER ACCOUNT:</u>	
Per Attached Bill List:	\$ 134,563.62
<u>GENERAL CAPITAL FUND:</u>	
Per Attached Bill List:	\$ 12,376.75
<u>TRUST OTHER ACCOUNT:</u>	
Per Attached Bill List:	\$ 407.28
<u>ESCROW TRUST ACCOUNT:</u>	
Per Attached Bill List:	\$ 1,705.80
<u>TOURISM ACCOUNT:</u>	
Per Attached Bill List:	\$ 494.00
<u>ACH WIRE PAYMENTS:</u>	
Per Attached Bill List:	\$ 131,911.59
TOTAL:	\$ 778,802.94

Dated: January 20, 2026

Kevin G. Higgins
Mayor

Hawley Scull
Council President

Certification

I hereby certify that the foregoing Resolution to be a true and exact copy of the Resolution adopted by the Lake Como Borough Council at its meeting held on January 20, 2026.

Amy L. Boney, RMC
Borough Clerk

1-20-26 BILL LIST

PURCHASE ORDER LIST:

Vendor Name	Description	Amount
AMAZON BUSINESS	SIMPLE GREEN	21.96
AMAZON BUSINESS	DRAIN CLEANER	18.99
AMAZON BUSINESS	CLOROX CLEAN UP	22.63
AMAZON BUSINESS	PRINTER INK	75.89
AMCO SERVICES GROUP, INC.	MONTHLY PEST CONTROL DECEMBER	110.00
ATLANTIC SECURITY & FIRE	QUAR MAINT 2/1/2026-4/30/2026	839.70
BOROUGH OF BELMAR	DIESEL SERVICE DECEMBER 2025	337.28
BOROUGH OF BELMAR	GAS SERVICE DECEMBER 2025	671.72
BILL'S WORK & CASUAL WEAR	Huisman - Boots	400.00
THE COAST STAR	LEGALS AND AFFIDAVITS 12/4/25	134.38
THE COAST STAR	TAX SALE DISPLAY 12/18/25	42.92
OPTIMUM	CABLE WIFI PHONE BORO	378.40
OPTIMUM	CABLE WIFI PHONE DPW	294.03
OPTIMUM	CABLE WIFI PHONE PARK	177.94
Michael B. Campbell	GEESE CONTROL 2026	3,000.00
CME ASSOCIATES	IMPROVEMENTS TO 17TH PHASE IV	258.00
COSTCO WHOLESALE CLUB	MEMBERSHIP RENEWAL JAN 2026	69.31
NJ DCA-DEPT OF COMMUNITY AFFAI	PERMIT CHARGES 10/1-12/31/2025	803.00
DELISA WASTE SERVICES	TIPPING FEES DEC 1-15,2025	3,190.23
DELISA WASTE SERVICES	MONTHLY RECYCLING SERVICE JAN	5,166.67
DELISA WASTE SERVICES	MONTHLY TRASH SERVICE JAN	10,333.33
DELISA WASTE SERVICES	TIPPING FEES DEC 16-31,2025	2,674.89
DELISA WASTE SERVICES	RECYCLE TIPPING FEES DEC 2025	2,449.20
DELTA DENTAL OF NEW JERSEY	GROUP DENTAL INS FEB 2026	1,080.25
DENTAL SERVICE ORGANIZATION	EMPLOYEE DENTAL JANUARY	79.57
DYNAMIC TESTING SERVICE	BREATH ALCOHOL 12/16/2025	40.00
DYNAMIC TESTING SERVICE	URINE SCREEN 12/16/2025	55.00
EDMUNDS GOV TECH	SOFTWARE MAINTENANCE 2026	5,812.45
EDMUNDS GOV TECH	SOFTWARE MAINTENANCE 2026	5,426.87
EDMUNDS GOV TECH	SOFTWARE MAINTENANCE 2026	647.12
EDMUNDS GOV TECH	SOFTWARE MAINTENANCE 2026	4,400.67
EDMUNDS GOV TECH	SOFTWARE MAINTENANCE 2026	3,768.44
ELLCOTT NETWORK CONSULTANTS	QUART. MAINTENANCE AGREEMENT	703.08
ELLCOTT NETWORK CONSULTANTS	QUART. MAINTENANCE AGREEMENT	703.08
FRANCOTYP POSTALIA, INC.	POSTAGE MACHINE LEASE JAN	117.00
GOOD FRIEND ELECTRIC	BASEBALL SIGN PARTS	407.28
H2M ASSOCIATES, INC.	1808 FERNWOOD SITE PLAN REVIEW	936.80
H2M ASSOCIATES, INC.	1808 FERNWOOD SITE PLAN REVIEW	197.00
H2M ASSOCIATES, INC.	2021 MARGERUM SUBDIVISION	143.00
H2M ASSOCIATES, INC.	GENERAL CONSULTING/ENGINEERING	157.60
H2M ASSOCIATES, INC.	400 NEW BEDFORD SITE PLAN REVI	429.00

JCP&L	ELECTRIC SERVICE BORO	2,190.11
JCP&L	ELECTRIC SERVICE DPW	124.33
JCP&L	ELECTRIC SERVICE GAZEBO	4.65
JCP&L	ELECTRIC SERVICE NEW BEDFORD	9.93
JCP&L	ELECTRIC SERVICE 22ND MAIN	55.82
JCP&L	ELECTRIC SERVICE 22ND B15L2	58.91
JCP&L	STREET LIGHTING	2,779.16
JCP&L	STREET LIGHTING	11.92
JCP&L	STREET LIGHING 18TH AVE LIGHT	33.81
JEANNETTE JIMENEZ	CLEANING SERVICE DEC 2025	490.00
KEPWEL SPRING WATER CO.	WATER COOLER DPW	10.00
KEPWEL SPRING WATER CO.	WATER COOLER BORO HALL	10.00
KEPWEL SPRING WATER CO.	WATER SERVICE DPW	48.50
KEPWEL SPRING WATER CO.	WATER SERVICE BORO HALL	25.25
KEY BUSINESS SOLUTIONS	POSTBASE STANDARD INKJET	119.00
KEY BUSINESS SOLUTIONS	SHIPPING/HANDLING	19.00
LEON S. AVAKIAN, INC.	Margerum Ave Phase II- LC24-10	262.50
LEON S. AVAKIAN, INC.	LC23-03 MCOSG BEHRMAN PARK	3,361.25
LEON S. AVAKIAN, INC.	IMP TO FERNWOOD, BRIARWOOD, PINE	8,495.00
LEON S. AVAKIAN, INC.	LC25-07 STORMWATER PERMIT	675.00
LEON S. AVAKIAN, INC.	LC25-07.1 STORMWATER MAPPING	4,772.50
LEON S. AVAKIAN, INC.	LC25-01 GENERAL ENGINEERING	120.00
LEON S. AVAKIAN, INC.	LC24-07.1 STORMWATER MAPPING	82.50
LEW ENVIRONMENTAL SERVICES LLC	MAILERS TO LANDLORDS	25.30
MUNICIPAL CLERKS ASSOC MON CTY	2026 MEMBERSHIP DUES	100.00
MARCO TECHNOLOGIES, LLC	CONTRACT BASE 11/1/25-10/31/26	766.52
MARCO TECHNOLOGIES, LLC	MARCO SUPPORT DESK	120.00
MARCO TECHNOLOGIES, LLC	TARIFF AND INF ASSESSMENT FEE	6.00
COUNTY OF MONMOUTH	BRINE PICK UP 12/11/25	101.70
COUNTY OF MONMOUTH	STREET SWEEPING 11/19/25	852.21
MONMOUTH COUNTY SPCA	ANIMAL CONTROL SERVICE NOV 25	210.00
MONMOUTH MUNICIPAL JOINT INS.	JOINT INSURANCE FUND 2026 1ST	29,479.50
MONMOUTH MUNICIPAL JOINT INS.	JOINT INSURANCE FUND 2026 1ST	29,289.50
MONMOUTH MUNICIPAL JOINT INS.	JOINT INSURANCE FUND 2026 1ST	4,649.00
NJ NATURAL GAS CO	GAS SERVICE BORO	550.48
NJ NATURAL GAS CO	GAS SERVICE DPW	271.27
NJ NATURAL GAS CO	GAS SERVICE DPW REAR GARAGE	55.00
NJ CONFERENCE OF MAYORS	2026 MEMBERSHIP DUES	400.00
NJ LEAGUE OF MUNICIPALITIES	2026 NJLM MAGAZINE	25.00
ONE CALL CONCEPTS	REGULAR LOCATES DECEMBER	32.30
ONE CALL CONCEPTS	VOICE TICKET DECEMBER	2.50
ONSOLVE, LLC	CODE RED 12/1/2025-11/30/26	2,558.98
PLOSIA COHEN, LLC	REVIEW AND DRAFT EMP HANDBOOK	136.00
PUBLIC WORKS ASSOC. OF N.J.	2026 Membership A. Huisman	75.00

Quill LLC	OFFICE SUPPLIES	298.45
Quill LLC	OFFICE SUPPLIES	46.36
RAINONE COUGHLIN MINCHELLO LLC	MONTHLY LEGAL SERVICE JANUARY	2,125.00
RAINONE COUGHLIN MINCHELLO LLC	TAX APPEALS	187.00
RAINONE COUGHLIN MINCHELLO LLC	ORDINANCES	476.00
RAINONE COUGHLIN MINCHELLO LLC	SHARED SERVICE CMFO	306.00
RAINONE COUGHLIN MINCHELLO LLC	VILLAS AT LAKE COMO	459.00
R & H SPRING & TRUCK REPAIR	2014 FORD FRONT END REPAIR	2,890.89
ROK INDUSTRIES, INC.	2025 MUNI TAX LIENS ADVERTISED	480.00
Samantha Waters, Petty Cash	2025 Petty Cash	500.00
SANTANDER BANK, NA	LEASE PMNT FOR FORD F550 2025	12,695.70
LAKE COMO BOARD OF EDUCATION	SCHOOL TAX LEVY JANUARY 2026	345,074.50
SCREEN STYLES	LAKE COMO DAY 2025 APPAREL	494.00
SO. MONMOUTH REG. SEWAGE AUTH.	SEWER USE CHARGE IST QRT 2026	130,057.30
TAYLOR HARDWARE	HARDWARE STORE DECEMBER	33.98
TREASURER, STATE OF NJ	MARRAIGE LIC.REPORT OCT/NOV/DE	50.00
VAN WICKLE AUTO SUPPLY, INC.	AUTO SUPPLIES DECEMBER	353.11
VERIZON WIRELESS	OFFICE CELLULAR SERVICE JAN	243.35
VERIZON	DISPATCH PHONE JANUARY	80.63
PURCHASE ORDER TOTAL:		646,891.35
ACH PAYMENT LIST:		
PAYROLL 12-31-25		43,093.73
PAYROLL 1-14-26		42,468.04
EMP HEALTH BENEFIT JAN 2026		46,349.82
ACH PAYMENT TOTAL:		131,911.59
GRAND TOTAL:		778,802.94

Resolution 2026 - 39

Be it resolved by the Mayor and Council of the Borough of Lake Como that the proper officers be directed and authorized to make payment from the following account:

CURRENT ACCOUNT:

NJ Natural Gas Co.

PB&G OE

\$ 876.75

Dated: January 20, 2026

Kevin G. Higgins
Mayor

Hawley Scull
Council President

Certification

I hereby certify that the foregoing Resolution to be a true and exact copy of the Resolution adopted by the Lake Como Borough Council at its meeting held on January 20, 2026.

Amy L. Boney
Borough Clerk

RESOLUTION 2026-40

A RESOLUTION OF THE MAYOR AND COUNCIL AUTHORIZING THE BOROUGH OF LAKE COMO TO JOIN THE NJ SOLUTIONS JOINT HEALTH INSURANCE FUND.

WHEREAS, a number of public entities in the State of New Jersey have joined together to form the NJ Solutions Joint Health Insurance Fund, hereafter referred to as the “Fund”, as permitted by N.J.A.C. 11:15-3.1 et. seq., N.J.S.A. 17:1-8.1 et. seq., and N.J.S.A. 40A:10-36 et. seq.; and

WHEREAS, the Fund was approved to become operational by the Department of Banking and Insurance and the Department of Community Affairs (collectively, the “Departments”) and has been operational since that date; and

WHEREAS, the statutes and regulations governing the creation and operation of a joint insurance fund in the State of New Jersey contain certain restrictions and safeguards in connection with the administration of the public interest entrusted to such a Fund; and

WHEREAS, the governing body of the Borough of Lake Como hereinafter referred to as “Local Unit” has studied the feasibility of joining the Fund and has determined that membership in the Fund is in the best interest of the Local Unit.

NOW, THEREFORE, BE IT RESOLVED that the governing body of the Local Unit hereby agrees and authorizes the following:

- i. Execution of the application for membership to the Fund, including any and all documents and/or certifications as may be necessary, in order for the Local Unit to complete the application process and join the Fund.
- ii. The Local Unit shall become a member of the Fund for an initial period outlined in the Local Unit’s Indemnity and Trust Agreement, subject to the approval of the Fund Commissioners, which in no event shall exceed three (3) years as prescribed in N.J.A.C. 11:15-3.3(a).
- iii. The Local Unit shall participate in the following type(s) of coverage(s) offered by the Fund: Health Insurance and/or Prescription Insurance and/or Dental Insurance and/or Medicare Advantage/Employer Group Waiver Program as defined pursuant to N.J.S.A. 17B:17-4, the Fund’s Bylaws, and Plan of Risk Management.
- iv. Adoption and approval of the Fund’s Bylaws, a true and correct copy of which is annexed hereto as Attachment A, which has been approved by the Departments.
- v. Execution of the Local Unit’s Indemnity and Trust Agreement, a true and correct copy of which is annexed hereto as Attachment B, which has been approved by the Departments.

BE IT FURTHER RESOLVED that the governing body of the Local Unit certifies, pursuant to N.J.A.C. 11:15-3.3(a), that the Local Unit has never defaulted on claims under a self-insured plan and that it has not had its insurance canceled for nonpayment of premium for a period of at least two (2) years prior to this application.

BE IT FURTHER RESOLVED that the governing body of the Local Unit is authorized and directed to execute the Indemnity and Trust Agreement and such other documents signifying membership in the Fund as required by the Fund's Bylaws, and to deliver these documents to the Fund's Executive Director with the express reservation that these documents shall become effective only upon acceptance of the Fund's By-laws as prescribed in N.J.A.C. 11:15-3.3(a).

BE IT FURTHER RESOLVED that this resolution shall take effect upon its passage.

ADOPTED: January 20, 2026

Kevin G. Higgins
Mayor

Hawley G. Scull
Council President

Certification

I hereby certify that the foregoing Resolution to be a true and exact copy of the Resolution adopted by the Lake Como Borough Council at its meeting held on January 20, 2026.

Amy L. Boney, RMC
Borough Clerk

NJ SOLUTIONS JOINT HEALTH INSURANCE FUND

INDEMNITY AND TRUST AGREEMENT

THIS INDEMNITY AND TRUST AGREEMENT (the “Agreement”) made this 20th day of January 2026, by and between the NJ Solutions Joint Health Insurance Fund, referred to herein as the “Fund”, and the governing body of the Borough of Lake Como, a duly constituted Local Unit of Government, hereinafter referred to as “Local Unit”.

WITNESSETH:

WHEREAS, the governing bodies of various local units of government, as defined in N.J.A.C. 11:15-3.2, have collectively formed a Joint Insurance Fund as such an entity is authorized and described in N.J.S.A. 40A:10-36 et. seq., and the administrative regulations promulgated pursuant thereto; and

WHEREAS, the Local Unit has agreed to become a member of the Fund in accordance with and to the extent provided for in the Bylaws of the Fund and in consideration of such obligations and benefits to be shared by the membership of the Fund;

NOW THEREFORE, it is agreed as follows:

1. The Local Unit accepts the Fund’s Bylaws as approved and adopted and agrees to be bound by and to comply with each and every provision of said Bylaws and the pertinent statutes and administrative regulations pertaining to same.
2. The Local Unit agrees to participate in the Fund with respect to health insurance, as defined in N.J.S.A. 17B:17-4, and as authorized in the Local Unit’s resolution to join.
3. The Local Unit agrees to become a member of the Fund and to participate in the health insurance coverages and or prescription coverages and/or dental coverages offered by the Fund (subject to early release or termination pursuant to the Bylaws), such membership to commence on January 1, 2026 and ending on December 31, 2028 at 11:59 PM.
4. The Local Unit certifies that it has never defaulted on payment of any claims if self-insured and has not been cancelled for non-payment of insurance premiums for a period of at least two (2) years prior to the date of this Agreement.
5. In consideration of membership in the Fund, the Local Unit agrees that it shall jointly and severally assume and discharge the liability of each and every member of the Fund, for the periods during which the member is receiving coverage, all of whom as a condition of membership in the Fund shall execute an Indemnity and Trust Agreement similar to this Agreement and by execution hereto, the full faith and credit of the Local Unit is pledged to the punctual payments of any sums which shall become due to the Fund in

accordance with the Bylaws thereof, this Agreement or any applicable statute and/or regulation. However, nothing herein shall be construed as an obligation of the Local Unit for claims and expenses that are not covered by the Fund, or for that portion of any claim or liability within the Local Unit retained limit or in an amount which exceeds the Fund's limit of coverage.

6. If the Fund in the enforcement of any part of this Agreement shall incur necessary expenses or become obligated to pay attorneys' fees and/or court costs, the Local Unit agrees to reimburse the Fund for all such reasonable expenses, fees, and costs on demand.

7. The Local Unit and the Fund agree that the Fund shall hold all moneys in excess of the Local Unit's retained loss fund paid by the Local Unit to the Fund as fiduciaries for the benefit of Fund claimants all in accordance with N.J.A.C. 11:15-3 et. seq.

8. The Fund shall establish and maintain Claims Trust Accounts for the payment of health insurance claims in accordance with N.J.S.A. 40A:10-36 et. seq., N.J.S.A. 40A:5-1 et. seq., and such other statutes and/or regulations as may be applicable. More specifically, the aforementioned Trust Accounts shall be utilized solely for the payment of claims, allocated claim expense and stop loss insurance or reinsurance premiums for each risk or liability as follows:

- a) Employer contributions to group health insurance;
- b) Employee contributions to contributory group health insurance;
- c) Employer contributions to contingency account;
- d) Employee contributions to contingency account; and
- e) Other trust accounts as required by the Commissioner of Insurance.

9. Notwithstanding Section 8 above, the Fund shall not be required to establish separate trust accounts for employee contributions provided the Fund provides a plan in its Bylaws for the recording and accounting of employee contributions of each member.

10. Each Local Unit of government who shall become a member of the Fund shall be obligated to execute an Indemnity and Trust Agreement similar to this Agreement.

11. This Indemnity and Trust Agreement satisfies the requirements set forth in Section 2.01 of the Fund's Bylaw.

ATTEST

BOROUGH OF LAKE COMO

BY: _____

ATTEST

NJ SOLUTIONS JOINT HEALTH INSURANCE
FUND

BY: _____

RESOLUTION 2026-41

**COMMUNITY DEVELOPMENT BLOCK GRANT RESOLUTION AUTHORIZING
THE MAYOR AND MUNICIPAL CLERK TO EXECUTE A PROJECT AGREEMENT
WITH MONMOUTH COUNTY FOR PERFORMANCE AND DELIVERY OF FISCAL
YEAR 2025 COMMUNITY DEVELOPMENT PROJECTS**

WHEREAS, certain federal funds are potentially available to Monmouth County under the Housing and Community Development Act of 1974, as amended; and

WHEREAS, the County of Monmouth expects to receive an allocation for Fiscal Year 2025 from the United States Department of Housing and Urban Development; and

WHEREAS, the County of Monmouth has submitted its Annual Plan for Fiscal Year 2025 to the U.S. Department of Housing and Urban Development, which included a project hereinafter referred to as Improvements to Behrman Park Phase II with a grant allocation of \$164,848.00.

WHEREAS, the Borough of Lake Como hereby met all the requirements for the release of funds to being incurring costs for this project; and

WHEREAS, the Borough of Lake Como has filed with the Monmouth County Community Development Program an acceptable timetable for completion and expenditure of grant funds, which is included as an appendix to the Project Agreement.

NOW, THEREFORE, BE IT RESOLVED, that the Mayor and Municipal Clerk are hereby authorized to execute with the County of Monmouth the attached Project Agreement of behalf of the Borough of Lake Como.

	Moved	Second	Aye	Nay	Abstain	Absent
Councilwoman Scull						
Councilman D'Antuono						
Councilman Ventrice						
Councilwoman Albala-Doyle						
Councilman Reiniers						

Dated: January 20, 2026

Kevin G. Higgins, Mayor

Hawley G. Scull, Council President

CERTIFICATION

I, Amy L Boney, Municipal Clerk of the Borough of Lake Como do hereby certify this to be a true and exact copy of a resolution adopted by the Mayor and Council of the Borough of Lake Como, County of Monmouth, State of New Jersey at their regular meeting held on January 20, 2026.

Amy L Boney, RMC
Municipal Clerk

RESOLUTION 2026-42

**COMMUNITY DEVELOPMENT BLOCK GRANT RESOLUTION AUTHORIZING THE
MAYOR TO SIGN A CERTIFICATION PROHIBITING THE USE OF EXCESSIVE FORCE
AND A CERTIFICATION PROHIBITING THE USE OF FEDERAL FUNDS FOR LOBBYING**

WHEREAS, certain federal funds are potentially available to Monmouth County under the Housing and Community Development Act of 1974, as amended; and

WHEREAS, the United States Department of Housing and Urban Development has allocated funding to the County of Monmouth for Fiscal Year 2025; and

WHEREAS, the County is making some of these funds available to certain participating municipalities and non-profit agencies; and

WHEREAS, it is required that the Borough of Lake Como execute a Project Agreement with Monmouth County to undertake a project known as Improvements to Behrman Park Phase II; and

WHEREAS, the U.S. Department of Housing and Urban Development is requiring that the Mayor of the Borough of Lake Como sign additional certifications in order to receive these funds; and

WHEREAS, the Borough of Lake Como has adopted a policy prohibiting the use of excessive force by its law enforcement agency (police force) within its jurisdiction against any individuals engaged in non-violent civil rights demonstrations; and

WHEREAS, a copy of that policy is attached to and made part of this resolution.

NOW, THEREFORE, BE IT ORDINANED, that the Borough of Lake Como has met the conditions of receiving a Fiscal Year 2025 allocation by adopting a policy prohibiting the use of excessive force and by not using federal funds for lobbying or by disclosing that funds have been used for lobbying.

BE IT FURTHER RESOLVED, that the Mayor of the Borough of Lake Como is hereby authorized to sign the attached certifications which will become part of the Fiscal Year 2025 Project Agreement.

	Moved	Second	Aye	Nay	Abstain	Absent
Councilwoman Scull						
Councilman D'Antuono						
Councilman Ventrice						
Councilwoman Albala-Doyle						
Councilman Reiniers						

Dated: January 20, 2026

Kevin G. Higgins, Mayor

Hawley G. Scull, Council President

CERTIFICATION

I, Amy L Boney, Municipal Clerk of the Borough of Lake Como do hereby certify this to be a true and exact copy of a resolution adopted by the Mayor and Council of the Borough of Lake Como, County of Monmouth, State of New Jersey at their regular meeting held on January 20, 2026.

Amy L Boney, RMC
Municipal Clerk

RESOLUTION 2025-43

**A RESOLUTION APPROVING THE PERSON-TO-PERSON TRANSFER OF PLENARY
RETAIL DISTRIBUTION LICENSE 1347-44-008-005 FROM KARAN TWO INC. TO
ARIA SPIRITS INC. LOCATED AT 508 18TH AVENUE LAKE COMO, NJ 07719**

WHEREAS, an application has been filed for a Person-To-Person Transfer, of the Plenary Retail Distribution License 1347-44-008-005, issued to Karan Two Inc. at 508 18th Avenue; and

WHEREAS, the submitted application form is complete in all respects and the correct fees have been paid; and

WHEREAS, the Belmar Police Department is satisfied with all information and finds no reason to disqualify the applicant.

NOW, THEREFORE, BE IT RESOLVED by the Mayor and Council of the Borough of Lake Como that the Person-To-Person Transfer of the Plenary Retail Distribution License 1347-44-008-005 from Karan Two Inc. to Aria Spirits Inc. is hereby authorized effective January 20, 2026

Dated: January 20, 2026

Kevin G. Higgins
Mayor

Hawley G. Scull
Council President

Certification

I hereby certify that the foregoing Resolution to be a true and exact copy of the Resolution adopted by the Lake Como Borough Council at its meeting held on January 20, 2026.

Amy L. Boney, RMC
Borough Clerk

TR#: _____

FEE: _____

DATE: _____

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

Action ID Code
[] [] [] []
A W D U

RETAIL LIQUOR LICENSE APPLICATION

STATE ASSIGNED LICENSE NUMBER

1347 - 44 - 008 - 005

DATE APPLICATION FILED:

12 / 31 / 25

[For DIVISION use only _____]

CODE TYPE OF LICENSE (CHECK ONE)

THIS APPLICATION IS FOR:

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

- 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 ☒ Plenary Retail Distribution
43 _____ Limited Retail Distribution

_____ A New License

☒ 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)
40 _____ Special Permit for a Golf Facility
(NJAC 13:2-5.3)

This Area is Reserved for Municipal Use

Municipal Fee \$ 180.00

Effective Date _____ / _____ / _____

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

State Fee \$ 200.00

Date Denied _____ / _____ / _____

(As Stated in Resolution)

Refund Amount \$ _____

Special Conditions Attached: _____ Yes _____ No

Boney, Amy L.

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

Amy L. Boney
Signature of Municipal Clerk or ABC Secretary

PLEASE TYPE OR PRINT ALL INFORMATION

STATE ASSIGNED LICENSE NUMBER 1347 - 44 - 008 - 005Application is made on behalf of: 2

1 = An Individual
 3 = A Partnership
 5 = Incorporated Club

2 = Business Corporation
 4 = Unincorporated Club
 6 = Limited Partnership

2.1 NAME(S) AS IT DOES OR WILL APPEAR ON THE LICENSE CERTIFICATE (NOT "TRADE NAME"):

Aria Spirits, Inc.
 (Last Name, First, Middle Initial or Corporate Name)

2.2 ACTUAL ADDRESS WHERE THE LICENSE IS TO BE USED (SITED PREMISES):

Street Address 508 18th Avenue
 Number Street Name
 Municipality Lake Como New Jersey Zip 07719 - 3073
 Telephone number of business () () () - () () ()
 Area Exchange Number

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

Street Address N/A
 Number Street Name
 P.O. Box # _____ Municipality _____ State _____
 Zip _____ - _____ Telephone () _____ - _____

2.4 New Jersey Sales Tax Certificate of Authority No. ~~0157860000~~ 394623 165 - 0002.5 TRADE NAME(S) UNDER WHICH BUSINESS IS TO BE CONDUCTED. ALL TRADE NAMES MUST BE LISTED AND REGISTERED WITH THE NJ SECRETARY OF STATE (If a corporation) OR COUNTY CLERK (If a partnership or sole proprietor): DISCOUNT LIQUOR

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?

☒ 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 PLACE OF 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 ☒ 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. IF NO, PROVIDE ANTICIPATED DATE OF LICENSE ACTIVATION:

____ / ____ / ____

STATE ASSIGNED LICENSE NUMBER 1347 - 44 - 008 - 005

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 3.1 only, entering N/A for "not applicable." (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 BUILDING ARE TO BE INCLUDED UNDER THIS LICENSE? _____

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 which ones are not by answering the following questions:

3.4 Basement	_____ Yes _____ No	All of it	_____ Yes _____ No
1 st floor	<u>X</u> Yes _____ No	All of it	<u>X</u> Yes _____ No
2 nd floor	_____ Yes <u>X</u> No	All of it	_____ Yes _____ No
3 rd floor	_____ Yes _____ No	All or it	_____ Yes _____ 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 <u>X</u> No
IF "YES", IS THERE A MORTGAGE ON THE BUILDING?	_____ Yes _____ No <u>N/A</u>
DOES THE APPLICANT LEASE THE BUILDING?	_____ Yes _____ No <u>N/A</u>

3.8 MORTGAGEE (HOLDER OF MORTGAGE):

(Last Name, First Name, Middle Initial or Corporate Name)
Street Address _____
P.O. Box # _____ Number _____ Street Name _____
Municipality _____ State _____
Zip _____ - _____

3.9 LANDLORD (HOLDER OF LEASE):

(Last Name, First Name, Middle Initial or Corporate Name)
Street Address _____
P.O. Box # _____ Number _____ Street Name _____
Municipality _____ State _____
Zip _____ - _____

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 X No

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

 Yes No N/A

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

<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"/> NJ 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

Business to be operated N/A

Street Address _____

Number _____ Street Name _____

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

PLEASE TYPE OR PRINT ALL INFORMATION

STATE ASSIGNED LICENSE NUMBER 1347 - 44 - 008 - 005

ALL APPLICANTS ANSWER THE FOLLOWING

- 5.1 IS THE APPLICATION OR ANY OTHER PERSON MENTIONED IN THIS APPLICATION A POLICE OFFICER OR HOLD ANY POSITION ENTRUSTED WITH THE ENFORCEMENT OF ANY LAWS CONCERNING ALCOHOLIC BEVERAGES IN ANY MANNER WHATSOEVER?

____ Yes ☒ No

If the answer is "Yes", complete the following:

Name of individual _____
Last Name First Middle Initial
Title of position held _____
Name of Employing Agency _____

- 5.2 DOES THE APPLICANT OR ANY OTHER PERSON MENTIONED IN THIS APPLICATION, OR ANY PERSON HAVING A BENEFICIAL INTEREST IN THE LICENSED BUSINESS HOLD OFFICE IN THE UNIT OF GOVERNMENT ISSUING THE LICENSE? ____ Yes ☒ No

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

Name of individual _____
Last Name First Middle Initial
Title of office _____
Municipality _____

- 5.3 DOES THE APPLICANT OR ANY OTHER PERSON MENTIONED IN THIS LICENSE APPLICATION, OR ANYONE WITH A BENEFICIAL INTEREST IN THE LICENSED BUSINESS, DIRECTLY OR INDIRECTLY, HAVE ANY INTEREST IN ANY BREWERY, WINERY, DISTILLER, RECTIFYING AND BLENDING PLANT, IMPORTER OR WHOLESALE ALCOHOLIC BEVERAGE BUSINESS, AS OWNER, PART OWNER, LANDLORD, TENANT, MORTGAGE HOLDER, OR AS A STOCKHOLDER, OFFICER, DIRECTOR, AGENT, EMPLOYEE, OR OTHERWISE?

____ Yes ☒ No

IF THE ANSWER IS "YES" ATTACH AN AFFIDAVIT EXPLAINING THE RELATIONSHIP AND NATURE OF THE INTEREST AND COMPLETE THE FOLLOWING:

- A. New Jersey license number, if applicable _____
- B. IF THE BUSINESS DOES NOT HOLD A NEW JERSEY LIQUOR LICENSE, ANSWER THE FOLLOWING QUESTIONS:

Name of entity conducting business (Corporation, Partnership or Individual)

(Last Name, First Name, or Corporate Name)

Street Address _____
Number Street Name

P.O. Box # _____ Municipality _____ State _____

Zip _____ - _____

Type of Business _____

STATE ASSIGNED LICENSE NUMBER 1347 - 44 - 008 - 005

ALL APPLICANTS ANSWER THE FOLLOWING

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

☐ Yes ☒ 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 ☒ No

IF THE ANSWER 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 _____

6.3 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 ☒ No

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

Name of individual _____

Last Name

First

Middle Initial

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☐ 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 ☒ No

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

Name of individual _____

Last Name

First

Middle Initial

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 NJ 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 N.J.S.A. 33:1-31.2 and N.J.A.C. 13:2-15).

Provide Agency Docket No. : (NN)-_____

STATE ASSIGNED LICENSE NUMBER 1347 - 44 - 008 - 005

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 THIS 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 NAMES(S) OF THE PERSON(S) OR CORPORATIONS(S) WHO HOLD(S) SUCH INTEREST. USE ADDITIONAL PAGE(S) 7 AS NEEDED.

A. License number _____ - _____ - _____

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

Relationship to applicant _____

.....
B. License number _____ - _____ - _____

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

Relationship to applicant _____

.....
C. 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

NJ Sales Tax Certificate of Authority No. _____

Date of Birth ____ / ____ / ____

PLEASE TYPE OR PRINT ALL INFORMATION

STATE ASSIGNED LICENSE NUMBER 1347 - 44 - 008 - 005

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 X 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 N.J.S.A. 33:1-12.20?

____ Yes X No

- 8.3 HAS THE LICENSE BEEN ISSUED, OR IS IT BEING REQUESTED TO BE ISSUED AS AN EXCEPTION TO THE TWO LICENSE LIMITATION LAW (N.J.S.A. 33:1-12.32) FOR A HOTEL/MOTEL, RESTAURANT, BOWLING ALLEY OR INTERNATIONAL AIRPORT? ____ Yes X 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 - 005

- 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:

Karen Two, Inc

(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

Number

Street Name

Municipality

New Jersey

Zip

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 ____ / ____ / ____

Date of second notice ____ / ____ / ____

- 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 PERCENT OF THE STOCK OF THE LICENSED COMPANY (ONE PUBLICATION OF NOTICE REQUIRED).

Date of notice ____ / ____ / ____

Name of newspaper publishing notice N/A

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 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

PLEASE TYPE OR PRINT ALL INFORMATION

STATE ASSIGNED LICENSE NUMBER 1347 - 44 - 008 - 005

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 X 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 _____

(Last Name, First Name, Middle Initial or Corporate Name)
Social Security number _____ - _____ - _____ or _____

NJ Sales Tax Certificate of Authority No. _____

Street Address _____
Number Street Name

P.O. Box # _____ Municipality _____ State _____

Zip _____ - _____

Describe Nature of Interest _____

- 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 X 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 _____

(Last Name, First Name, Middle Initial or Corporate Name)
Social Security number _____ - _____ - _____ or _____

NJ Sales Tax Certificate of Authority No. _____

Street Address _____
Number Street Name

P.O. Box # _____ Municipality _____ State _____

Zip _____ - _____

Describe Nature of Interest _____

- 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 X 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 _____

(Last Name, First Name, Middle Initial or Corporate Name)
Social Security number _____ - _____ - _____ or _____

NJ Sales Tax Certificate of Authority No. _____

Street Address _____
Number Street Name

P.O. Box # _____ Municipality _____ State _____

Zip _____ - _____

Describe Nature of Interest _____

STATE ASSIGNED LICENSE NUMBER 1347 - 44 - 006 - 005

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 OR 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 or corporation Aria Spirits, Inc.10.2 Street address of home office 405 Windmill LaneMunicipality MarlboroState NJZip 07746 - 2809

10.3 NJ Sales Tax Certificate of Authority Number _____

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 _____ No10.6 DATE CHARTERED OR INCORPORATED 9 / 30 / 25 STATE NJ10.7 CERTIFICATE OF INCORPORATION NUMBER [REDACTED]

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 date ____ / ____ / ____

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 OF U.S. DISTRICT COURT, MAY BE MADE:

Name Patel, Karan

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

Street Address 405 Windmill Lane

Number _____

Street Name _____

Municipality Marlboro

New Jersey

Zip 07746 - 2809

Telephone Number _____

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 - 005

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)

Aria Spirits, Inc.

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

PatelKaran

Last Name

First

Middle Initial

Home Street Address

405

Number

Windmill

Street Name

Lane

P.O. Box #

Municipality

Marlboro

State

PA

Zip

07146 - 2809

Social Security number

Date of birth

8 / 26 / 89

Home telephone number

Area

Exchange

Number

Office telephone number

Area

Exchange

Number

% of business owned or controlled

100 %

Number of shares

100Check position that applies: ☐ Sole owner ☐ Partner ☒ Stockholder☒ President☐ Vice-President☒ Secretary☒ 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 1347-44-008-005

AFFIDAVIT

LICENSE PERIOD
APPLIED FOR

FROM _____ TO _____

DATE:

State of New Jersey)
 County of Monmouth) SS:
)

As provided by law (N.J.S.A. 33:1-35),

(Check One)

1. The Individual Applicant ☒
2. Members of the Partnership Applicant

3. Karan Patel of Aria Spinto Inc
 (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 his/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 signator 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)

(Corporations Only)
 Attestation by Corporate Secretary

 (Partnership Name)

 (Signature of Partner)

Attest:

 Corporate Name

 (Signature of Partner)

By _____
 (Signature of Corporate President or Vice President)

 (Signature of Partner)

Secretary _____
 Signature
 Affix Corporate Seal

 (Signature of Partner)

Sworn to and subscribed before me

this _____ day of _____ 2 _____.

AFFIDAVIT MUST BE SIGNED HERE →

BY DULY AUTHORIZED NOTARY PUBLIC

OR AN ATTORNEY AT LAW OF NEW JERSEY

 (Signature of Officer Administering Oath)

 (Printed Name of Officer Administering Oath)

 (Title of Officer Administering Oath)

 (Date of Expiration of
 Commission, if applicable)