



Board of Licensing Commissioners
Application for Alcoholic Beverage License by Corporation
DECEMBER 1, 2017 to NOVEMBER 30, 2018
(Pursuant to provisions of RIGL Title 3)

RETAILER CLASS:

A BH BM BT BV ☒ BVL C E ED J T (1:00 a.m.)

NAME OF APPLICANT (Corporation Name)

BARTENDERS' UNION II HOLDINGS, LLC

TEL #

(401) 699-3453 Cg-L

D/B/A

Circe South

(401) 787-4329 Kyle

ADDRESS OF PREMISES

1046 DIVISION ROAD, EAST GREENWICH, RI 02818

STATE INCORPORATED

RHODE ISLAND

DATE INCORPORATED

NAME, ADDRESS AND TELEPHONE NUMBER OF ALL OFFICERS:

PRESIDENT

N/A

VICE-PRESIDENT

N/A

SECRETARY

N/A

TREASURER

N/A

NAME, ADDRESS AND TELEPHONE NUMBER OF ALL DIRECTORS OR BOARD MEMBERS:

CARLO CARLOZZI - MEMBER

KYLE POLANO - MEMBER

CLASSES OF STOCK:

N/A

(a) Amount of Each Authorized:

(b) Amount of Each Issued:

NAMES AND ADDRESSES OF ALL REGISTERED OWNERS OF EACH CLASS AND AMOUNT OWNED: (attach list if necessary)

CARLO CARLOZZI - 70%

KYLE POLANO - 30%

IF ANY OF THE ABOVE STOCK IS HYPOTHECATED OR PLEDGED, PROVIDE DETAILS:

N/A

IF APPLICATION IS ON BEHALF OF UNDISCLOSED PRINCIPAL OR PARTY IN INTEREST, PROVIDE DETAILS:

N/A

Does Applicant Own Premises?

Yes No ☒

Is Property Mortgaged?

Yes No ☒

Is Property Leased?

Yes ☒ No

NAME AND ADDRESS OF MORTGAGEE OR LESSEE AND AMOUNT OF EXTENT:

NEW ENGLAND INSTITUTE OF TECHNOLOGY - LANDLOID

5 YEAR LEASE w/ TWO 5 YEAR OPTIONS

ANNUAL BASE RENT: \$48,000.00

LOCATIONS WITHIN OR OUTSIDE OF BUILDING WHERE LIQUOR WILL BE SERVED:

RESTAURANT BUILDING (3 ROOMS) + OUTDOOR PATIO; GOLF COURSE

HAVE ANY OFFICERS, BOARD MEMBERS OR STOCKHOLDERS EVER BEEN ARRESTED OR CONVICTED OF A CRIME? YES NO ☒ IF YES, PLEASE EXPLAIN:

IS ANY OTHER BUSINESS TO BE CARRIED ON IN LICENSED PREMISES? YES ☒ NO ☐

IF YES, PLEASE EXPLAIN:

GOLF COURSE OPERATION

IS ANY OFFICER, BOARD MEMBER OR STOCKHOLDER ENGAGED IN ANY MANNER AS A LAW ENFORCEMENT OFFICER? YES ☐ NO ☒ IF YES, PLEASE EXPLAIN:

IS APPLICANT OR ANY OF ITS OFFICERS, BOARD MEMBERS OR STOCKHOLDERS INTERESTED DIRECTLY OR INDIRECTLY AS PRINCIPLE OR ASSOCIATE OR IN ANY MANNER WHATSOEVER IN ANY LICENSE ISSUED UNDER CHAPTER 3 OF THE GENERAL LAWS OF RHODE ISLAND, AS AMENDED? YES ☐ NO ☒ IF YES, PLEASE EXPLAIN:

IS APPLICANT THE OWNER OR OPERATOR OF ANY OTHER BUSINESS? YES ☐ NO ☒ IF YES, PLEASE EXPLAIN:

CARLO CARLOZZI INDIVIDUALLY IS A PRINCIPAL IN 50 WESTBOST HOLIDAYS, LLC

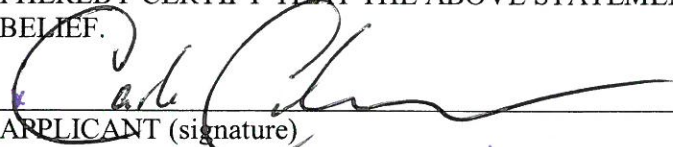
STATE AMOUNT OF CAPITAL INVESTED IN THE BUSINESS:

\$150,000.00

DOES ESTABLISHMENT HAVE A DRAFT SYSTEM (RIGL 3-7-25)?

YES

I HEREBY CERTIFY THAT THE ABOVE STATEMENTS ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.



APPLICANT (signature)

05/11/2018
DATE

CARLO CARLOZZI - MANAGER / MEMBER

PRINTED NAME AND TITLE


WITNESS OR NOTARY PUBLIC

DATE

Instructions for Applicants

1. Every question on Application Form must be answered. Any false statement made by the Applicant will be sufficient grounds for the denial of the application or the revocation of the license in case one has been granted.
2. Corporations having 25 or more stockholders need not file a list of the names and addresses of stockholders.
3. Attention is called to the requirements of RIGL 3-5-10:
 - a) All newly elected officers or directors must be reported to the Board of License Commissioners within 30 days.
 - b) Any acquisition by any person of more than ten per cent (10%) of any class of corporate stock must be reported within 30 days.
 - c) Any transfer of fifty per cent (50%) or more of any class of corporate stock can be made only by written application to the licensing board subject to the procedures for a transfer of a license.
4. Submit with this application a copy of proposed menu. (Class BV; BVL)
5. Submit a Criminal History Record for all Officers, obtained at the RI Attorney General's office (new applicants only).
6. Submit a copy of Pharmacist's License from the Department of Health (Class E).
7. Should your business close for any reason, please contact the Town Clerk at 401-886-8604.
8. Applicant certifies that under penalties of perjury that such person has filed all required tax returns and paid all taxes due the State per RIGL 5-76-2.

Office Use Only

Date Approved by Council:	Date License Issued:
Fee Paid:	Date License Expires:
License Issued By:	



Town of East Greenwich, Rhode Island

Town Clerk's Office, 125 Main Street, PO Box 111, East Greenwich, RI 02818
(401) 886-8605

APPLICATION FOR VIRTUALING LICENSE

DECEMBER 1, 2017 to NOVEMBER 30, 2018

(Pursuant to provisions of RIGL Section 5-24-1)

☐

RENEWAL

☒

NEW

BUSINESS NAME BARTENDERS' UNION II HOLDINGS, LLC

(D/B/A) N/A Circe South

LOCATION OF BUSINESS 1646 DIVISION ROAD, EAST GREENWICH, RI 02818

BUSINESS ADDRESS (If different than location) _____

TELEPHONE (401) 699-3453 **HOURS OF OPERATION** M - TH 11:00 AM - 11:00 PM

F - SAT 11:00 AM - 12:00 PM

SOLE PROPRIETOR (PRINT NAME, ADDRESS AND DATE OF BIRTH):
NAME **ADDRESS** **DATE OF BIRTH**

CORPORATIONS/PARTNERSHIPS (PRINT NAME, ADDRESS AND DATE OF BIRTH of all partners or principal officers and stockholders):

NAME	ADDRESS	DATE OF BIRTH
CARLO CARLOZZI	20 FOX RUN, EAST GREENWICH, RI	03/24/1973
KYLE POLAND	40 WINDSOR ROAD, FOSTER, RI	09/23/1983

DESCRIBE TYPE OF OPERATION (Restaurant, Bakery, etc.):

Is your operation and storage area all on one floor? Yes ☐ No ☐

Seating capacity 150+ No. of Dining Rooms 3 No. of Kitchens 1

RI RETAIL SALES TAX PERMIT NO. _____

I HEREBY CERTIFY THAT THE ABOVE STATEMENTS ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

SIGNATURE OF APPLICANT: [Signature] **DATE:** 05/11/2018

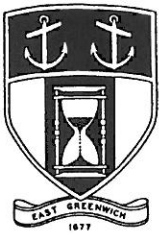
NOTE: INSPECTIONS BY THE RI HEALTH DEPT, BUILDING INSPECTOR AND FIRE MARSHAL ARE REQUIRED. NO ACTIVITY WILL BE AUTHORIZED UNTIL SATISFACTORY CERTIFICATES ARE OBTAINED. ALL TAXES MUST BE PAID.

(A virtualing house is a business where food is prepared and/or consumed on the premises.)

Office Use Only

Date Approved by Council:	Date License Issued:
Fee Paid: \$75.00	Date License Expires:
Extended Hours (1 AM - 4 AM) \$100.00 *	
License Issued By:	

*Please note the extended hours fee is \$100 total not in addition to the \$75



Town of East Greenwich, Rhode Island

Town Clerk's Office, 125 Main Street, PO Box 111, East Greenwich, RI 02818
(401) 886-8605

**APPLICATION FOR ENTERTAINMENT/DANCE LICENSE
DECEMBER 1, 2017 to NOVEMBER 30, 2018**

☐

RENEWAL

☐

NEW

NAME OF APPLICANT: Carlo Carozzi

TITLE OR POSITION: OWNER CONTACT NUMBER _____

NAME OF BUSINESS: Ciece South

BUSINESS ADDRESS: 16410 Division Road

MAILING ADDRESS: Same

BUSINESS TELEPHONE: (401) 699-3453

Nature of Entertainment: Vocal ☒ Instrumental _____ Karaoke _____
Band _____ Disc Jockey ☒

[Not valid for amplified sound out of doors (Code Section 152-8)]

Other (explain) _____

Location on premises: Lounge ☒ Dining _____

Other (explain) _____

Dancing to be conducted: _____
(If yes, please specify area.)

I HEREBY CERTIFY THAT THE ABOVE STATEMENTS ARE TRUE TO THE BEST OF MY
KNOWLEDGE AND BELIEF.

SIGNATURE [Signature] DATE 5/15/18

LICENSE FEE: \$60.00

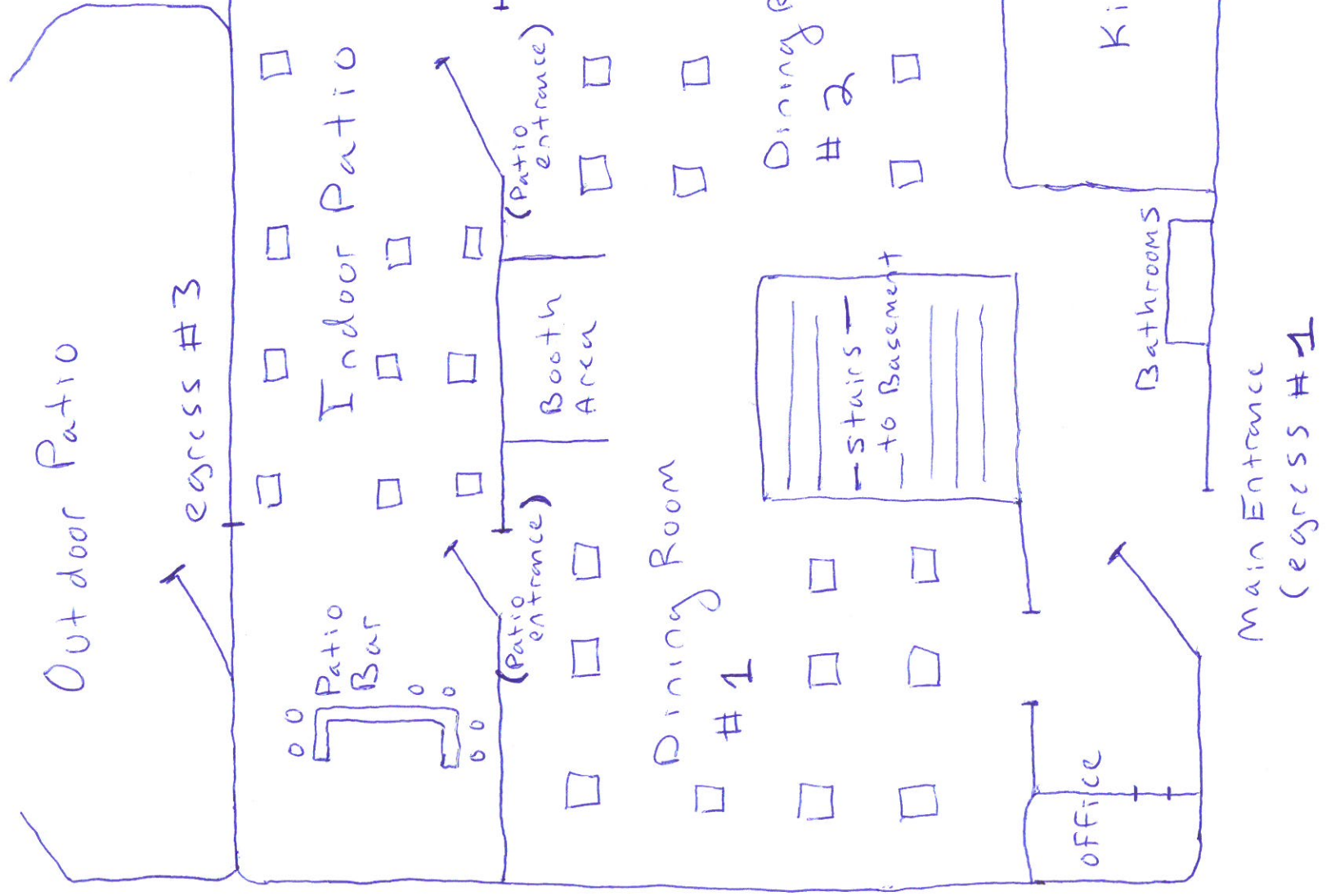
PAYABLE TO: TOWN OF EAST GREENWICH

Office Use Only

Date Approved by Council:	Date License Issued:
Fee Paid:	Date License Expires:
License Issued By:	

Circe Restaurant's Bar E.G.

*Alcohol will be served in both patio areas, both dining rooms, and at both bars.



Kyle Poland 5-11-2018