

For Calendar Year: 2019

TOWN OF NATICK

APPLICATION FOR A WEEKDAY ENTERTAINMENT LICENSE

The undersigned hereby applies for a Weekday Entertainment License in accordance with the provisions of the statutes relating thereto: Name of Establishment: Residence Inn by Marriott Natick Applicant (must be an individual): Colwen Management, Inc., Leo Xarras, Chairman & CEO If Businesss is a Corporation / Corporate Name and Officers: See Exhibit A attached hereto If Business is not a Corporation, Name of Owner: N/A Address of Establishment: 1 Superior Drive Mailing Address: Email Address: mcolavecchio@colwenhotels.com Fax Number: 603-897-6110 Describe the type of entertainment at your Establishment: Piped music and TV on first floor lobby, dining, and bar/lounge. Occasional musicians in bar/lounge. Musicians, DJs, and Dancing in Function Rooms. Piped music and TV - 24/7. Occasional Musicians in bar 5pm-11pm. Function rooms for private events only Proposed hours of Entertainment Signature of Applicant: A certificate of insurance showing evidence that the applicant has workers' compensation insurance must be included with this completed application.

| Pursuant to M.G.L. Ch. 62C, Sec. 49A: | | |
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| I certify under the penalties of perjury that I, to my best knowledge and belief, have filed all state tax returns and paid all state taxes required under law. | | |
| Signature of Applicant (Mandatory) | By Corporate Officer | |
| O2-052\u03b858 Either a Social Security Number Or Federal Identification Number Must Be Supplied | (If applicable) 7/9/19 Date (required) | |

This License will not be issued unless this certification clause is signed by the applicant.

| FOR OFFICE USE ONLY: | |
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| Fee Paid: \$ Check # Does Application meet all applicable zoning by-laws (3 Community & Development) Date of BoS Meeting ApprovedApprovedApproved with Conditions (attach statement of conditions)Denied (attach statement of reasons) | Signed by |
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