




Apply for a Liquor License

112397

Applicant

 Elizabeth Brantingham
 401-889-5100 ext. 121
 ebrantingham@newportharbor.com

Please select the License(s) you are applying for

Liquor Licenses

BV (Restaurant) \$2000

BX (2 AM Closing) \$500

true

Food \$110

true

1-4 a.m. \$110

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Are you applying for a Valet License? \$50

No

Holiday \$110

true

Tobacco (Nicotine/Tobacco) \$100

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Frozen dessert \$20

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Is this a Liquor License Renewal?

Is this application for a liquor license renewal?

Yes

Transfer of License

Are you transferring a liquor license (\$25.00 fee)

No

Business Info:

Doing Business As (the name of the business/establishment applying for the license)

Waterman Grille, LLC

Business address where the license will be held

4 Richmond Square

Is a CORPORATION (INC or LLC) applying to hold this license?

Yes

Will you use social media to promote business?

Yes

Please list any social media platforms including usernames or account IDs that will be used to promote your business.

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By checking this I acknowledge that I understand it is illegal for Liquor-Licensed businesses to host bottle service or offer drink specials, and I will not promote or offer bottle service or drink specials.

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Applicant/Owner Info:

Is the person filling out this form the principle owner of the business applying for the license?

No

Principle Owner/Applicant who will hold the license

Waterman Grille, LLC

What is your business relationship to the business owner?

Other

If applicant is not the principle owner or if other was selected for business relationship, briefly explain:

Corporate Administrator, Newport Harbor Corp- (parent Company)

Complete Home Address including street, city, state, and zip

300 Metro Center Blvd

Phone Number

401-889-5100 X 121

Secondary Contact Number

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E-mail

ebrantingham@newportharbor.com

Information on Corporation

Corporation Name that will hold the license (please include the INC or LLC)

Waterman Grille, LLC

Corporation Address

300 Metro Center Blvd S 100, Warwick, RI 02886

State of Incorporation

Rhode Island

Corporation Phone Number

401-8895100 x 121

Does the Applicant Own the Premises?

No

Have any officers, board members, or stockholders ever been arrested or convicted of a crime?

No

Disclosure of Additional Financial Interests

Static Field

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Is there anyone else who has financial or ownership interests including people or entities who have provided loans to the applicant for the purpose of this license?

Yes

Name the person or entity holding interest

Newport Harbor Corp

Address of person or entity holding interest

300 Metro Center Blvd S 100, Warwick, RI 02886

Relationship to owner/applicant

Other

Define Other

Parent Company

Yearly Licenses for Billiard and Amusement Centers

Do you have an amusement center, as defined above?

No

Will your establishment have any billiard tables?

No

Annual Expansion of Premises

Static Field

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Are you applying for an annual expansion of premises? (\$250)

No

Workers Compensation

Static Field

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Static Field

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PLEASE READ AND ACKNOWLEDGE: By submitting this application I hereby certify that all employees working for this business will have completed and hold current TIPS certification as applicable and that I will meet all Workers' Compensation requirements for my business. I agree to keep and provide proof of the above to present to the City of Providence upon request

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Signature

I, the applicant, affirm that the facts contained herein are true and that any omission or nonfactual information could result in the denial of my license.

true

Please type the first and last name of the person filling out this application and attesting to the accuracy of all the information entered and agreed to above.

Elizabeth Brantingham