

## **SOUTH PORTLAND CITY COUNCIL**

*POSITION PAPER OF THE CITY CLERK*

***SUBJECT:***

***ORDER #22-16/17 – Granting ZOYA INC, DBA, PINE HAVEN MOTEL, 857 MAIN STREET  
A LODGING ESTABLISHMENT LICENSE. Passage requires majority vote.***

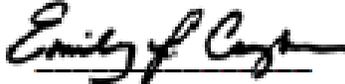
***POSITION:***

This is an existing business in the City of South Portland with new ownership.

The application was submitted and signed off by the Police, Code, Building Inspector and Fire Departments, as is required. There have been no objections from the public.

***REQUESTED ACTION:***

Passage of ORDER #22-16/17.

  
CITY CLERK



CITY OF SOUTH PORTLAND

THOMAS E. BLAKE  
Mayor

DON GERRISH  
Interim City Manager

SALLY J. DAGGETT  
Jensen Baird Gardner & Henry

EMILY CARRINGTON  
City Clerk

**IN COUNCIL  
ORDER #22-16/17**

District One  
CLAUDE V.Z. MORGAN

\_\_\_\_\_

District Two  
PATRICIA SMITH

\_\_\_\_\_

District Three  
EBEN ROSE

\_\_\_\_\_

District Four  
LINDA C. COHEN

\_\_\_\_\_

District Five  
BRAD FOX

\_\_\_\_\_

At Large  
MAXINE BEECHER

\_\_\_\_\_

At Large  
THOMAS E. BLAKE

ORDERED, that Zoya Inc., DBA Pine Haven Motel, 857 Main Street, be granted a Lodging Establishment license. Passage requires majority vote.

Dated: August 1, 2016



City of South Portland  
Office of the City Clerk  
25 Cottage Road  
South Portland, ME 04106  
207-767-7628

**Application for a Lodging Establishment License**

Valid \_\_\_\_\_ to May 31, 2017  
§14-800 to §14-803

Check One: Individual  Corporation  Association  Partnership

Check One: Hotel  Motel  Bed & Breakfast

South Portland Business Name: <u>Pine Haven Motel</u>	
South Portland Address of Business: <u>857 Main Street, South Portland ME 04106</u>	
Mailing Address: <u>Same as above</u>	
Telephone: <u>207-772-4057</u>	Website:
Manager Name: <u>Jarina Kathawala</u>	Email: <u>Jarina02144@yahoo.com</u>
Owner of Business: <u>Jarina Kathawala</u>	
Address: <u>857 Main Street South Portland, ME 04106</u>	
Contact Name: <u>Jarina Kathawala</u>	Contact Number: <u>207-807-7896</u>
Owner of Premises:	
Address of Premises Owner:	

Total Number of Rooms for Rent in Establishment: This year: 17 Last year: 17

Is food available for guests to consume on premises? Yes  No

Is there a swimming pool on the premises? Yes  No

License Fee:	\$50.00
Each Room Fee: \$3.00	
# of rooms <u>17</u> x \$3.00 = <u>\$51.00</u> (not to exceed \$300.00)	
Processing Fee:	\$20.00
Total:	<u>\$121.00</u>

Applicant, by signature below, agrees to abide by all laws, orders, ordinances, rules and regulations governing the above license and further agrees that any misstatement of material fact may result in refusal of license or revocation if one has been granted. Applicant agrees that all taxes and accounts pertaining to the premises will be paid prior to issuance of the license.

Jayina Kathawala  
 Authorized Signature

Jayina Kathawala  
 Print Name and Title

7/20/2016  
 Date

\*\*\*\*\*

FOR CITY USE ONLY

By: \_\_\_\_\_

\_\_\_\_\_

By: \_\_\_\_\_

By: \_\_\_\_\_

Corporate Officer List  
 City of South Portland  
 Office of City Clerk  
 25 Cottage Road  
 South Portland, ME 04106

Name of Company: Zoya LLC

If applicant is a partnership, association or corporation, list names, residences, and birth dates as well as title of each member. If applicant is new and/or city ordinance requires a background check be conducted on all corporate officers, a \$25 fee per name applies. (Check may be made out to the City of South Portland).

<b>Name</b> full name, including middle initial and maiden name, if applicable	<b>Date of Birth</b>
Jarina S. Kathawala	
<b>Address</b>	
857 Main Street South Portland, ME 04106	Manager
<b>Name</b> full name, including middle initial and maiden name, if applicable	<b>Date of Birth</b>
Shakis N. Kathawala	
<b>Address</b>	<b>Title</b>
857 Main Street South Portland, ME 04106	Manager
<b>Name</b> full name, including middle initial and maiden name, if applicable	<b>Date of Birth</b>
<b>Address</b>	<b>Title</b>
<b>Name</b> full name, including middle initial and maiden name, if applicable	<b>Date of Birth</b>
<b>Address</b>	<b>Title</b>

Jarina Kathawala  
 Signature of Authorized Officer