

This meeting will be a hybrid meeting via Zoom and in person. For instructions on how to join the meeting, visit [greensborovt.gov](https://greensborovt.gov). On the home page, look for the meeting agenda and Zoom link on the calendar. For help with joining the meeting, call the Town Clerk at 533-2911 during office hours

## **SPECIAL SELECTBOARD MEETING**

### **Greensboro Free Library**

**HYBRID MEETING**  
**FRIDAY MARCH 21, 2025**  
**6:30 pm**  
**GREENSBORO FREE LIBRARY**  
**AGENDA**

- 1. Call the Meeting to Order**
- 2. Additions to the Agenda**  
**Public Comment**
- 3. Rural Edge Informational Meeting and Australian Vote Dates**
- 4. Bread and Puppet Use of Gravel Pit for Parking**
- 5. Liquor Licenses: Hill Farmstead Brewery**  
**Smith's Store**



**Application ID:** DLL - Application - 55106  
**Application for:** Second Class License  
**Category of Business:** Second Class

### Business/ Entity Information

**Business/ Entity Name:** Hill Farmstead, LLC  
**Business ID:** 0007202  
**Business Address:**  
**Entity Type:** Limited Liability Corporation  
**Management Type if LLC:**  
**Phone:**  
**Email:** accounting@hillfarmstead.com

### People Information

- **Person:** Shaun Hill

**Business Role:** Business Principal  
**Business Address:**  
**Phone:**  
**Email:** accounting@hillfarmstead.com  
**US Citizen?**  
**Political Position**  
**Name:** Shaun Hill  
**Office:**  
**Jurisdiction:**

#### Violations:

Violation ID	Court/Traffic Bureau	Offense	Date of Offense
--------------	----------------------	---------	-----------------

- **Person:** Shaun Hill

**Business Role:** Business Principal  
**Email:** shaun@hillfarmstead.com

**Business Address:**

,  
,,

**Phone:**

**US Citizen?**

**Political Position**

**Name:** Shaun Hill

**Office:**

**Jurisdiction:**

**Violations:**

Violation ID	Court/Traffic Bureau	Offense	Date of Offense
--------------	----------------------	---------	-----------------

• **Person:**

Bob Montgomery

**Business Role:**

Registered Agent

**Email:**

bob@hillfarmstead.com

**Business Address:**

,  
,,

**Phone:**

**US Citizen?**

**Political Position**

**Name:** Bob Montgomery

**Office:**

**Jurisdiction:**

**Violations:**

Violation ID	Court/Traffic Bureau	Offense	Date of Offense
--------------	----------------------	---------	-----------------

### Location/ Premises Detail

**Location Name:**

Hill Farmstead (1st)

**Do you lease this Premises:**

**Health License:**

Food:

Lodging:

**Location Address:**

403 Hill Road,  
Greensboro, Vermont 05842

**Vermont Tax Department:**

**Local Jurisdiction/ Town Clerk:**

Greensboro

### Education Details

**Student Name:**

Laurel Schenck

**Training Completion Date:**

Tue Jul 30 00:00:00 GMT 2024

**Mode of Training:**

DLC Online Training

**Type of Training:**

Second Class (Off Premise)

### Foundational License (if applicable)

**License Type:**

Second Class

**License Number:**

LP-016365

**Licensee Name:**

Hill Farmstead (1st)

**License Status:**

License Active - Ready for Renewal

**Licensee Address:**

403A Hill Road ,  
Greensboro, Vermont 05842

**License Start Date:****License End Date:**

### Documents Attached

Name	Document Type	Assosicated With
------	---------------	------------------

### Payment and Acknowledgement

**Signed by:**

Joann Brochu

**State of Vermont / DLL Application Fee:**

70.00

**Date of Submission:**

2025-03-10 13:26:17

**State of Vermont / DLL Payment Status:****Local Application Fee:**

70

**Local Control Payment Status:**

false



**Application ID:** DLL - Application - 55107  
**Application for:** Outside Consumption Permit  
**Category of Business:** OCP

### Business/ Entity Information

**Business/ Entity Name:** Hill Farmstead, LLC  
**Business ID:** 0007202  
**Business Address:**  
,  
,  
**Entity Type:** Limited Liability Corporation  
**Management Type if LLC:**  
**Phone:**  
**Email:** accounting@hillfarmstead.com

### Foundational License (if applicable)

**License Type:** First Class  
**License Number:** LP-016368  
**Licensee Name:** Hill Farmstead (1st)  
**License Status:** License Active - Ready for Renewal  
**Licensee Address:** 403 Hill Road ,  
Greensboro, Vermont 05842  
**License Start Date:** 2024-07-01  
**License End Date:** 2025-06-30

### Event Contact/s

**Person:**

**Business Role:** **Phone:**  
**Business Address:** **Email:**  
,  
,

**Violations:**

Violation ID	Court/Traffic Bureau	Offense	Date of Offense
--------------	----------------------	---------	-----------------

## Event Premises Details

**Location Name:**

Hill Farmstead (1st)

**Start date and time of event****End date and time of event****Location Address:**

403 Hill Road,  
Greensboro, Vermont 05842

**Approximate Number of Persons Expected****Local Jurisdiction/ Town Clerk:**

Greensboro

**Describe the type of event/ OCP Area:**

Hill Road designated as 403 Hill Road in the town of Greensboro Bend VT

1st class license on first floor of a large brewery consisting of 2 areas. 1 area, a large room on Western end of Brewery & 2nd area is smaller on South East end of brewery. Locted on North side of

## Documents Attached

Name	Document Type	Assosicated With
------	---------------	------------------

## Payment and Acknowledgement

**Signed by:****Date and time of Submission:**

2025-03-10 13:28:04

**Local Application Fee:**

0

**State of Vermont / DLL Application Fee:**

20.00

**State of Vermont / DLL Payment Status:****Local Control Payment Status:**

false



**Application ID:** DLL - Application - 55759  
**Application for:** Second Class License  
**Category of Business:** Second Class

### Business/ Entity Information

**Business/ Entity Name:** LJ Thompson, LLC  
**Business ID:** 0009971  
**Business Address:**  
,  
,  
**Entity Type:** Limited Liability Corporation  
**Management Type if LLC:**  
**Phone:**  
**Email:** thogolf@aol.com

### People Information

- **Person:**  
Landon Thompson

**Business Role:** Business Principal  
**Business Address:**  
,  
,  
**Phone:**  
**Email:** thogolf@aol.com  
**US Citizen?**  
**Political Position**  
**Name:** Landon Thompson  
**Office:**  
**Jurisdiction:**

#### Violations:

Violation ID	Court/Traffic Bureau	Offense	Date of Offense
--------------	----------------------	---------	-----------------

### Location/ Premises Detail

**Location Name:** Smith's Grocery  
**Do you lease this Premises:**







**Application ID:** DLL - Application - 55761  
**Application for:** Tobacco License  
**Category of Business:** Tobacco

### Business/ Entity Information

**Business/ Entity Name:** LJ Thompson, LLC  
**Business ID:** 0009971  
**Business Address:**  
,  
,  
**Entity Type:** Limited Liability Corporation  
**Management Type if LLC:**  
**Phone:**  
**Email:** thogolf@aol.com

### People Information

- **Person:**  
Landon Thompson

**Business Role:** Business Principal  
**Business Address:**  
,  
,  
**Phone:**  
**Email:** thogolf@aol.com  
**US Citizen?**  
**Political Position**  
**Name:** Landon Thompson  
**Office:**  
**Jurisdiction:**

#### Violations:

Violation ID	Court/Traffic Bureau	Offense	Date of Offense
--------------	----------------------	---------	-----------------

### Location/ Premises Detail

**Location Name:** Smith's Grocery  
**Do you lease this Premises:**

**Location Address:**  
767 Main Street,  
Greensboro, Vermont 06842

**Local Jurisdiction/ Town Clerk:**  
Greensboro

**Health License:**  
Food:  
Lodging:

**Vermont Tax Department:**

### Education Details

**Student Name:**

**Training Completion Date:**

**Mode of Training:**

**Type of Training:**

### Foundational License (if applicable)

**License Type:**  
Tobacco

**License Number:**  
LP-021364

**Licensee Name:**  
Smith's Grocery

**License Status:**  
License Active - Ready for Renewal

**Licensee Address:**  
767 Main St. ,  
Greensboro Bend, Vermont 05842

**License Start Date:**

**License End Date:**

### Documents Attached

Name	Document Type	Associated With
------	---------------	-----------------

### Payment and Acknowledgement

**Signed by:**

**State of Vermont / DLL Application Fee:**  
110.00

**Date of Submission:**  
2025-03-17 17:06:54

**State of Vermont / DLL Payment Status:**

**Local Application Fee:**  
0

**Local Control Payment Status:**  
false



- (For rural towns or consortia only)** The regional planning commission will serve as agent for the municipality or consortium. *(Check the box if the municipality authorizes its regional planning commission to prepare the application, support grant administration and be exempt from competitive selection if serving as project consultant.)*

**LEGISLATIVE BODY**

(name)

(signature)


**INSTRUCTIONS FOR RESOLUTION FORM**

- A. The Legislative Body of the Municipality must adopt this resolution or one that will have the same effect. This Form may be filled in or the adopted Resolution may be issued on municipal letterhead, filling in the name of the municipality, the Legislative Body (e.g. Selectboard), and the name and title of the Municipal/Authorizing Official(s) (M/AOs); and the Grant Administrator.
- B. Following formal adoption, a majority of the legislative body must sign the Resolution. The Chair of the Planning Commission must also sign upon endorsement by vote of the Planning Commission.
- C. This form must be either uploaded to the online application or grant, or emailed to: [kenneth.lavoie@vermont.gov](mailto:kenneth.lavoie@vermont.gov).
- D. If mailed, an electronic copy of the submitted Resolution document will be uploaded by DHCD staff and available online.
- E. Please note that the designated Municipal/Authorizing Official(s) and Grant Administrator must also register for an account in the online grants management system, if they have not done so already, before the application can be considered complete.

**CONSORTIUM APPLICATIONS:** For a consortium, each municipality must complete a separate Resolution form. All municipalities in a consortium must designate the same Municipal/Authorizing Official(s) and grant Administrator.