

## **Liquor License Renewal Application**

City of Rice Lake - 4107 West Beyer Rd - Duluth, MN 55803 - 218-721-3778

BUSINESS:		
Licensee Name:		
Trade or DBA Name:		
Physical Address of Business:		
Business Phone:		Business e-mail:
Mailing Address for License (if diffe	erent than above	):
Minnesota Tax ID No.:		Federal Tax ID No.:
Manager's Name:	_	
APPLICANTS, PARTNERS, OR CORI of filing as a Sole-Proprietor – Full name, d of filing as a Corporation, LLC, or Partnersh ostock or number of shares held by all office	late of birth, social sec nip - Full name, date o	curity number, and address is required.  of birth, social security number, address is required, title, percentage of
Name: <u>(f)</u>	(m)	(I)
Resident Address:		
Date of Birth (mm/dd/yyyy):		
Phone: (h)	(w)	(c)
E-mail address:		Title:
Percentage of Ownership:		Number of Shares:
Name: <u>(f)</u>	(m)	(I)
Resident Address:		
Date of Birth (mm/dd/yyyy):		Social Security #
Phone: <u>(h)</u>	(w)	(c)
E-mail address:		Title:
Percentage of Ownership:		Number of Shares:
Name: <u>(f)</u>	(m)	(1)
Resident Address:		
Date of Birth (mm/dd/yyyy):		Social Security #
Phone: (h)	(w)	(c)

E-mail address:	Title:
Percentage of Ownership:	Number of Shares:
Have any applicants, partners, or corporate offic changes here:	ers changed in the past year? $\square$ No $\square$ Yes, please note
	rectly or indirectly in any other liquor establishments in
·	application, ever had an application for a liquor license rejected Yes If yes, please explain:
application, ever had a license under the Minnes	application, during the five years immediately preceding this tota Liquor Control Act revoked for any violation of such laws or plain:
	mployees, corporate officers, or partners been cited for any civil elsewhere?   No  Yes If yes, please explain:
APPLICATION QUESTIONS:	
Has the designated sale/service area changed?□	No □Yes If yes, please explain:
	siness? ☐ No ☐ Yes How many people does the restaurant g capacity changed? ☐No ☐ Yes What is the capacity?
What hours will food service be available?	
WORKERS COMPENSATION INSURANCE:	
Are you required to have worker's compensation	n insurance?   No  Yes If no, please explain:
than one person; \$10,000 property destruction; Bond from a surety company with minimum covers.	g; <u>Liquor liability insurance</u> \$50,000 per person; \$100,000 more \$50,000 and \$100,000 for loss of means of support. <u>Surety</u> erage as specified above. <u>Certificate from the state treasurer</u> rust funds having a market value of \$100,000 or \$100,000 in
During the past year, has a summons been issued yes, attach copy of summons. $\square$ No $\square$ Yes	d under the liquor civil liability (Dram Shop) MS 340A.802? If
•	ance No. 41 and Minnesota Statute Chapter 340A, I understand e Rice Lake City Council. It is the license holder's responsibility the laws governing the sale/service of alcohol.
I have read and agree to the statements above.	□ I agree

## CITY OF RICE LAKE ORDINANCE NO. 41:

I have read and understand Rice Lake Ordinance No. 41. I further understand that any sale of liquor in or from

any place licensed under this Ordinance or any other act that violates this Ordin other employee in such place shall be deemed the act of the employer as well a making the sale or committing the act. The licensee shall be liable for all penalt for such sale equally making the sale.	s that of the person actually		
I have read and agree to the statements above.   I agree			
SIGNATURE:  By submitting this application, I certify under the penalty of perjury that statements made in this application are true and inclusive to the best of my knowledge. I am authorized to execute the foregoing instrument for the purpose of obtaining a license under Rice Lake Ordinance No. 41. I acknowledge that the City of Rice Lake reserves the right to examine supporting documentation and information provided here. Incorrect or incomplete information is considered to be willfully fraudulent and is subject to legal recourse including fines and/or license suspension or revocation.			
I have read and agree to the statements above. $\square$ I agree			
Applicant Signature:	Date:		