



City of Foley
 251 4th Avenue N, PO Box 709
 Foley, MN 56329

APPLICATION FOR ON SALE LICENSE TO RESTAURANT or BAR

This application shall be completed in full and filed with the City Administrator together with the appropriate forms and proof of liability insurance as required by State statute and City ordinance. The applicant shall be stated in the same manner for this application form, on all related forms and on the certificate of insurance.

*** Complete and attach a separate application form for each Applicant.**

Applicant Information:

Applicant Name: _____ DOB: _____

Trade Name or DBA: _____

S.S.#. _____ MN Business ID: _____

FEIN: _____

Business Address: _____
Street City County State Zip Code

Legal Description: _____
Lot Block Addition

Home Phone: _____ Business Phone: _____

This application is: _____ New _____ Renewal _____ Transfer

If transfer, name of former owner: _____

Applicant is: United States Citizen _____ yes _____ no

Owner: _____

Operator: _____

License Period from: _____ to _____

Length of time applicant has been in this business at this address: _____

If a corporation or LLC state name, date of birth, Social Security #, address, title, and shares held by each officer. If a partnership, state name, date of birth, Social Security # and address of each partner:

Business Partner/Officer DOB SS# Address

Business Partner/Officer DOB SS# Address

Business Partner/Officer DOB SS# Address

Property Information:

Property Owner (if other than Applicant): _____

Property Owner Address: _____
Street County City State Zip Code

Does the property owner have any connections, direct or indirect, with the applicant? _____ yes _____ no

If yes, describe: _____

Are the property taxes delinquent? _____ yes _____ no

Restaurant:

Seating Capacity: _____ Business Hours: _____ Hours food will be available: _____

Number of Employees: _____ Seasonal Operation: _____ yes _____ no

Will food be the principal business of the restaurant? _____ yes _____ no If no, describe the principal business: _____

License:

Type of license:

- | | |
|--|---|
| _____ 3.2 Percent Malt Liquor On-Sale
(425:08 A) | _____ Temp 3.2 Percent Malt Liquor
(425:08 C) |
| _____ Off-Sale Intoxicating Liquor
(425:08 D) | _____ On-Sale Intoxicating Liquor
(425:08 E) |
| _____ Sunday On-Sale Intoxicating Liquor
(425:08 F) | _____ Temp On-Sale Intoxicating Liquor
(425:08 H) |
| _____ On-Sale Wine
(425:08 I) | _____ Non-Enclosed Premises On-Sale Intoxicating Liquor
(425:08 Q) |
| _____ Combination On-Sale/Off-Sale Intoxicating Liquor
(425:08 G) | |

- 1.) Is the applicant, or any of the associates in this application, a member of the Foley City Council?
_____ yes _____ no
 - 2.) During the past year has a summons been issued under the liquor civil liability law, also known as the dram shop law?
_____ yes _____ no
 - 3.) Has the applicant, or any of the associates in this application, been convicted during the past five years of any violation of federal, state, or local liquor laws in this state?
_____ yes _____ no If yes, give dates and details: _____
 - 4.) Does the applicant have any interest, directly or indirectly, in any other liquor establishment in Minnesota?
_____ yes _____ no If yes, give name and address: _____
-
-

Insurance: The applicant shall have one of the following: **(ATTACH CERTIFICATE OF INSURANCE TO THIS FORM)**

- A. ____ Liquor Liability Insurance - \$50,000 per person; \$100,000 more than one person; \$10,000 property destruction; \$50,000 and \$100,000 for loss of means of support, OR
- B. ____ A liquor liability bond from a surety company with minimum coverage as specified in A, OR
- C. ____ A certificate from the State Treasurer that the licensee has deposited with the State, trust funds having a market value of \$100,000 or cash and securities in the amount of \$100,000.

I CERTIFY THAT I HAVE READ THE ABOVE QUESTIONS AND THAT THE ANSWERS ARE TRUE AND CORRECT OF MY OWN KNOWLEDGE.

Signature of Applicant

Date

Signature of Applicant

Date

Report by Authorized Law Enforcement:

This is to certify that the applicant(s), ant the associates, named herein have not been convicted within the past five years for any violation of laws of the State of Minnesota, Municipal or County ordinances relating to intoxicating liquor, except as follows:

Signature

Title

Date



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CONSENT FOR THE RELEASE OF INFORMATION FOR LIQUOR APPLICATIONS

The individual(s) signing below authorized the release of information to the City of Foley the following information for the purpose of doing a background check on the applicant for Liquor Licenses.

The individual(s) signing below understands that their records under state and federal privacy regulations are private and cannot be disclosed without written consent unless otherwise provided by law.

The individual(s) signing below may cancel this consent at any time prior to the information being released and that in any event this consent form expires ninety days after signing.

Full Name (printed)

Date of Birth

Driver's License Number

Signature (authorizing release)

Date Signed

Full Name (printed)

Date of Birth

Driver's License Number

Signature (authorizing release)

Date Signed

License Applicant:

Pursuant to Minnesota statute 270.72 Tax Clearance: Issuance of License, the licensing authority is required to provide to the Minnesota Commissioner of Revenue your Minnesota business tax identification number and the social security number of each license applicant.

Under the Minnesota Government Data Practices Act and the Federal Privacy Act of 1974, we are required to advise you of the following regarding the use of this information:

1. This information may be used to deny the issuance, renewal or transfer of your license in the event you owe the Minnesota Department of Revenue delinquent taxes, penalties or interest;
2. Upon receiving this information, the license authority will supply it only to the Minnesota Department of Revenue. However, under the Federal Exchange of Information Agreement the Department of Revenue may supply this information to the Internal Revenue Service;
3. Failure to supply this information may jeopardize or delay the processing of your licensing issuance or renewal application.

Please supply the following information and return along with your application to the agency issuing the license. DO NOT RETURN TO THE DEPARTMENT OF REVENUE.

License being applied for or renewed: _____

License Authority: City of Foley, Benton County, Minnesota

License Renewal Date: _____

PERSONAL INFORMATION (if applicable):

Applicant's Name: _____

Applicant's Address: _____

Social Security Number: _____

BUSINESS INFORMATION (if applicable):

Business Name: _____

Business Address: _____

Minnesota Tax Identification Number: _____

Federal Tax Identification Number: _____

* If a Minnesota Tax Identification number is not required, please explain on the reverse side.

Signature

Position (Officer, Partner etc.)

Date

Minnesota Government Data Practices Act “Tennessen Warning”

Data is requested from the applicant on various forms. The purpose and intended use of the requested data is to verify the applicant meets all state statute and city code provisions and, if the license or permit is approved, to verify that all required data remains current.

The following data collected, created or maintained is classified under the Minnesota Government Data Practices Act as Private data **until license approval** when the data becomes **Public**: (13.41, Subd. 4).

1. Data submitted by applicants (*other than names and designated addresses*).
2. Orders for hearing and findings of fact.
3. Conclusions of law and specification of the final disciplinary action contained in the record of the disciplinary action.
4. Entire record concerning the disciplinary proceeding.
5. License numbers.
6. License status.

The following data collected, created or maintained is classified as **Private**: (13.41, Subd. 2).

1. The identity of complainants who have made reports concerning licenses or applicants which appear in inactive complaint data unless the complainant consents to the disclosure.
2. The nature or content of unsubstantiated complaints when the information is not maintained in anticipation of legal action.
3. Inactive investigative data relating to violations of statutes or rules.
4. The record of any disciplinary proceeding except as limited by Subd. 4.

The following data collected, created or maintained is classified as **Confidential**: (13.41, Subd. 3).

1. Active investigative data relating to the investigation of complaints against any license.

Under law, private data may be shared with licensing and inspection employees, approval authorities, insurance providers, law enforcement employees, contracted inspection officials, as required by court order, and City officials who have a bona fide need for it. The City of Foley may make any data classified as private or confidential accessible to an appropriate person or agency if the licensing agency determines that failure to make the data accessible is likely to create a clear and present danger to public health or safety.

We ask that you complete or provide all data requested on the application form(s) unless we have noted that it is not required. Refusal to supply required information may mean that your application cannot be processed.

I HAVE READ AND UNDERSTAND THE ABOVE INFORMATION REGARDING MY RIGHTS AS A SUBJECT OF GOVERNMENT DATA.

Signature of Applicant

Date

Printed Name

Organization Name

DBA



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Authorization to Release Financial Records

I have applied to the City of Foley, Minnesota, for issuance, transfer or renewal of a liquor license. Minnesota State Statute 340A.412, Subd. 2, requires that the City conduct a financial investigation of each such applicant. I hereby authorize you to release and/or provide copies of all financial data created, stored or maintained by your institution, relative to my financial transactions, to the City of Foley.

Printed Name

Date of Birth

Street Address

Social Security Number

City *State* *Zip Code*

Phone Number

Signature

Date

Chapter IV, Section 425:08: Kinds of Liquor Licenses.

- A 3.2 percent malt liquor on-sale w/incidental tobacco & soft drinks
- B 3.2 percent malt liquor off-sale
- C Temp 3.2 percent malt liquor – club/non-profit/charitable/religious only
- D Off-sale intoxicating liquor
- E On-sale intoxicating liquor
- F Sunday on-sale intoxicating liquor
- G Combo on/off-sale intoxicating liquor
- H Temp on-sale intoxicating liquor (4-days only/3x per yr)
- I On-sale wine
- J 1 day consumption & display permits to non-profit org
- K Approval of issuance of consumption & display permit
- L Culinary class limited on-sale (1-6 ounces wine or 12 ounces malt liquor)
- M Temp off-sale wine auction (3-days & < 600 cases)
- N Brew pub on-sale intoxicating liquor or on-sale 3.2 malt liquor (<3,500 barrels/yr)
- O Brewer off-sale intoxicating liquor (< 3,500 barrels/yr malt liquor)
- P Brewer temp on-sale intoxicating liquor
- Q Non-enclosed premises on-sale intoxicating liquor (for A, C, E, F, G, H, I, J, K, L, N, P)
- R Temp non-enclosed premises on-sale intoxicating liquor (to A, C, E, F, G, H, I, J, K, L, N, P)
4-days only/3x per yr