



Type in your information by tabbing through the boxes below. Print all applications, sign and submit to the address listed above.

## LICENSE APPLICATION

LICENSE	FEE
TEMPORARY ON SALE LIQUOR - 1ST DAY/EVENING =	\$298.00
Plus \$148.00 EACH ADDITIONAL DAY/EVENING =	\$ 444.00
TOTAL	\$ 742.00

## LICENSEE CORP NAME/BUSINESS ADDRESS:

_KIDgevie	W Country Club	
_700 W.	Redwing St.	
Duluth	MN 55803	

D/B/A or TRADE NAME: \_ Kidgeview Country Club CELL OR BUSINESS PHONE NO. \_218-728-5128

OWNER OF BUSINESS PREMISES:

MANAGER'S NAME & ADDRESS & PHONE #

<u>Clint</u> Johnson	
4114 Robinson St.	_
Dulath MN 55804	

LICENSE PERIOD: 7/28 - 7/31 2016

I HEREBY STATE THAT ALL INFORMATION HERE IS TRUE AND CORRECT AND THAT I SHALL COMPLY WITH ALL PROVISION OF THE ORDINANCES OF THE CITY OF DULUTH AND LAWS OF THE STATE OF MINNESOTA AND THEIR AMENDMENTS.

Signature of Applicant

MAILING ADDRESS:

4114 Kobinson Duloth MN 5580

inson orlegeview country club.com EMAIL: Would you like notifications via email? YES V



# CITY OF DULUTH APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE

1. Name of Applicant (individual, partnership, corporation <u>Ridgevicw</u> Courtry Club	or association) that owns the business to be licensed:
2. Trade Name: <u>Same as above</u>	
3. Address of place to be licensed: 700 W. Rec	lwing St. Duluth - 55803
4. Designated Serving Areas (i.e. round floor, second, de room - diningroom - deck	ck, etc.) <u>Bev Cart on The tee - grill</u>
5. Name and address of owner of building:	
Any connection with applicant?	Who receives the rent?
6. Who will direct the operation of the business or serve a List name, address & title: <u>Clint Johnson</u>	as manager on the premises?
7. If partnership, give name of each partner and percenta	ge of ownership, and, if limited partnership, give details:
8. If corporation, list all stockholders, directors, officers ar each:	nd the percentage of stock or number of shares owned by
9. State approximate distance of this establishment from the 1.5 miles	ne nearest academy, college, university, church or school:
10. State whether any consideration, money or property, ha	as been paid, or will be paid, given, exchanged or pledged,
by anyone, and to whom, for the purchase or operation of	this business. State the amounts in detail.
Failure to answer all questions truthfully on this applic will be just cause for revocation of your license.	
I (we) hereby certify that the applicant will be the sole owner and oper will notify the City Council in writing of any change in ownership in Alcohol, Gambling and Tobacco Commission and City Council. I (we are true of my (our) knowledge. I (we) will comply with all the provise of their amendments	this business before the change is made, for the approval of the baye read the foregoing questions and answers to said questions
Signature:	Date: 5216
Signature:	Date:

# AFFIDAVIT "A"

## ALCOHOLIC BEVERAGE LICENSE APPLICATION

CITY CLERK'S OFFICE 330 CITY HALL DULUTH, MN 55802

To be completed by each individual license, or each member of partnership, or two major stockholders of a corporation, or two primary officers of a club and the person who will be directing the operation of the business on the licensed premises.

# NOTE: Type or print legibly and provide all information requested. Failure to do so may delay the issuance of this license.

**RENEWALS:** If this affidavit is made relative to the annual renewal of an existing license, **fill out items 1-4**, **and 11 & 12 of this application**. <u>Items 5-10</u> need be answered only as they relate to any changes in your status since the filing of your last affidavit.

1.	License Applicant Ridgeview Country Club
	License Applicant R. Ridgeriew Country Club (Individual, Partnership, Corporation or Club)
2.	Address of licensed premises
3.	Your Name <u>CliAt</u> (First) (Middle) <u>(Last)</u> (Jr./Sr.) (Date of Birth)
4.	Home Address <u>KIII4 Robinson St</u> Duluth <u>St Lows</u> , MN <u>55804</u> (Address) (City) (County) (State) (Zip)
	Other home addresses in last 10 years:
6.	Other names you are, or have been known by, including maiden name:
7.	Your position in the business: <u>(Uniful Manager</u> (Owner, partner, president, treasurer, manager, etc.)
	(a). Do you, your spouse, or your children have any pecuniary interest in the ownership, operation, anagement or profits of any establishment license in Minnesota to sell liquor or 3.2 beer either at retail wholesale? Yes $\boxed{}$ No $\boxed{X}$
	(b). Do you, your spouse, or your children own stock in any corporation having a pecuniary interest the ownership, operation, management or profits of any establishment license in Minnesota to sell liquor 3.2 beer either at retail or wholesale? Yes No



# Additional information is being required by the Duluth Police Department. An incomplete application will result in the delay or rejection of your application.

1.	Is this the first time for this event? If No, how many people attended this event If Yes, how many people are you expecting to attend?	Yes No Y
2.	What kind of advertisement have you done?	
3.	What is the age of the target group for this event?	18-70
4.	Will alcohol be sold or given away at this event?	<u> </u>
5.	Will dancing be allowed at this event?	No

I understand that as the applicant for this permit/license, I am responsible for the Police/Security for this event. I will provide proof of hired security two weeks prior to the scheduled event.

2/16 Date

Applicant Signature

 For office use only

 Is a licensed Peace Officer needed for this event?

 If yes, how many licensed peace officers will be required?

K:\CLERKDOC\LICENSES\Current Licenses\templiq\_Supplemental\_Form.wpd

(c). If the answer to (a) or (b) is "yes", state the location of the establishments involved and fully describe the nature and extent of the interest.

			ess references, including one bank refe	rence:
(1) (2) (3) (Bar	Twin Ports Paper - 42 Shel/Don Business Solut nk) <u>Republic Bank</u>	23 Arpars Blue 1045 124 E Suj 306 W. Superior	1 55811 prior St 55802 1 St. 55802	
10. (a).		on in which you held ? Yes No	d more than 10% stock, ever been de	nied a
(b).	Have you or any corporation or beer license suspended If yes, why?		more than 1 <u>0% of</u> the stock ever had a	liquor
or the s Prostituti Yes	ale, distribution, manufacture ion or disorderly house laws? No	e or transportation Drug laws? Receivi en it occurred, the ma	lating any law relating to the operation o of alcoholic beverages? Gambling ing or concealing stolen property? Ass aximum possible penalty for the violatio nged.	laws? aults?
12. Have the City of	e you read and do you underst of Duluth relative to the sale ar	and the laws, rules and distribution of alco	and regulations of the State of Minneso oholic beverages? Yes 📈 No 🗌	
I HEREB CORRE(		OF PERJURY THA	AT THE ABOVE ANSWERS ARE TRUE	E AND
	Ko Dite	5/2/16	UT	
	(WITNESS)	(DATE)	(APPLICANT'S SIGNATURE)	

- 2 of 2 -



### Minnesota Department of Public Safety Alcohol and Gambling Enforcement Division 444 Cedar Street, Suite 222, St. Paul, MN 55101 651-201-7500 Fax 651-297-5259 TTY 651-282-6555 **APPLICATION AND PERMIT FOR A 1 DAY** TO 4 DAY TEMPORARY ON-SALE LIQUOR LICENSE

Name of organization Ridgeriew Country Club	Date Organized		Tax exempt number
Address	City	State	Zip Code
700 W. Redwing St.	Muth	_ MN	55803
Name of person making application	Business phone		Home phone
<u>Clint</u> Johnson	218-725-5125	3	218-626-5742
Date(s) of event 7-28 4 7-31	Type of organization		
UD Feriancek	_ 🛛 Club 🗌 Charitable [	Religi	ious Other non-profit
Organization officer's name	City _	State	Zip Code
	Duluth	_ MN	55803

Location where permit will be used. If an outdoor area, describe.

# On grounds of our 18 hole golf course and inside club house

If the applicant will contract for intoxicating liquor service, give the name and address of the liquor license providing the service.

If the applicant will carry liquor liability insurance, please provide the carrier's name and amount of coverage.

APPROVAL

APPLICATION MUST BE APPROVED BY THE CITY OR COUNTY BEFORE SUBMITTING TO ALCOHOL AND GAMBLING ENFORCEMENT

City of Duluth/St. Louis County City/County

City Fee Amount

Date Fee Paid

Signature of City Clerk or County Official

Approved Director Alcohol and Gambling Enforcement NOTE: Submit this form to the city or county 30 days prior to event. Forward application signed by the city and/or county to the address above. If the application is approved the Alcohol and Gambling Enforcement Division will return this application to be used as the permit for the event.

Date Approved

Permit Date

#### DULUTH LEGISLATIVE CODE.

## CHAPTER 8.

#### BEVERAGES.

### Article 1. Alcoholic Beverages.

### Subdivision II. Licenses.

#### Sec. 8-44. To whom licenses issued--intoxicating liquor.

...(e) Temporary on sale liquor licenses shall be issued only to:

(1) Clubs, charitable organizations, religious organizations and other nonprofit organizations in existence for at least three years;

- (2) A registered political committee;
- (3) A state university; or

(4) A brewer who manufactures fewer than 3,500 barrels of malt liquor in a year; in connection with a social event sponsored by the licensee. The license shall be issued for a limited length of time, not to exceed four consecutive days. Temporary on sale licenses to any one organization or for one location shall not exceed more than three four-day, four three-day, six two-day or 12 one-day licenses, in any combination not to exceed 12 days per year. No more than one license shall be issued to any one organization or for any one location within any 30 day period unless the licenses are issued in connection with an event officially designated a community festival by the city. The city may authorize the temporary on sale liquor license on premises other than premises the licensee owns or permanently occupies. The license may provide that the licensee may contract for intoxicating liquor catering services with the holder of a full-year on sale intoxicating liquor license used by the city;...