

## CITY OF DULUTH

318 City Hall ● 411 West First Street Duluth, Minnesota 55802-1189 Phone (218) 730-5500

F	OR OFFICE USE ONLY
D	ATE
L	ICENSE #

FEE

\$384.00

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

				1	
	PLUS \$191.00 EACH	ADDITIONAL DAY =	\$		
		TOTAL:	\$		
LICENSEE CORP NA	ME & BUSINESS ADDRESS:	D/B/A OR TRAI	DE NAME: ALES	on first	
Evol 11 (				- 12 (120 /	111
PO BOX 41	03	CELL OR BUS	INESS PHONE NO	218-478-6	761
MOOSE AK	c, MN 55767		1	111 + 1 7 - 3	, ,
	ADDRESS & PHONE #	EVENT LICENS	SE PERIOD:) UL	4 14 + 202	5
	outr			7	
PO BOX	403	RAIN DATE?	YES NO		
Moore OF	e, MN 55767	IF YES, DATE	E: July 154	L 2023	
*			,		
7	NEV	VINFORMATION			
the month in ord Commission. Th applications sub	All applications must be completed for to be placed on the agenda for the AGT Commission meets on the omitted without the corresponding applications are subject to review by	the next meeting of the first Wednesday of ever application fee will be	e city's Alcohol, Gamb ery month. Incomplete a rejected.	ling & Tobacco (AGT)	
	E; An application must be on file w 3-302-6166 or 218-302-6184).	ith the Minnesota State	Health Department for	the serving of food	
PROVISION OF THE CAMENDMENTS.  MAILING ADDRESS:  AOT GE  PU BOX	oute  103  ARE, MN 55767	Signa EMAIL: CVO( e.	OF THE STATE OF MIN	Segmail	
110036	mm 100 33/6/				

LICENSE APPLICATION

LICENSE

TEMPORARY EXPANSION OF LICENSED PREMISES =

Date of Application	<b>AND CONTRACTOR</b>
License No.	-

TEMPORARY	EXPANSION	OF	LICENSED	PREMISES	(DIAGRAM)
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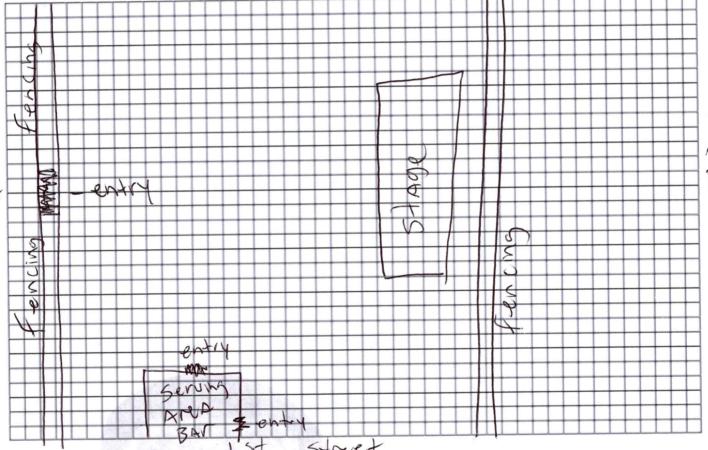
Owner: Zvo III (d/b/a) Trade Name: Aces on	1 5+
Date of Event: 12/4 14 th 2075 Address: 113 W. 15 5+	
Name of Event SIDEMAK SALES STORET DANCE Time of Event: 6" 11 PM	1
Security Personnel: Anthony Deruggiero & Assoc, Firm:	

## DIAGRAM MUST SHOW:

- A. Area that will be used.
- Streets and intersections bordering the area.
- C. Where fencing surrounding the area will be located and what type of fencing will be used (snow fence is preferred).
- D. Where the bar will be located in the "serving area."
- E. Exits and entries to and from the 'serving area.'

street

Sketch location and dimensions of area to be occupied. Indicate north on diagram as "NORTH."



I hereby agree that I shall comply with all of the ordinances of the City of Duluth and laws of the State of Minnesota and their amendments. I further agree to comply with any special restrictions which may be imposed by resolution of the Duluth City Council and not to allow any services or consumption outside of the approved "designated serving area" identified here.

Apt Glove Signature of owner/authorized representative



## CITY OF DULUTH SUPPLEMENTAL FORM

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

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 X
2. What kind of advertisement have you done? Social Me	DiA, Downfour
3. What is the age of the target group for this event?	28-55
4. Will alcohol be sold or given away at this event?	Y15
5. Will dancing be allowed at this event?	y + 5
I understand that as the applicant for this permit/license, I am Police/Security for this event. I will provide proof of hired security to scheduled event.  Apt Geoven  Applicant Signature	
Police/Security for this event. I will provide proof of hired security to scheduled event.  Age Geoven	two weeks prior to the
Police/Security for this event. I will provide proof of hired security to scheduled event.  Apt Geoven Applicant Signature	two weeks prior to the