



**CITY OF DULUTH**  
**CITY CLERK'S OFFICE**  
 318 City Hall • 411 West First Street  
 Duluth, Minnesota 55802-1189  
 Phone (218) 730-5500

|                            |  |
|----------------------------|--|
| <b>FOR OFFICE USE ONLY</b> |  |
| DATE _____                 |  |
| LICENSE # _____            |  |

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

**LICENSE APPLICATION**

| LICENSE                                    | FEE                  |
|--|----------------------|
| TEMPORARY EXPANSION OF LICENSED PREMISES = | \$150.00             |
| PLUS \$50.00 EACH ADDITIONAL DAY =         | \$ —                 |
| <b>TOTAL:</b>                              | \$ 150 <sup>00</sup> |

LICENSEE CORP NAME & BUSINESS ADDRESS:

ARROWSTAR HOSPITALITY PARTNERS, LLC

D/B/A OR TRADE NAME:

DULUTH GRILL

CELL OR BUSINESS PHONE NO.

218-940-7056

MANAGER'S NAME & ADDRESS & PHONE #

VALERIE BIGELOW  
4420 COLD CREEK LANE HERMAPTOWN  
218-940-7649

EVENT LICENSE PERIOD:

Sept. 19, 2024

RAIN DATE?

YES

NO

IF YES, DATE: \_\_\_\_\_

**NEW INFORMATION**

- PLEASE NOTE:** All applications must be completed and submitted to the City Clerk's Office by the last Wednesday of the month in order to be placed on the agenda for the next meeting of the city's Alcohol, Gambling & Tobacco (AGT) Commission. The AGT Commission meets on the first Wednesday of every month. Incomplete applications or applications submitted without the corresponding application fee will be rejected.
- SECURITY:** Applications are subject to review by the Duluth Police Department
- HEALTH DEPT:** An application must be on file with the Minnesota State Health Department for the serving of food and alcohol (218-302-6166 or 218-302-6184).

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:

102 S 27<sup>TH</sup> AVE W  
DULUTH, MN 55806

EMAIL: DULUTHGRILL@GMAIL.COM

Would you like notifications via email? YES  NO

|                           |
|---------------------------|
| Date of Application _____ |
| License No. _____         |

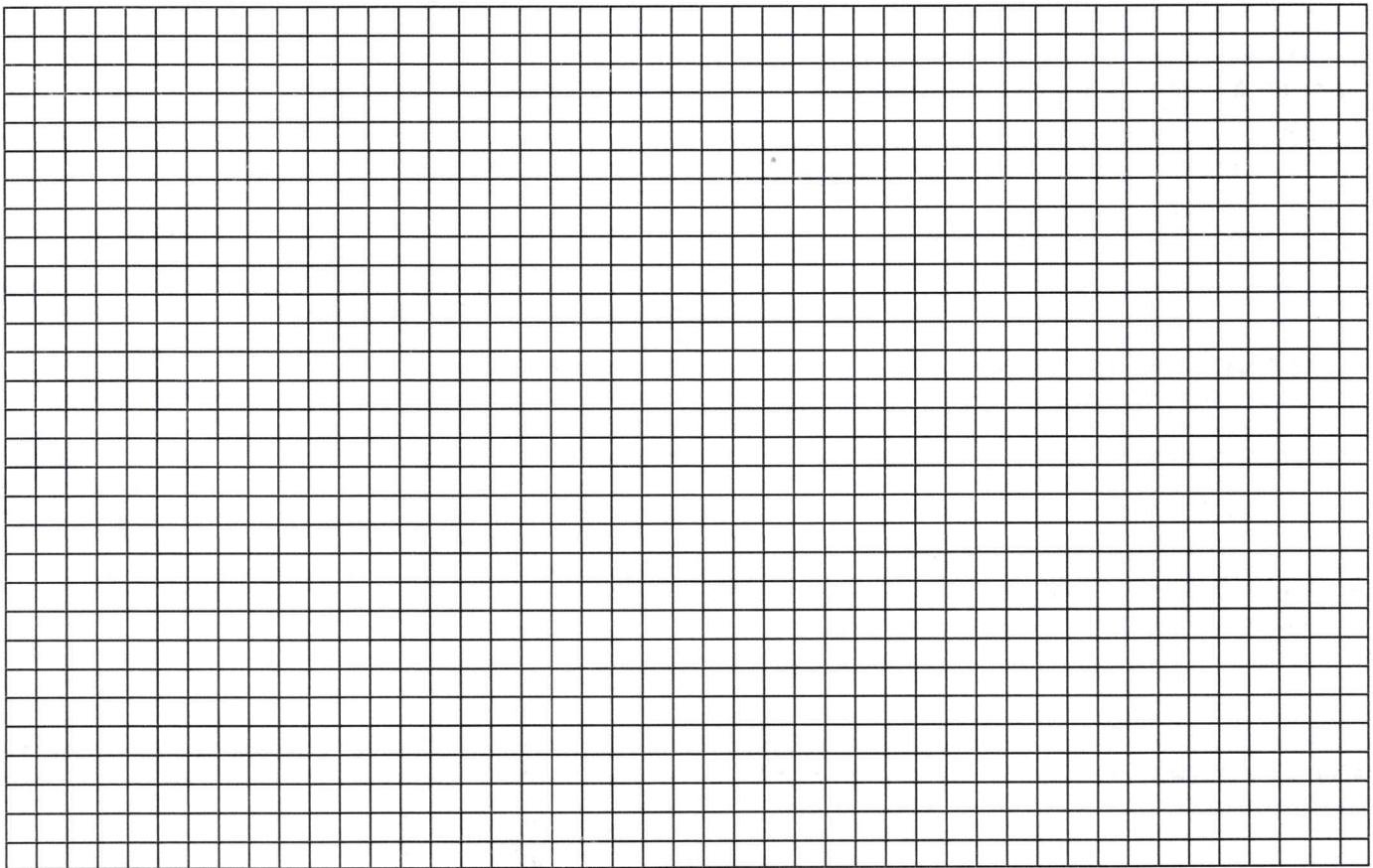
**TEMPORARY EXPANSION OF LICENSED PREMISES (DIAGRAM)**

Owner: ARROWSTAR HOSPITALITY PARTNERS, LLC (d/b/a) Trade Name: DULUTH GRILL  
 Date of Event: SEPT 19 2025 Address: 118 S. 27<sup>th</sup> AVE W DULUTH, MN  
 Name of Event: MINNESOTA MARCH COMMUNITY BLOCK PARTY Time of Event: 4-7pm  
 Security Personnel: N/A Firm: \_\_\_\_\_

**DIAGRAM MUST SHOW:**

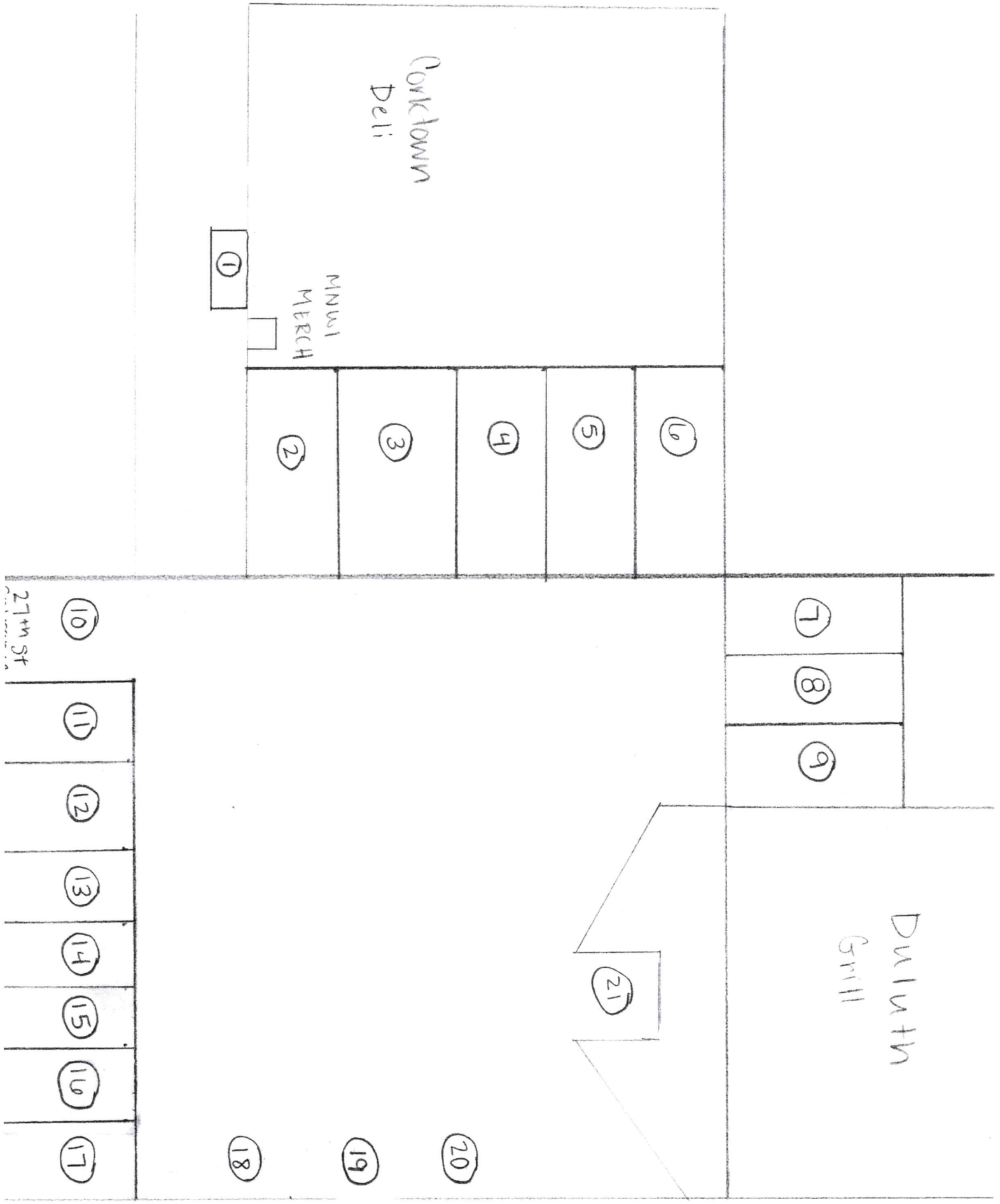
- A. Area that will be used.
- B. Streets and intersections bordering the area.
- C. Where fencing surrounding the area will be located and what type of fencing will be used (snow fence is preferred).
- D. Where the bar will be located in the "serving area."
- E. Exits and entries to and from the "serving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

**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.

  
 \_\_\_\_\_  
 Signature of owner/authorized representative



Cowtown  
Deli

MNU1  
MERCH

①

②

③

④

⑤

⑥

⑦

⑧

⑨

Duluth  
Grill

②1

⑱

⑲

⑳

⑩

⑪

⑫

⑬

⑭

⑮

⑯

⑰

27th St



# 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.**

1. Is this the first time for this event?

Yes  No

If No, how many people attended this event

If Yes, how many people are you expecting to attend?

200 Approx

2. What kind of advertisement have you done?

SOCIAL MEDIA, POSTERS

3. What is the age of the target group for this event?

18-65

4. Will alcohol be sold or given away at this event?

YES

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.

Applicant Signature

8/9/24  
Date

### For office use only

Is a licensed Peace Officer needed for this event? \_\_\_\_\_

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