



CITY OF DULUTH
CITY CLERK'S OFFICE
 330 City Hall 411 West First Street
 Duluth, Minnesota 55802-1189
 Phone (218) 730-5500
 Fax (218) 730-5923

FOR OFFICE USE ONLY

DATE _____

LICENSE # _____

Old License ___ Type 11

New License ___ Type 11-5

GOVERNMENT DATA PRACTICES ACT - CLASSIFICATION WARNING: The data you supply on this form will be used to process the license you are applying for. You are not legally required to provide this data, but we will not be able to process the license without it. Some of the data will be classified as public data if and when the license is granted. Private financial information including a tax identification number and social security number are classified as private data and will be available to governmental personnel and other governmental agencies whose access is necessary to perform their official duties.

LIQUOR LICENSE APPLICATION

License applied for:	Individual Fees	Indicate below
Investigation fee (one time)	\$ 209.00	\$ 209.00
On Sale Intoxicating Liquor	4317.00	
On Sale Sunday	178.00	
Dancing	1,130.00	
Additional Bar (each)	571.00	
After Hours Entertainment	262.00	
2:00 A.M. (Issued by the State - see form attached)	N/C (State fee)	
Liquor License Transfer Fee (For transfers only)	358.00	358.00
	TOTAL:	\$561.00

LICENSEE NAME, ADDRESS, & PHONE

(Individual/corporation/partnership)

CRAZY UNCLE ENTERTAINMENT LLC
 Stephanie M LaFleur
 35000 440TH PLACE
 ATKIN, MN. 56431
 218-348-2692

BUSINESS NAME, ADDRESS, & PHONE

CADDY SHACK - DULUTH
 INDOOR GOLF & PUB
 2023 W. SUPERIOR ST.
 DULUTH, MN. 55806
 218-348-2692

MANAGER'S NAME, ADDRESS & PHONE NO.

same as above

NAME & ADDRESS OF PROPERTY OWNER:

same as above

Email: *rockofoo@msn.com*

LICENSE PERIOD: *9/1/17 - 8/31/18*

MAILING ADDRESS IF OTHER THAN BUSINESS ADDRESS:

35000 440TH PLACE
ATKIN, MN. 56431

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

[Signature]
 Signature of Applicant



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APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE

1. Name of Applicant (**individual, partnership or corporation or association**) that owns the business to be licensed: # CADDY SHACK INDOOR GOLF & PUB CRAZY UNCLE ENT. LLC
2. Trade Name: ↓ ~~STEPHANIE EXAMET~~ ↓
3. Address of place to be licensed: 2023 W. SUPERIOR ST. DULUTH, MN. 55806
4. Designated Serving Areas (i.e. ground floor, second, deck, etc.) GROUND & SECOND FLOOR
5. Name and address of owner of building: Stephanie/Chris Lafleur 35000 440TH PLACE, AITKIN 56431
 Any connection with applicant? same Who receives the rent: N/A
6. Who will direct the operation of the business or serve as manager on the premises? List name, address & title:
Stephanie Lafleur 35000 440TH PLACE AITKIN 56431 OWNER/GM
- 7.. If partnership, give name of each partner and percent of ownership, and if limited partnership, give details:
Stephanie Lafleur 51% / CHRIS LAFLEUR 49%
8. If corporation, list all stockholders, directors, officers and percent of stock or number of shares owned by each:
N/A
9. State approximate distance of this establishment from nearest academy, college, university, church or school:
1.5 MILES FROM LINCOLN PARK MIDDLE SCHOOL / 2blks First Covenant Church
10. State whether any consideration, money or property, has 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: NONE

Failure to answer all questions truthfully on this application and attached "Exhibit A" which is made a part thereof, will be just cause for revocation of your license.

I (we) hereby certify that the applicant will be the sole owner and operator of this business to be conducted under the license and I (we) will notify the City Council in writing of any change in ownership in this business before the change is made, for the approval of the Alcohol Gambling & Tobacco Commission and City Council. I (we) have read the foregoing questions, and answers to said questions are true of my knowledge. I (we) will comply with all the provisions of the Alcoholic Beverage Code and the laws and regulations and their amendments.

Signature: [Signature] Date: 24 MAR 18
 Signature: [Signature] Date: 3/24/18

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 1-4, and 11 & 12 on reverse side of this application. Questions 5 through 10 need be answered only as they relate to any changes in your status since the filing of your last affidavit.

1. License Applicant CRAZY UNCLE ENTERTAINMENT LLC
(Individual, Partnership, Corporation or Club)
2. Address of licensed premises 2023 W. SUPERIOR ST, DULUTH, MN 55806
3. Your Name Stephanie Mae Lafleur 5/26/1968
(First) (Middle) (Last) (Jr./Sr.) (Date of Birth)
4. Home Address 35000 440TH PLACE, AITKIN / AITKIN MN 56431
(Address) (City) (County) (State) (Zip)
5. Other home addresses in last 10 years: 3704 Allendale Ave, Duluth, MN 55803

6. Other names you are, or have been known by, including maiden name: Stephanie M. Marple

7. Your position in the business: OWNER / GM
(Owner, partner, president, treasurer, manager, etc.)

8. (a). Do you, your spouse, or your children have any pecuniary interest in the ownership, operation, management or profits of any establishment license in Minnesota to sell liquor or 3.2 beer either at retail or wholesale? Yes _____ No .

(b). Do you, your spouse, or your children own stock in any corporation having a pecuniary interest in the ownership, operation, management or profits of any establishment license in Minnesota to sell liquor or 3.2 beer either at retail or wholesale? Yes _____ No .

(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.

9. Furnish the names and addresses of at least three business references, including one bank reference:

- (1) DULUTH SPRAY FOAM COMPANY, 241 E. HARNEY RD, ESKO, MN. 55733
- (2) DULUTH PRESCHOOL & FINE ARTS, 1108 E. 8TH ST, DULUTH, MN. 55805
- (3) (Bank) AFFINITY PLUS FEDERAL C.U., 1301 MILLER TRUNK HWY SUITE 100, DULUTH, MN 55811

10. (a). Have you or any corporation in which you held more than 10% stock, ever been denied a license to sell liquor or beer? Yes No

If yes, why _____

(b). Have you or any corporation in which you held more than 10% of the stock ever had a liquor or beer license suspended or revoked? Yes No


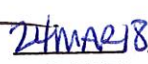
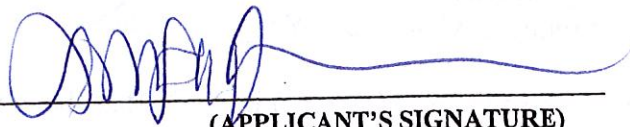
If yes, why? _____

11. Have you ever forfeited bail on or been convicted of violating any law relating to the operation of a bar or the sale, distribution, manufacture or transportation of alcoholic beverages? Gambling laws? Prostitution or disorderly house laws? Drug laws? Receiving or concealing stolen property? Assaults? Yes No

If yes, state the violation, where and when it occurred, the maximum possible penalty for the violation, and whether or not the record of the conviction has been expunged. _____

12. Have you read and do you understand the laws, rules and regulations of the State of Minnesota and the City of Duluth relative to the sale and distribution of alcoholic beverages? Yes No

I HEREBY AFFIRM UNDER PENALTY OF PERJURY THAT THE ABOVE ANSWERS ARE TRUE AND CORRECT.

(WITNESS) (DATE) (APPLICANT'S SIGNATURE)

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 1-4, and 11 & 12 on reverse side of this application. Questions 5 through 10 need be answered only as they relate to any changes in your status since the filing of your last affidavit.

1. License Applicant CRAZY UNCLE ENTERTAINMENT LLC
Christopher James LaFleur
(Individual, Partnership, Corporation or Club)
2. Address of licensed premises 2023 W Superior ST.
3. Your Name Christopher James LaFleur 08/18/1967
(First) (Middle) (Last) (Jr./Sr.) (Date of Birth)
4. Home Address 3500 440th Place, Aitkin, Aitkin, MN 56431
(Address) (City) (County) (State) (Zip)
5. Other home addresses in last 10 years: 3704 Allendale Ave, Duluth, St. Louis, MN 55803

6. Other names you are, or have been known by, including maiden name: N/A

7. Your position in the business: Minority Owner
(Owner, partner, president, treasurer, manager, etc.)

8. (a). Do you, your spouse, or your children have any pecuniary interest in the ownership, operation, management or profits of any establishment license in Minnesota to sell liquor or 3.2 beer either at retail or wholesale? Yes _____ No X.

(b). Do you, your spouse, or your children own stock in any corporation having a pecuniary interest in the ownership, operation, management or profits of any establishment license in Minnesota to sell liquor or 3.2 beer either at retail or wholesale? Yes _____ No X.

(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.

N/A

9. Furnish the names and addresses of at least three business references, including one bank reference:

- (1) John W. Ziebarth, Life Guard Anesthesia Services, 200 Bunker Hill Drive
Aitkin, MN 56431
- (2) Aaron Hounibrook, Duluth Sprayfoam CO, 241 E Harney Rd, Esko, MN 55733
- (3) (Bank) Bremer Bank 101 Minnesota Ave, N (PO Box 260), Aitkin, MN 56431

10. (a). Have you or any corporation in which you held more than 10% stock, ever been denied a license to sell liquor or beer? Yes _____ No X.

If yes, why N/A

(b). Have you or any corporation in which you held more than 10% of the stock ever had a liquor or beer license suspended or revoked? Yes _____ No X

If yes, why? N/A

11. Have you ever forfeited bail on or been convicted of violating any law relating to the operation of a bar or the sale, distribution, manufacture or transportation of alcoholic beverages? Gambling laws? Prostitution or disorderly house laws? Drug laws? Receiving or concealing stolen property? Assaults? Yes ___ No X

If yes, state the violation, where and when it occurred, the maximum possible penalty for the violation, and whether or not the record of the conviction has been expunged. N/A

12. Have you read and do you understand the laws, rules and regulations of the State of Minnesota and the City of Duluth relative to the sale and distribution of alcoholic beverages? Yes X No _____

I HEREBY AFFIRM UNDER PENALTY OF PERJURY THAT THE ABOVE ANSWERS ARE TRUE AND CORRECT.

[Signature]
(WITNESS)

3/24/18
(DATE)

[Signature]
(APPLICANT'S SIGNATURE)