



**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 4-17-17  
 LICENSE # 760202  
 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	\$
On Sale Intoxicating Liquor	✓ 4,173.00	
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)	NO N/C	
	<b>TOTAL:</b>	\$

**LICENSEE NAME, ADDRESS, & PHONE**  
 (Individual/corporation/partnership)  
Superior Ales, LLC  
137 2nd Ave S  
Waits Park, mn 56387

**BUSINESS NAME, ADDRESS, & PHONE**  
7 West Taphouse  
2510 maple grove RD, suite 100  
Duluth, mn 55811

**MANAGER'S NAME, ADDRESS & PHONE NO.**  
Rick Lampton  
2804 E 7th st  
Superior, WI 54880

**NAME & ADDRESS OF PROPERTY OWNER:**  
Golf Properties II, inc  
40 Platinum Properties mgmt  
4240 Washington Dr  
Herman town, mn 55811

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

**Plat/Parcel:** \_\_\_\_\_

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]  
 Signature of Applicant

Mailing Address if other than Business Address:  
 \_\_\_\_\_  
2510 maple Grove  
ste 100



**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

**APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE**

1. Name of Applicant (**individual, partnership or corporation or association**) that owns the business to be licensed: Superior Ales, LLC
2. Trade Name: 7 West Taphouse
3. Address of place to be licensed: 2510 maple grove Road, Suite 100;
4. Designated Serving Areas (i.e. ground floor, second, deck, etc.) ground floor
5. Name and address of owner of building: Golf Properties Inc. 46 Platinum properties  
 Any connection with applicant? no Who receives the rent: \_\_\_\_\_
6. Who will direct the operation of the business or serve as manager on the premises? List name, address & title:  
Rick Lampton 2804 E 7th St Superior WI 54880 managing partner
7. If partnership, give name of each partner and percent of ownership, and if limited partnership, give details:  
Superior Ales, LLC, Steve Letner - 55% & Rick Lampton 45%
8. If corporation, list all stockholders, directors, officers and percent of stock or number of shares owned by each:  
 \_\_\_\_\_  
 \_\_\_\_\_
9. State approximate distance of this establishment from nearest academy, college, university, church or school:  
1.4 miles
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:  
+

**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: 3-20-17  
 Signature: [Signature] Date: 3-28-17