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 # _____

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 =	$358.00
PLUS $178.00 EACH ADDITIONAL DAY =	$
TOTAL:	$

LICENSEE CORP NAME & BUSINESS ADDRESS:
Lyric Kitchen Bar
200 West 1st Street
Duluth, MN 55802

D/B/A OR TRADE NAME: Porters Rest. et al

CELL OR BUSINESS PHONE NO. 2187221202

MANAGER'S NAME & ADDRESS & PHONE #
Brandon Porter
200 West 1st Street
Duluth, MN 55802

EVENT LICENSE PERIOD: 09/21/2022

RAIN DATE? YES ☐ NO ☑

IF YES, DATE: _____

NEW INFORMATION

1. **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.
2. **SECURITY:** Applications are subject to review by the Duluth Police Department
3. **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.

Brandon Porter
Signature of Applicant

MAILING ADDRESS:
200 West 1st Street
Duluth,MN 55802

EMAIL: Brandon.Porter@hiduluth.com

Would you like notifications via email? YES ☑ NO ☐

Date of Application 07/29/22
License No. 2199

TEMPORARY EXPANSION OF LICENSED PREMISES (DIAGRAM)

Owner: Lion Hotel Group (d/b/a) Trade Name: Lyric Kitchen Bar

Date of Event: 09/21/2022 Address: 207 West Superior St

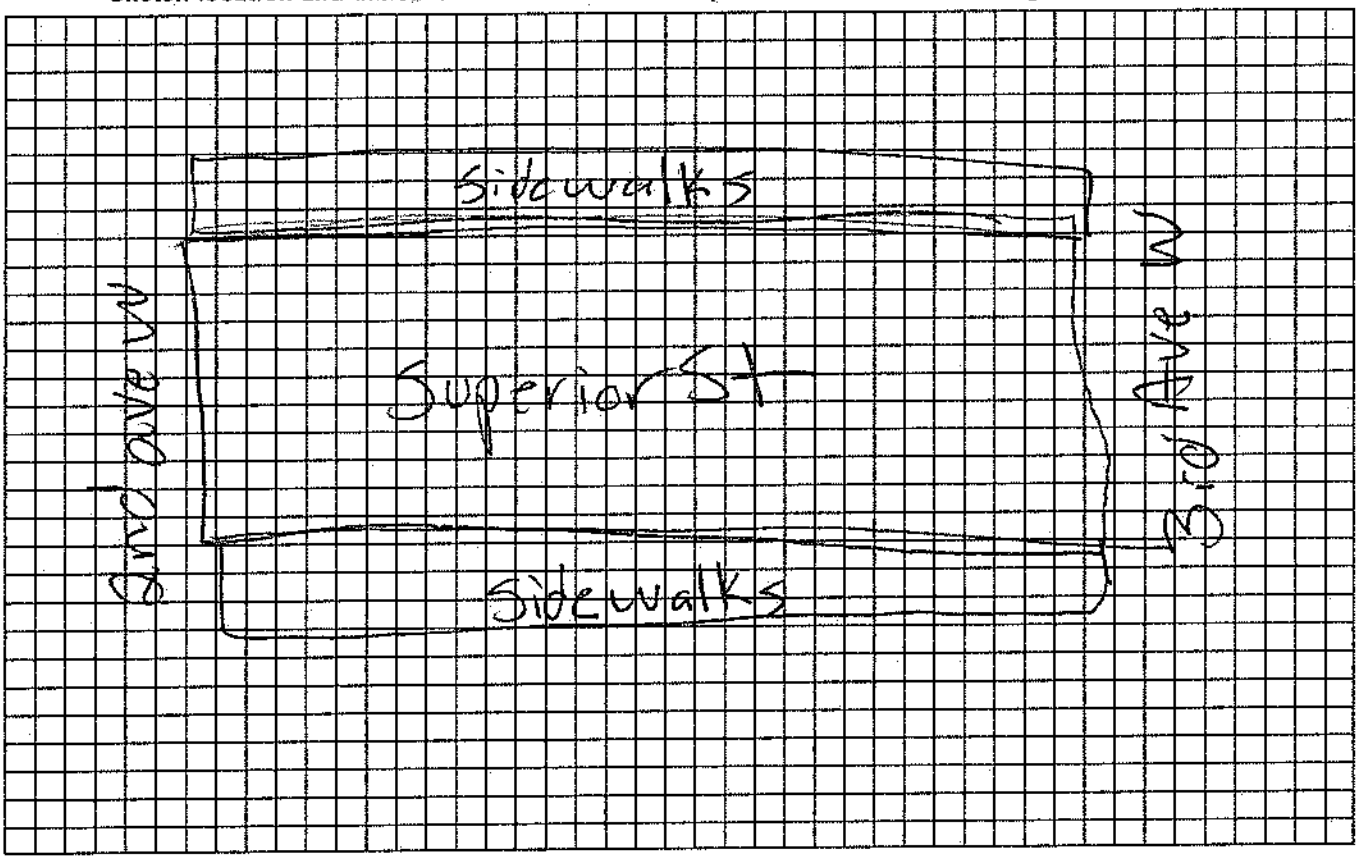
Name of Event: Bags and Brews Time of Event: 3pm-7pm

Security Personnel: _____ 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.

Brandon Potter
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.

1. Is this the first time for this event? Yes ☐ No ☑
   If No, how many people attended this event 250-300
   If Yes, how many people are you expecting to attend? _____

2. What kind of advertisement have you done? _____

3. What is the age of the target group for this event? 21+

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

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.

Brandon Porter — Applicant Signature

7/29/22 — Date

For office use only

Is a licensed Peace Officer needed for this event? _____

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