Type in your information	Phone (218) 730-5500 by tabbing through the boxes below. submit to the address listed above.	Street FEB 1 3 2025	LICENSE #
	LICEN		
	LICENS	E	FEE
	TEMPORARY EXPANSION OF L		\$100.00
	PLUS \$50.00 EACH	TOTAL:	\$ \$ 100 ⁰⁰
ICENSEE CORP N	AME & BUSINESS ADDRESS:	D/B/A OR TRADE	Fire Bar
Lemons Rea 2002 London Duluth,	- Inc. 1 Rd. UN 55812		NAME:
ANAGER'S NAME	& ADDRESS & PHONE #	EVENT LICENSE	PERIOD:
Daniel A	Landgren		
23312	5th 5t.		
Duluth	MN 55872	IF YES, DATE:	
(818)	590-9323		
	E: All applications must be comple	or the next meeting of the c	Clerk's Office by the last Wednesday of ity's Alcohol, Gambling & Tobacco (AGT
the month in or Commission. T applications su	rder to be placed on the agenda f The AGT Commission meets on the abmitted without the correspondin applications are subject to review b	e first Wednesday of every g application fee will be reje	ected.
 the month in or Commission. Trapplications suitable 2. <u>SECURITY:</u> A 3. <u>HEALTH DEP</u> 	The AGT Commission meets on the behavior of the behavior of the corresponding of the corresponding of the behavior of the beha	e first Wednesday of every g application fee will be reje by the Duluth Police Departm	ected.
the month in or Commission. T applications su 2. <u>SECURITY:</u> A 3. <u>HEALTH DEP</u> and alcohol (21 HEREBY STATE T PROVISION OF THE	The AGT Commission meets on the bibmitted without the correspondint of the correspondint of the correspondint of the correspondint of the corresponding of the correspondent of t	e first Wednesday of every g application fee will be reje by the Duluth Police Departm with the Minnesota State He IS TRUE AND CORRECT A DULUTH AND LAWS OF	alth Department for the serving of food
the month in or Commission. T applications su 2. <u>SECURITY:</u> A 3. <u>HEALTH DEP</u> and alcohol (21	The AGT Commission meets on the bibmitted without the correspondint of t	e first Wednesday of every g application fee will be reje by the Duluth Police Departm with the Minnesota State He IS TRUE AND CORRECT A DULUTH AND LAWS OF	ant alth Department for the serving of food

Date of Application ______

TEMPORARY EXPANSION OF LICENSED PREMISES (DIAGRAM)

Date of Event Name of Even	nt: <u>Enduction</u>	Send off w/ Parts Paren	145 PATHY Time of Event:	Rect Inc DBA Rect BN DUluth, MN 55812 Copm - 11 pm
Security Pers	onnel:	Police Dept- / In- nou	<u>'s(#150</u> Firm:	
DIAGRAM M	UST SHOW:			
	that will be used.	ordering the erec		
B. Stree C. Whei	ets and intersections be re fencing surrounding	the area will be located a	and what type of fencing will be	used (snow fence is
prefe	rred).			
D. When	re the bar will be locate	ed in the "serving area."	6	Contraction of the second s
E. Exits	and entries to and fro	m the serving area.	E	
6.				Server of "NORTH "
A	the location and lim	ensions of area to be o	ccupied. Indicate north on d	liagram as NORTH.
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		Entrace		
- V	Calles .			
	Jan Clark			
	stage			
		Ser-UN		71 3
	FEALING			
		HAR.	AG	
-++++				

I hereby agree that I shall comply with all of the ordinances of the City or 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