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

RECEIVED
APR 9 - 2019
CITY OF DULUTH
CITY CLERK OFFICE

FOR OFFICE USE ONLY
DATE 4-10-19
LICENSE # 107

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 =	$ ~~358.00~~
TOTAL:	$ 358.00

LICENSEE CORP NAME & BUSINESS ADDRESS:
POL of Duluth, Inc.
331 Canal Park Drive
Duluth, MN 55802

D/B/A OR TRADE NAME: Club Saratoga

CELL OR BUSINESS PHONE NO. 218-722-5577

MANAGER'S NAME & ADDRESS & PHONE #
Phil Fish
Same Address
218-722-5577

EVENT LICENSE PERIOD: June 22, 2019

RAIN DATE? YES ☐ NO ☒

IF YES, DATE: _____

NEW INFORMATION

1. **PLEASE NOTE:** All applications must be in the City Clerk's Office by the last Wednesday of the month. Your attendance at the AGTC meeting on the first Wednesday of the month is required. All information must be completed or it will be returned and may not be heard until the next months meeting. All diagrams, regardless if they are the same as last year must be redone each time you apply for a temporary expansion. Computer diagrams are allowed.
2. **SECURITY:** Supply information to the License Inspector (218-730-5421).
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 0F THE ORDINANCES OF THE CITY OF DULUTH AND LAWS OF THE STATE OF MINNESOTA AND THEIR AMENDMENTS.

David B Lowe
Signature of Applicant

MAILING ADDRESS:
331 Canal Park Dr
Duluth, MN 55802

EMAIL: danblowe@comcast.net

Would you like notifications via email? YES ☒ NO ☐

Date of Application _____

License No. _____

TEMPORARY EXPANSION OF LICENSED PREMISES (DIAGRAM)

Owner: PDL OF DULUTH, INC. (d/b/a) Trade Name: CLUB SARATOGA

Date of Event: 6-22-19 Address: 331 CANAL PARK DR

Name of Event: GRANDMA'S MARATHON Time of Event: 8:00 AM - 2:00 PM

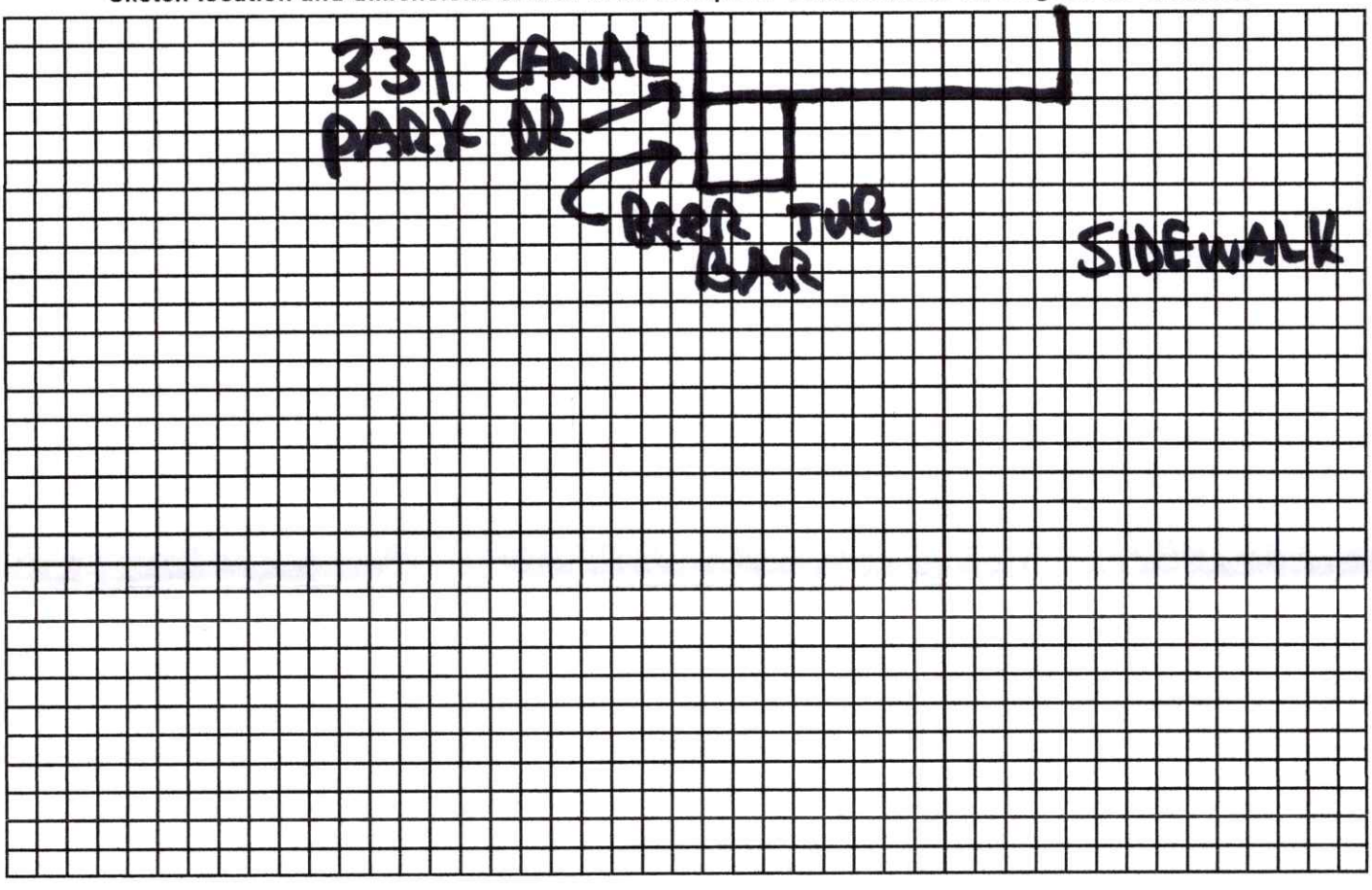
Security Personnel: PHIL FISH Firm: CLUB SARATOGA

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."

N →

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.

David B. Jones

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

2. What kind of advertisement have you done? NONE.

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.

Applicant Signature

4-3-19
Date

For office use only

Is a licensed Peace Officer needed for this event? _____

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