

## 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

## 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	1, 11, 11, 11
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	W-14-14
	TOTAL:	\$

LICENSEE NAME, ADDRESS, & PHONE	BUSINESS NAME, ADDRESS, & PHONE
(Individual/corporation/partnership)	MALLE POUR
NOBLE POUR, LLC	1907 W SOPERIOR ST
118 5 27TH AVE (1)	70/000000000000000000000000000000000000
DULUTH MN 55806	DULUTH, NW 83 806
	NAME & ADDRESS OF PROPERTY OWNER:
MANAGER'S NAME, ADDRESS & PHONE NO.	OMC. TWO. LLC
LOUIS HANSON	119 5 77TH AUS IN
2008 SWAN LAKE Kd	Davier M. SERVE
DULUTA, MN SS812	902014, MA 6 6 6 6
Email:	LICENSE PERIOD: 9/1/ - 8/31/
MAILING ADDRESS IF OTHER THAN BUSINESS AI	DDRESS:
OM1 114	
1909 W SUPERIOR ST	
DULUTY, MW 55806	
I HEREBY STATE THAT ALL INFORMATION HER	E 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.	TIM /
Signa	ture of Applicant
Signa	ture or rependant



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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: NoBLE Posa, LLC
2 Trade Name: MANE NOBLE FOUR
3. Address of place to be licensed: 1907 W SUPERIOR ST DULUTH, MW SS 806.
1 Designated Serving Areas (i.e. ground floor second, deck, etc.) GROND LOOR
5. Name and address of owner of building: OMC TWO, LLC 118 S. Z7 W NUEW DULL
Any connection with applicant? YES Who receives the rent: Emc, LLC
6. Who will direct the operation of the business or serve as manager on the premises? List name, address & title:
7 If partnership, give name of each partner and percent of ownership, and if limited partnership, give details:
8. If corporation, list all stockholders, directors, officers and percent of stock or number of shares owned by each THOMAS HANSON - 88% LOUIS HANSON 4% JEFFREY PETCOFF 4  DANIEL LEFEBURE 4%
9. State approximate distance of this establishment from nearest academy, college, university, church or school:
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: NA
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: