



**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 4-26-2017
LICENSE # 69

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:	\$358.00

LICENSEE CORP NAME & BUSINESS ADDRESS:

Players Grandstand Inc.
~~Player Sports-Bar~~ WELL CENTRAL INC

4024 Grand Ave. Duluth, MN 55807

720 N. Central Ave. 7

MANAGER'S NAME & ADDRESS & PHONE #

Rick MacArthur

825 43rd Ave W.

Duluth MN 55807

D/B/A OR TRADE NAME: _____

CELL OR BUSINESS PHONE NO. 218-310-4553

EVENT LICENSE PERIOD: July 15th 2017

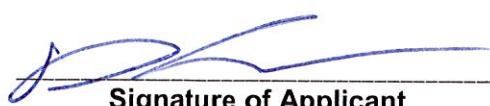
RAIN DATE? YES ☐ NO ☒

IF YES, DATE: _____

NEW INFORMATION

- 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.
- SECURITY:** Supply information to the License Inspector (218-730-5421).
- 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.


Signature of Applicant

MAILING ADDRESS:

Valley Youth Center

720 N. Central Ave.

Duluth, MN 55807

EMAIL: rsalgy@valleyyouthcenters.org

Would you like notifications via email? YES ☒ NO ☐

Date of Application _____
License No. _____

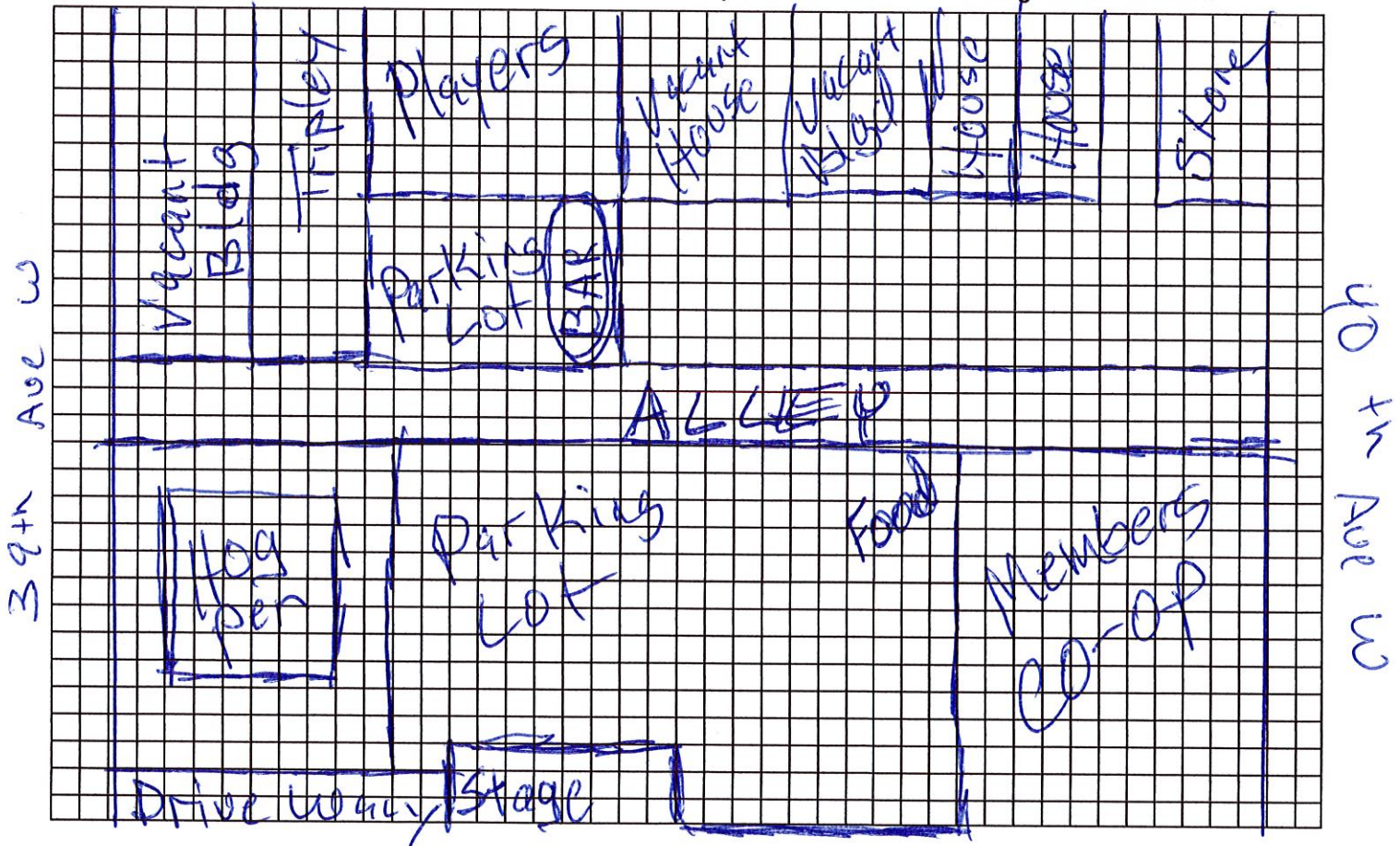
TEMPORARY EXPANSION OF LICENSED PREMISES (DIAGRAM)

Owner: _____ (d/b/a) Trade Name: Players Sports Bar
Date of Event: July 15th 2017 Address: 4024 Grand Ave. Duluth, MN 55807
Name of Event: VYC Bike Run Time of Event: 10:00 am-1:00am
Security Personnel: my Own 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.

Signature of owner/authorized representative