TYPE OF LICENSE (Check all that apply)

	License Type	Fee (not including investigation fee)		<u>License Type</u>	<u>Fee</u>
	Off-Sale Intoxicating	\$ 0.00		Brewery Off-Sale	\$ 0.00
V	On-Sale Intoxicating	\$ 3,454.00		Brewery Taproom On-Sale	\$ 0.00
V	Sunday Liquor	\$ 178.00		Microdistillery Off-Sale	\$ 0.00
	Wine (Includes Sunday)	\$ 0.00		Microdistillery Cocktail Room	\$ 0.00
	3.2% Malt Liquor: On-Sale	\$ 0.00		Consumption and Display	\$ 0.00
	3.2% Malt Liquor: Off-Sale	\$ 0.00		Liquor License Transfer Only	\$ 0.00
	Special Club Liquor	Calculated by Clerk's Office		On Sale Theater	\$ 0.00
	Dancing	\$ 0.00	7	2:00 A.M. (Issued by State)	Calculated by State
	Additional Bar (each)	\$ 0.00		After Hours Entertainment	\$ 0.00
				TOTAL DUE:	\$ 3,632.00

BUSINESS INFO	RMATIO)N						
Name of applic	cant (nai	me of individual, partn	ership, corp	oration or associat	tion):		·	
MBMH, Inc								
Applicant Addr	ress: 59	37 N Pike Lake Ro						
City: Duluth		Sta	te: MN		Z	ip: 55811		
Applicant Phor	ne: 218	3-310-7917	Applican	t Email Address:	martin@	pointho	rizonm	in.com
Business Name	e/dba:	The Social House						
Business Address:		355 South Lake Ave		City Duluth			MN	Zip 55802
Business Phone: (218) 727-8519								
Minnesota Tax ID Number: 6228924				Federal Tax ID Number: 83-3547253				
-		tockholders, directors, name of each partner		-		shares ow	ned. If p	partnership or
Martin Hinz I	II - 50%	6						
Mathew Bert	hiaume	e - 50%						
State approxim	nate dist	ance of this establishm	ent from ne	earest academy, co	ollege, un	iversity, ch	urch, o	r school:
0.75 mile								
Who will direct	t the ope	eration of the business	or serve as	a manager on the	premises	?		
Full Name:	Mathev	v Berthiaume		Phone Number:	218-3	93-5068		
			-					

BUILDING O	WNER INFORMATION						
Full Name:	Building D, Inc		Phon	e Number: (218) 340-4902			
Address:	525 South Lake Ave., Duluth, MN 5580	2					
Where the	Where the building is owned by someone other than the applicant, state in summary the conditions of the						
lease arrang	ement, such as term of lease, monthly rental, re	enewal privil	eges, e	tc.			
The lease	is a 3 year, with an option to renew for 7	years. Th	e mor	othly rent is \$10,363.			
DESCRIPTIO	N OF PROPOSED BUSINESS:						
What is the	seating capacity of the restaurant?						
Indoor Seat	ing: 177	Outdoor Se	ating:	tbd			
Designated	Serving Areas (i.e. ground floor, second floor, d	eck, etc.) Gr	ound	Floor, Secured Patio Area Outside			
	of prepared food occur at this site?	.1 .		✓ Yes □ No			
If yes, pleas	e attach license from MN Department of Healt	th.					
List date you	desire to start serving liquor: 5/1/23			, <u>, , , , , , , , , , , , , , , , , , </u>			
List date you	desire to start serving inqueri						
		. h					
	icense period for a 3.2% non-intoxicating malt ating liquor, on sale intoxicating liquor, and wi						
	nswer all questions truthfully on this applicat		ched "	Personal Supplemental Affidavit" which is			
made a par	t thereof, will be just cause for revocation of yo	our license.					
I (we) here	by certify that the applicant will be the sole o	wner and op	erator	of this business to be conducted under the			
license and I (we) will notify the City Council in writing of any changes 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 to the best of my (our) knowledge. I (we) will comply with all provisions of the Alcoholic Beverage Code and the laws and regulations and their amendments. I further understand							
that the giving of false information in this application, regardless of when it is discovered, and or the failure to provide							
required pertinent information constitutes cause for the immediate revocation of any and all licenses and/or permits							
issued here	under and may be grounds for prosecution for	perjury.					
Signature:	MITWITE			Date: 3/16/23			
Ciana	16 P.			Date: 3/16/23			
Signature:	Nous			Date: 57.55			

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 is classified as private data and will be available to governmental personnel and other governmental agencies whose access is necessary to perform their official duties.