

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

LICENSE

BREWERY MALT LIQUOR OFF SALE (GROWLER) =

BREWERY MALT LIQUOR ON SALE (TAPROOM) =

FOR OFFICE USE ON	NLY
DATE	
LICENSE#	-
	TASTER SANCE

TRANSFER

FEES

N/C

N/C

N/C

N/C

NEW

FEES

300.00

250.00

178.00

N/C

31.00

\$

LICENSE APPLICATION

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 official duties.

SUNDAY (Taproom only) =

2:00 A.M. (Taproom only) =

	INVESTIGATION	N FEE (ONE TIME) =	\$	31.00			
		TRANSFER FEE =			\$ 358		
		TOTAL =	\$	759.00			
	CORP NAME/BUSINESS ADDRESS:	D/B/A o	r TR	ADE NAME:	Ursa Mino	r Brewin	
	Minor Brawing LLC J. Superior St. Ste B	CELL O	R B	USINESS PHO	NE NO(218) 20	9-0537	
Duluth	, MN 55806						
				BUSINESS PI			
MANAGE	MANAGER'S NAME & ADDRESS & PHONE # 2415 W. Superior Street Ste B					<u> </u>	
Benjan	un Hugus	Dulu	th	MN 55	806		
1526 Fe	ern Ave, Duloth, MN 558	05					
(218) 20	69-0537	-					
1		LICENS	E PI	ERIOD: Endin	ig August 31,		
ben ec	ersaminer brewing, com						
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.							
		,	S	ignature of <i>i</i>	Applicant		
	ADDRESS:						
2415	W. Superior Street	EMAIL: be	ne	ursanthor	braving.com		
Suite ?	B	Would you like n	otif	ications via er	nail? YES 🔀	NO	
Deloth	, MN 35806						



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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: Benjamin Hugus / Ursa Minor Brewing LC 2. Trade Name: Ursa Minor Brewing 3. Address of place to be licensed: 2415 W. Superior Street, Duluth, MN 55806.
2. Trade Name: Ursa Minor Browing.
3. Address of place to be licensed: 2415 W. Superior Street, Duluth, MN 55806.
4. Designated Serving Areas (i.e. ground floor, second, deck, etc.) Patro, Seating on main floor.
5. Name and address of owner of building: David Marshall (RE Investments LCC)
Any connection with applicant? No Who receives the rent: RE Investments CC.
6. Who will direct the operation of the business or serve as manager on the premises? List name, address & title:
Benjamin Hugus /1526 Fern Are Duloth MN 55805/ Managing Member
7 If partnership, give name of each partner and percent of ownership, and if limited partnership, give details: (LLC) Benjamin Hugus (70%), Mark Hugus (10%), Erin Eisch (10%), David Hugus (10%)
8. If corporation, list all stockholders, directors, officers and percent of stock or number of shares owned by each:
NA
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: 10. MA
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: