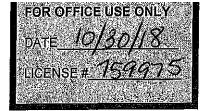


CITY OF DULUTH CITY CLERK'S OFFICE

330 City Hall 1 411 West First Street Duluth, Minnesota 55802-1189 Phone (218) 730-5500 Fax (218) 730-5923



LIQUOR LICENSE APPLICATION

LICENSE		FEE
OFF SALE INTOXICATING LIQUOR		\$1500.00
OFF SALE INTOXICATING LIQUOR - CONDITIONAL		\$1400.00
LEVEL 4 INVESTIGATION FEE (One time)		\$ 209.00
LICENSEE BUSINESS NAME & BUSINESS ADDRESS (Corp/individual/partnership)	TRADE NAME:	akeside Liquors
Lakeside Liquors Inc. 4507 E. Superior St	BUSINESS PHONE:	218-393-3643
Duluth, MN 55804	OWNER OF BUSINESS I	
MANAGER'S NAME & ADDRESS & PHONE	Steven W	Preston
Dawn + Mark Moran		
5335 Idlewild St		
Duluth, MN 55804 218-393-3643 218-390-6028	LICENSE PERIOD: 9/1	/ 18- 8/31/ 1 9
PLAT/PARCEL: 010 - 3010 - 00860		
LYCE CONNON AND ORDICEDS ON DANGERS (THE F	VCTOCY)-	
LIST CORPORATE OFFICERS OR PARTNERS (TITLE		
Dawn Moran President		
Mark Moran Vice Pres	igent 47º70	
HEREBY STATE THAT ALL INFORMATION HERE I WITH ALL PROVISION OF THE ORDINANCES OF TH MINNESOTA AND THEIR AMENDMENTS.		
Signature of Applicant		

Mailing Address: Dawn & Mark Moran Idlewild St.

dsahardware a gwest office. net dmoran & d.umn.edu



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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: Dawn + Mark Moran - Lakeside Liquors Inc.
2. Trade Name: Lakeside Liquors.
3. Address of place to be licensed: 4507 E. Superior St.
4. Designated Serving Areas (i.e. ground floor, second, deck, etc.) around floor
5. Name and address of owner of building: Steven W. Preston 231 E. 14th St Dulut
Any connection with applicant? \(\int \lambda \) Who receives the rent: \(\sumset \) \(\text{Steven} \) \(\omega \). \(\text{Preston} \).
6. Who will direct the operation of the business or serve as manager on the premises? List name, address & title:
Dawn + Mark Moran 5335 Idlewild St Duluth Owners
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: Dawn Moran, President 51%
Mark Moran, Vice President 49%
9. State approximate distance of this establishment from nearest academy, college, university, church or school:
over 1500 Leet
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:
detail
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: Date: 10-26-18 Date: 10-26-18