

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 (JOE ONL!
DATE	
LICENSE #	<u></u>
Old License New License	_ Type 11 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 official duties.

LIQUOR LICENSE APPLICATION

License applied for:	Individual Fees	Indicate below
Investigation fee (one time)	\$ 209.00	\$ 209.00
On Sale Intoxicating Liquor	4317.00	4317
On Sale Sunday	178.00	178
Dancing	1,130.00	(married and a second
Additional Bar (each)	571.00	
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	
	TOTAL:	\$ 4704

LICENSEE NAME, ADDRESS, & PHONE (Individual/corporation/partnership) The Bozeal Huse 330 N 57 th Ave W Duluth, MN 55807	BUSINESS NAME, ADDRESS, & PHONE THE BOREAL HUSE 330 N S7m Ave L) DULLUTH, MN 55807
MANAGER'S NAME, ADDRESS & PHONE NO. Kentie Fast 5(0) Hurtington St Duluth, MN 55807	NAME & ADDRESS OF PROPERTY OWNER: Kay Industries Sieur Huntington St Duluta, MIN 55607
Email: <u>Katiefast 15 eg mail. com</u>	LICENSE PERIOD: 9/1/19- 8/31/20
MAILING ADDRESS IF OTHER THAN BUSINESS AD	DDRESS:
WITH ALL PROVISIONS OF THE ORDINANCES OF MINNESOTA AND THEIR AMENDMENTS.	IS TRUE AND CORRECT AND THAT I SHALL COMPLY THE CITY OF DULUTH AND LAWS OF THE STATE OF Ure of Applicant



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APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE

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1. Name of Applicant (individual, partnership or corporation	
licensed: The Boreal House, LLC	
2. Trade Name: The Boreal Harse	1
3. Address of place to be licensed: 330 N 57th Ave	W. Duduty, MN 55807.
4 Designated Serving Areas (i.e. ground floor, second, deck, et	c.) apanol floop.
5. Name and address of owner of building: Ka A Manust	ries, Steal Honolyan St. Dutton
5. Name and address of owner of building: Kay Who receives t	he rent: VI Jamstrill.
6. Who will direct the operation of the business or serve as man	ager on the premises? List name, address & title:
Kortie Fast, Sled Huntington St, Dulyta A	N 55807
7 If partnership, give name of each partner and percent of own	ership, and if limited partnership, give details:
Katie Fast 70% Julie LaTourelle	30%
8. If corporation, list all stockholders, directors, officers and per	cent of stock or number of shares owned by each:
9. State approximate distance of this establishment from nearest	t academy, college, university, church or school:
≈ 1.5 miles	
10. State whether any consideration, money or property, has been	en paid, or will be paid, given, exchanged or
pledged, by anyone, and to whom, for the purchase or operation	n of this business. State the amounts in
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 l	icense.
I (we) hereby certify that the applicant will be the sole owner an	d operator of this business to be conducted under
the license and I (we) will notify the City Council in writing of a 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	s 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: Jan B	Date: 7/15/19
IM s/l	Date: 7/15/19
Signature: / 1/4 e 1/1/4	Date: 1115119