

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
LICENSE #

Type in your information by tabbing through the boxes below. Print all forms, sign and submit to the address listed above.

LICENSE APPLICATION

	LICENS	E	FEE	
	TEMPORARY EXPANSION OF	LICENSED PREMISES =	\$358.00	
	PLUS \$178.00 EA	CH ADDITIONAL DAY =	\$	
		TOTAL:	\$ 358	
JMBFF, LL	ME & BUSINESS ADDRESS:		DE NAME: SPUY	
109 W 1St	Strelt 1. SSP12	CELL OR BUSI	NESS PHONE NO. \underline{U}	151-246-460
MANAGER'S NAME &	ADDRESS & PHONE #	EVENT LICENS	SE PERIOD: 8	16/16
4108 N 7	M SS810	RAIN DATE?	YES NO	<u> </u>
at the AGTC med returned and may must be redone of the second of the sec	All applications must be in the Ceting on the first Wednesday of y not be heard until the next moneach time you apply for a temporally information to the License In An application must be on file vertical temporal tempo	the month is required. A ths meeting. All diagrams rary expansion. Compute nspector (218-730-5421).	Il information must be on a second of the se	completed or it will be the same as last year
PROVISION OF THE O AMENDMENTS. MAILING ADDRESS:	at all information here redinances of the city of 9th Avl W M SSTIO	DULUTH AND LAWS O	ture of Applicant	M St. COM
MAILING ADDRESS: 4107 N 7 BULUTH, K	9th AVLW M 55810	EMAIL: Madelin	ne@spvvsc	



Additional information is being required by the Duluth Police Department. An incomplete application will result in the delay or rejection of your application.

Is this the first time for this event? If No, how many people attended this event If Yes, how many people are you expecting to attend?	Yes No No No S 00
2. What kind of advertisement have you done? Social	Media,
3. What is the age of the target group for this event?	21-45
4. Will alcohol be sold or given away at this event?	1/45/501d
5. Will dancing be allowed at this event?	- VS
I understand that as the applicant for this permit/license, I an Police/Security for this event. I will provide proof of hired security to scheduled event.	
Applicant Signature	Date Date
For office use only	
Is a licensed Peace Officer needed for this event?	
If yes, how many licensed peace officers will be required?	

Date of Application	.
License No	

Owner: JWBFF, LCC (d/b/a) Trade Name: SPVYS on first Date of Event: P2721 Address: 106 W1st Stvelt, Dv1vth Mm Name of Event: Spvys Summer b1ck yartyTime of Event: Lpm - 12am Security Personnel: Spvys DPD 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."
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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.
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Signature of owner/authorized representative