



Minnesota Department of Public Safety
ALCOHOL AND GAMBLING ENFORCEMENT DIVISION
 444 Cedar St., Suite 222, St. Paul, MN 55101-5133
 (651) 201-7507 FAX (651)297-5259 TTY(651)282-6555
 WWW.DPS.STATE.MN.US



APPLICATION FOR OFF SALE INTOXICATING LIQUOR LICENSE

No license will be approved or released until the \$20 Retailer ID Card fee is received

Workers compensation insurance company. Name _____ Policy # _____

Licensee's MN Sales and Use Tax ID # _____ *To apply for a MN sales and use tax ID #, call (651) 296-6181*

Licensee's Federal Tax ID # _____

If a corporation, an officer shall execute this application If a partnership, a partner shall execute this application.

Licensee Name (Individual, Corporation, Partnership, LLC)	Social Security #	Trade Name or DBA	
License Location (Street Address & Block No.)	License Period From _____ To _____		Applicant's Home Phone #
City	County	State	Zip Code
Name of Store Manager	Business Phone Number		DOB (Individual Applicant)

If a corporation or LLC state name, date of birth, Social Security # address, title, and shares held by each officer. If a partnership, state names, address and date of birth of each partner.

Partner Officer (First, middle, last)	DOB	SS#	Title	Shares	Address, City, State, Zip Code

1. If a corporation, date of incorporation _____, state incorporated in _____, amount paid in capital _____. If a subsidiary of any other corporation, so state _____ and give purpose of corporation _____. If incorporated under the laws of another state, is corporation authorized to do business in the state of Minnesota? Yes No
2. Describe premises to which license applies; such as (first floor, second floor, basement, etc.) or if entire building, so state.

3. Is establishment located near any state university, state hospital, training school, reformatory or prison? Yes No If yes state approximate distance. _____

4. Name and address of building owner: _____
Has owner of building any connection, directly or indirectly, with applicant? Yes No
5. Is applicant or any of the associates in this application, a member of the governing body of the municipality in which this license is to be issued? Yes No If yes, in what capacity? _____

6. State whether any person other than applicants has any right, title or interest in the furniture, fixtures or equipment for which license is applied and if so, give name and details. _____

7. Have applicants any interest whatsoever, directly or indirectly, in any other liquor establishment in the state of Minnesota?
 Yes No If yes, give name and address of establishment. _____

8. Are the premises now occupied or to be occupied by the applicant entirely separate and exclusive from any other business establishment? Yes No
9. State whether applicant has or will be granted, an On sale Liquor License in conjunction with this Off Sale Liquor License and for the same premises. Yes No Will be granted
10. State whether applicant has or will be granted a Sunday On Sale Liquor License in conjunction with the regular On Sale Liquor License. Yes No Will be granted
11. If this application is for a County Board Off Sale License, state the distance in miles to the nearest municipality. _____
12. State Number of Employees _____
13. If this license is being issued by a County Board, has a public hearing been held as per MN Statute 340A.405 sub2(d)? _____
14. If this license is being issued by a County Board, is it located in an organized township? **If so, attach township approval.**

1. State whether applicant or any of the associates in this application, have ever had an application for a liquor license rejected by any municipality or state authority; if so, give dates and details. _____

2. Has the applicant or any of the associates in this application, during the five years immediately preceding this application ever had a license under the Minnesota Liquor Control Act revoked for any violation of such laws or local ordinances; if so, give dates and details. _____
3. Has applicant, partners, officers, or employees ever had any liquor law violations or felony convictions in Minnesota or elsewhere, including State Liquor Control penalties? Yes No If yes, give dates, charges and final outcome.

4. During the past license year, has a summons been issued under the Liquor Civil Liability Law (Dram Shop) M.S. 340A.802.
 Yes No If yes, attach a copy of the summons.

This licensee must have one of the following: **(ATTACH CERTIFICATE OF INSURANCE TO THIS FORM.)**

Check one

- A. Liquor Liability Insurance (Dram Shop) - \$50,000 per person, \$100,000 more than one person; \$10,000 property destruction; \$50,000 and \$100,000 for loss of means of support.
- or
- B. A surety bond from a surety company with minimum coverage as specified in A.
- or
- C. A certificate from the State Treasurer that the licensee has deposited with the state, trust funds having market value of \$100,000 or \$100,000 in cash or securities.

I certify that I have read the above questions and that the answers are true and correct of my own knowledge.

Print name of applicant & title	Signature of Applicant	Date
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REPORT BY POLICE/SHERIFF'S DEPARTMENT

This is to certify that the applicant and the associates named herein have not been convicted within the past five years for any violation of laws of the State of Minnesota or municipal ordinances relating to intoxicating liquor except as follows:

Police/Sheriff's Department	Title	Signature
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County Attorney's Signature

PS 9136-(2009)

IMPORTANT NOTICE

All retail liquor licensees must register with the Alcohol, Tobacco Tax and Trade Bureau.
For information call (513) 684-2979 or 1-800-937-8864

LIQUOR LICENSE POLICY

APPLICATION PROCEDURES AND GUIDELINES

A. NO APPLICATION SHALL BE ACCEPTED UNLESS:

1. All questions are answered in full.
2. A map of the layout of the facility is attached showing where liquor will be served.
3. A copy of the Articles of Incorporation (if corporation) and a copy of the By-Laws is attached.
4. A copy of the food menu (if applicable).
5. A business plan.
6. The application is signed and notarized.
7. The required investigative fee is paid in full. If payment does not clear bank, application process will be stopped until cash payment is made. Investigation fees are:

Individual	\$200
Partnership	\$300
Corporation	\$500
Wine	\$200

B. COUNCIL APPROVAL OF LIQUOR LICENSE APPLICATION:

1. No application will be presented to the Common Council until the criminal investigation is completed and a report made available to the City Clerk.
2. The liquor license application shall be presented to the Council at the next available Council meeting following the investigative report to the City Clerk.

C. MY APPLICATION HAS BEEN APPROVED...NOW WHAT?

1. The applicant is responsible for obtaining all necessary permits, prior to opening, related to the operation of their business. Permits may include:
 - (a) Building Permits, Inspections & Certificate of Occupancy
-Contact the Building Safety Department, 2122 Campus Drive SE,
(507) 328-2600
 - (b) Fire & Assembly Permits
-Contact the Fire Department, 201 4th Street SE, (507) 328-2800
 - (c) Health and Food Handling Permits
-Contact Olmsted County Health Department, 2100 Campus Drive SE,
(507) 328-7500

2. At least three weeks prior to opening, the applicant needs to deliver the following documents to the City Clerk's Office. The City Clerk will certify the license information to the Secretary of State for further approvals. All information will be sent as soon as possible to allow the Buyer's Card to be returned to allow the licensee to purchase and stock liquor prior to opening.
 - (a) An Insurance Certificate showing liquor liability coverage running from the start of the business license through March 31 of the current licensing period. All renewals shall require an updated certificate showing the licensing period of April 1 through March 31 of the following year.
 - (b) An Insurance Certificate showing Worker's Compensation Coverage.
 - (c) A completed Buyer's Card (available from the City Clerk) with a \$20.00 check made payable to MINNESOTA ALCOHOL AND GAMBLING ENFORCEMENT. (The Buyer's Card allows the purchase of wholesale liquor for your business.)
 - (d) If you are planning on staying open to 2:00 AM, an application from the State Alcohol and Gambling Enforcement will need to be completed and submitted to the City Clerk with the required fee. (available from the City Clerk)
3. If you are obtaining an On-Sale Wine, On-Sale Club Intoxicating Liquor or an Off-Sale Intoxicating Liquor license, an enforcement inspector from the State Alcohol and Gambling Enforcement Office will visit your business prior to State approval of the license.

D. WHEN CAN I OPEN THE BUSINESS AND START TO SELL ALCOHOL?

The City Clerk's Office will work closely with you in the final weeks prior to opening to try to accommodate you in opening on schedule. You must have a Certificate of Occupancy from the Building Safety Department before you can open and the approved liquor license before you can sell liquor to the public.

License fees are paid on a pro-rated basis to the City Clerk prior to opening. Please check with the City Clerk on the appropriate fee for your license(s).

E. RENEWALS OF LIQUOR LICENSES

Renewal information for the next licensing period will be sent from the City Clerk's Office at the end of January. Licensees have until the end of February to complete and return all materials to the City Clerk as instructed.

Renewal licenses will be presented to the Common Council for approval the first week of March. All license fees are due prior to April 1st.

IF YOU HAVE QUESTIONS

Office Hours - Monday through Friday, 8:00 AM to 5:00 PM

City Clerk's Office
201 Fourth Street S.E.
Rochester, Minnesota 55904

(507) 328-2900 – telephone
(507) 328-2901 – fax

www.rochestermn.gov

RIGHTS OF SUBJECTS OF GOVERNMENT DATA

LICENSE AND PERMIT DATA

“TENNESSEN WARNING”

In accordance with the Minnesota Government Data Practices Act, the City of Rochester is required to inform you of your rights as they pertain to the information collected about you. Public information is that information which is available to the general public; Private information is that information which is available to you, not to the public; and confidential information is that information which is not available to you or the public. The information we collect from you is either public or private. The separation of that information is as follows:

PUBLIC – NAME AND ADDRESS OF APPLICANT(S) AT THE TIME OF APPLICATION

PRIVATE – SOCIAL SECURITY INFORMATION, BIRTH DATE INFORMATION

(MS 13.355 & 13.37(a))

The information collected and required from you is to determine your eligibility for a City of Rochester License or Permit. If you do not supply the required information, the City of Rochester will not be able to determine your eligibility.

The dissemination and use of the private data we collect is limited to that necessary for the administration and management of the licensing program. Persons or agencies with whom this information may be shared include:

CITY, COUNTY, AND STATE PERSONNEL INVOLVED IN DETERMINING YOUR ELIGIBILITY, CONTRACTED PUBLIC AUDITORS, AND THOSE INDIVIDUALS TO WHOM YOU GIVE YOUR EXPRESS WRITTEN PERMISSION.

Unless otherwise authorized by state statute or federal law, other government agencies utilizing the reported private data must also treat the information private.

You may wish to exercise your rights as contained in the Minnesota Government Data Practices Act. These rights include:

**THE RIGHT TO SEE AND OBTAIN COPIES OF THE DATA MAINTAINED ON YOU.
THE RIGHT TO BE TOLD THE CONTENTS AND MEANING OF THE DATA.
THE RIGHT TO CONTEST THE ACCURACY AND COMPLETENESS OF THE DATA.**

To exercise these rights, contact the City Clerk’s Office, Room135, City Hall, Rochester, Mn. 55904

I HAVE READ AND UNDERSTAND THE ABOVE INFORMATION REGARDING MY RIGHTS AS A SUBJECT OF GOVERNMENT DATA.

(Signature of Data Subject)

(Date)

White Copy - City Clerk's Office

Buff Copy - Applicant