

City of Minneapolis Licenses and Consumer Services

505 Fourth Ave. S., Room 220 Minneapolis, MN 55415 Telephone: 612-673-2080 www.minneapolismn.gov/businesslicenses For Office Use Only

AP: BLAmend/ AmendPln MCO: 362.100, 363.100, 366.110 Adm Issuance: No

License Application: Amending Your Business Plan

Definition: The Minneapolis Code of Ordinances, Chapters 259.30 and 362.120, require new license applicants to submit a business plan describing how you plan to run your business. An amended business plan is required when you make any significant change in your operations. Examples include changing hours or adding a bar in an outdoor area. This amended business plan must be submitted and approved by the Minneapolis City Council before you can make any changes. Violation of a business plan may result in a suspension, revocation, non-renewal or a fine. There is not fee for submitting this application.

Application Dequirements

If you have questions, send an email to businesslicenses@minneapolismn.gov or call 612-673-2080.

	1. Application requirements				
1.	Complete the application and include all the requirements listed below. Incomplete applications may be returned. You may send your application by email (businesslicenses@minneapolismn.gov), US mail, or drop it off at our office.				
2.	Alcohol License Change Form (Form #1)				
3.	Amended Business Plan (Form #2)				
4.	Floor Plan: Attach an 8.5" by 11", scaled diagram. Include the square footage, interior and outdoor areas with changes highlighted. This is not required if these are no physical changes to your premises.				
2. Additional Information					
1. 2.					

- 3. For reasonable accommodations or alternative formats, please call us at 612-673-2080 or send us an email at businesslicenses@minneapolismn.gov. Individuals who are deaf or hard of hearing can use a relay service to call 311 at 612-673-3000.
- 4. Information in other languages: Para asistencia 612-673-2700. Rau kev pab 612-673-2800. Hadii aad Caawimaad u baahantahay 612-673-3500.

	1. Type of License Change					
Amending a Business Plan	New Corporate Officer					
Corporate Name Change	New Manager					
Corporate Shares Purchase	New Shareholder/Partner					
Downgrading Entertainment Class	Special All Night Bowling /Pool/ Billiards					
Downgrading License Type	Special Late Night Food					
Expansion of Premises	Upgrading Entertainment Class					
Internal Transfer of Shares	Upgrading License Type					
2. Background Information						
I,, as Owner Partner, request the following detailed description on behalf of: (Legal Corporation Name of Business)						
Business Name (DBA)	usiness Address					
Business E-mail Address	ersonal E-mail Address					
Business Telephone Number Cell Phone Number	ype and Class of License(s) Currently Held					
Interior Expansion: New Seating Capacity:	New Fire Occupancy: or N/A					
Exterior Expansion: New Seating Capacity:	New Total Customer Capacity: or N/A					
3. Verification						
A signature is required. I have read and agree to the Terms and Conditions for electronic signatures, records and payment. I certify or declare under penalty of perjury under the laws of the State of Minnesota that the information on this application, checklist, and attached documents is true and correct. All information given is subject to verification by the State of Minnesota. I understand that false information may result in the denial, suspension, or revocation of my business license. By typing your name, you are electronically signing this application.						
·	unlication					

Amended Business Plans

Attach a typed report describing in detail changes to your business operations. You may attach extra documents to your report.

your report.
 1. Alcohol Server Training Plan. Describe staff training that includes: Name of trainer Topics covered Ongoing training program Policy for carding and the use of electronic ID Scanners Reward and discipline policy for serving alcohol to minors and Self-audits Our website has for more information about Alcohol Service Resources. No changes.
 Safety. Attach your Police Safety Plan Review Form to help prevent illegal behaviors and disorderly customers at your business, parking area, and neighborhood. No changes.
Noise. Attach your <u>Sound Management Plan</u> which details how you will manage sound from your business. A Sound Plan is not required for Off Sale Liquor stores.No changes.
4. Litter Removal. You are required to clean litter within a 100 foot radius from your business. Describe your plan for litter, graffiti, and garbage. Include staff and hours assigned and plans during the warm weather months. No changes.
 5. Entertainment. Describe the following: type of entertainment at your business days and hours of the entertainment and age group which the entertainment is directed No changes.
Team Sponsorships. Tell us the types of teams you may sponsor: softball, broomball, soccer, rugby, football, or other competitive sports.No changes.
 7. Hours of Operation. Specify the hours for every day of the week Include both inside and outside hours No changes.
 8. Food Service. List the hours of full food service and reduced food service Include the staffing model of your kitchen No changes.
9. Charitable Gambling Activities. Identify the types of games, hours, gambling manager and name of charity.No changes.
10. Applicant's Experience and Background with Liquor, Restaurant or Retail Sales. Include a resume or summary of work experience.No changes.

11. Advertising. Attach a copy of all the sites you tents, etc.No changes.	will advertise, such as social media	, website, flyers, coupons, table				
 12. Promoters. If you plan to work with promoters, you must have a written signed contract that includes the following: Statement of truth in advertising Cancellation rights if contract is not followed Promoter contact information Submit a sample contract. Signed contracts must be made available to licensing official upon request. No changes. 						
Acknowledgement and Agreement						
I, (print name), an authorized corporate officer, partner or own acknowledge and agree to the following:		r, partner or owner, hereby				
 □ The attached business plan is a true and correct; and □ Any material change in the business plan must be submitted to an approved by the Business Licenses □ Division before implementation; and □ Violation of this business plan may result in suspension, revocation, or refusal to renew my license or in a civil fine determined by the Minneapolis City Council. □ I have read and agree to the Terms and Conditions for electronic signatures. By typing your name, you are electronically signing this application. 						
Signature of Applicant:	Title:	Date:				