



City of Minneapolis
Licenses and Consumer Services
 350 South 5th Street – Room 1
 Minneapolis, MN 55415-1391
 Phone: 612-673-2080
 Fax: 612-673-3399 TTY: 612-673-2157
www.minneapolismn.gov/business-licensing

For Office Use Only
 AP: BLAmend
 MCO: 259.30; 362.50;
 362.120
 Adm Issuance: No

License Application Guidelines and Checklist

**Application Type:
 Amending a Business Plan
 or
 Downgrading a License (Entertainment)**

The Minneapolis Code of Ordinances (MCO), Chapters 259.30 and 362.120 require new license applicants to provide a business plan which sets forth, in detail, the manner in which the licensed business will be operated. Any material change in the Business Plan must be submitted to and approved by the Minneapolis City Council prior to implementation. Violation of a Business Plan may result in suspension, revocation, refusal to renew the license, or a civil fine as determined by the Minneapolis City Council. This application may be used when an establishment chooses to downgrade their license/class of entertainment, modify their hours of operation, or add a bar to their outdoor area, for example.

Staff Initials	Application Checklist
<input type="checkbox"/>	1. Supplemental Change Form (Form #1)
<input type="checkbox"/>	2. Amended Business Plan for Beverage Alcohol (Form #2)
<input type="checkbox"/>	3. Attach an 8 1/2" x 11" drawing of the premises including both the interior and outdoor areas with changes highlighted. See Sample Form #3. <input type="checkbox"/> Not required if there are no physical changes to the premises.
<input type="checkbox"/>	4. _____ Fee

Additional Information

1. Your License Application

- a. Incomplete applications will be returned.
- b. All applications must be signed by the owner.
- c. No license will be issued for a period longer than one year.
- d. Licenses are not transferable.
- e. Make a duplicate copy of this packet for your personal records before submitting.
- f. [Minnesota Sales Tax ID Number](#) or 651-296-6181.
- g. If you are applying for multiple licenses, applications may be combined. Talk to Licenses' Staff at 300 Public Service Center.

2. Information in Other Languages: Para asistencia 612-673-2700 - Rau kev pab 612-673-2800 - Hadio aad Caawimaad u baahantahay 612-673-3500.



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#1

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License #: _____
 CSR: _____
 Fee: \$ _____
 Date: _____
 Inspector: _____
 MPD File #: _____

Supplemental Change Form

TYPE OF LICENSE CHANGE		
<input type="checkbox"/> Amending a Business Plan/Downgrade	<input type="checkbox"/> Internal Transfer of Shares	<input type="checkbox"/> Special All Night Bowling/Pool/Billiards
<input type="checkbox"/> Corporate Stock Purchase	<input type="checkbox"/> New Corporate Officer	<input type="checkbox"/> Special Late Night Food
<input type="checkbox"/> Downgrading License(Entertainment)	<input type="checkbox"/> New Manager	<input type="checkbox"/> Upgrading License (Entertainment)
<input type="checkbox"/> Expansion of Premises	<input type="checkbox"/> New Shareholder/Partner	<input type="checkbox"/>
BACKGROUND INFORMATION		
I, _____, as <input type="checkbox"/> Owner <input type="checkbox"/> Partner, on behalf of _____ <div style="text-align: right; font-size: small;">(Legal Corporation Name of Business)</div> request the following (detailed description): 		
Business Name (DBA)		Business Address
Business E-mail Address		Alternative E-mail Address
Business Telephone Number	Cell Phone Number	Type and Class of License Currently Held
VERIFICATION		
SIGNATURE _____ TITLE _____ DATE _____		
THIS SECTION IS TO BE COMPLETED BY THE CITY OF MINNEAPOLIS		
The Minneapolis Police Department Recommends: <input type="checkbox"/> Approve <input type="checkbox"/> Deny Signature of Minneapolis Police Department Representative _____ Comments:		
The Minneapolis License Department Recommends: <input type="checkbox"/> Approve <input type="checkbox"/> Deny Signature of Minneapolis License Department Representative _____ Comments:		

OFFICERS, DIRECTORS, and/or STOCKHOLDERS

Attach additional sheets if necessary

Publicly held corporations need list only shareholders with 10 percent of more corporate stock.

Name	Address	Telephone	Title	# Shares or % of Ownership

I, _____ the undersigned, do hereby declare under the penalty of perjury that as of this date, the
 (print name)
 following is a true and complete list of all officers, directors, and stockholders of this corporation or partners of this partnership.

Signature _____ Title _____ Date _____

Note: If there has been any change listed above since your last application, you must attach a certified copy of the minutes of the meeting as documentation.

Amended Business Plan - Establishments with Beverage Alcohol

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.

Here are some links to alcohol server training resources: [Alcohol Service Plans](#), [Training Programs](#), and [ID scanners](#).

No changes.

2. Police Department Security Plan

Complete and attach a signed Police Department Security Plan Review (attached) and any supporting documentation. The local Police Precinct will review the security portion of your business plan which addresses how you will take appropriate action to prevent illegal conduct from anyone on your business premises and/or parking areas. Here is a link with guidelines to [Develop a Security Plan](#).

No changes.

3. Noise Management Plan

Attach a Noise Management Plan and any supporting documentation using the requirements listed on attached document which describes how you will address potential noise issues.

No changes.

4. Entertainment

Prepare a detailed statement of the nature of entertainment presented in your establishment

Days and hours of the entertainment and

The age group at which the entertainment is directed.

No changes.

5. Community Impact Plan

Describe how your establishment will be proactive in preventing negative secondary effects directly attributable to the existence of the business.

Describe how the applicant will maintain the orderly appearance and operation of the premises with respect to litter, graffiti and refuse control. Include hours staff will be assigned.

Indicate the types of teams you may sponsor: softball, broomball, soccer, rugby, football, or other competitive sports.

No changes.

6. Hours of Operation

Specify the hours for every day of the week

Include both inside and outside hours.

No changes.

7. Food Service

- List all food (menu with prices) that you will prepare and/or serve
- Include hours of full food service and reduced food service.
- Include the staffing model of the kitchen service.
- Describe Kitchen, Bar and Cooking Equipment; and/or attach Food Plan Review.
- No changes.

8. Charitable Gambling Activities

- Identify the types of games, hours, gambling manager and name of charity.
- No changes.

9. Applicant's Experience and Background with Liquor, Restaurant or Retail Sales

- Include a resume or summary of work experience.
- No changes.

10. Promoters – If you will 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 will be made available to licensing official upon request.
- No changes.

11. Advertising

- Attach a copy of all the sites you will advertise, such as social media, website, flyers, coupons, table tents, etc.
- No changes.

ACKNOWLEDGEMENT AND AGREEMENT

I, (print name) _____, an authorized corporate officer, partner or owner, hereby acknowledge and agree to the following:

- the attached business plan addresses all items listed above, includes complete documentation, and is a true and correct reflection of the undersigned's intentions;
- any material change in the business plan must be submitted to and approved by the Minneapolis City Council before implementation;
- violation of this business plan may result in suspension, revocation, or refusal to renew the license or in a civil fine as determined by the Minneapolis City Council.

Signature _____ Title _____ Date _____

Floor Plan Standards

Every application for a restaurant or beverage alcohol license must include a floor plan. A sample is provided below. Attach an 8 ½" x 11" diagram of both your **INTERIOR** and **EXTERIOR** premises. Include dimensions. Hand drawn floor plans will be accepted if they are legible. Drawings for outdoor areas may be on a separate sheet. If the outdoor area is located on the public sidewalk, drawings must include additional features and a [Sidewalk Café License](#) is required. Include the following on your plan:

1. Business name (DBA), building name, address, contact person and telephone number
2. The function of the space including the dimensions and square footage of the area in which food will be served. Label mezzanine levels, fixed seating and egress convergence.
3. All doors, windows and other openings as well as any building feature requiring emergency access
4. The occupant load calculated by the designer
5. The number and size of tables
6. The number of chairs and their location to the tables. Seating capacity needs to consistent with the number of patrons stated in your license application.
7. Ensure that your total bar area does not exceed the area that is allowed for your type of license. Include square footage (no more than 30% or 20%). Bar Area: One or more spaces in an establishment designed and utilized primarily for the consumption of alcohol or providing entertainment. This space would include a dance floor area, stage, game room or any space that is undefined or does not provide for seated food service. Outdoor bar areas may be calculated separately from indoor bar areas and considerations may be made for outdoor sporting courts such as bocce ball, volleyball or similar features.

Outdoor Area Diagrams shall also include the following, in addition to the information above:

1. All outdoor areas accessible to and usable by building and non-building occupants including yards, patios, cafes, courts, dog areas, rooftops and other similar outdoor areas
2. Umbrellas, planters, stanchions, fences, lights, signs, etc.
3. Planted, groomed or landscaped areas adjacent to the outdoor area
4. Heating elements and location of storage area for gas cylinders
5. There must be 5% or a minimum of one table which is ADA accessible.
6. Access and Egress: Your business plan should describe how this will be controlled.

DBA: Living the Dream
Address: 1313 Mockingbird Lane
Building Name: Empire State Contact
Applicant: Doe John
Telephone: 612-555-5555

Interior

Sq Footage: 6000 sq ft
Dining Sq Footage: 5000 sq ft
Seating Capacity: 53
6 Tables (4' x 4') – all accessible
24 Chairs
9 Booths (2' x 4') w/ seating for 18
Bar Area (800 sq ft)
Occupant Load: 60

Exterior

Sq Footage: 2000 sq ft
Dining Sq Footage: 1800 sq ft
Seating Capacity: 24
6 Tables (4' x 4') – all accessible
24 Chairs
Occupant Load: 40
Prepared by: M. I. Tech
The Architects, LLC

