

### 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: BLGeneral/ BLExtendHr MCO: 309 Adm Issuance: No

# **License Application: Extended Hours of Operation**

Use this application if you do not have a Minneapolis business license. If your business has a Minneapolis license, use the <a href="Extended Hours - Add a license application">Extended Hours - Add a license application</a> available on our website.

**Definition:** Any business in the city of Minneapolis which is open to the public earlier or later than authorized hours as defined by Chapter 259.300 of the Minneapolis Code of Ordinances.

A public hearing is required before you can operate during your extended hours. Your <u>License Inspector</u> will schedule this.

The following do not need an Extended Hours License: hospitals, birth centers, hotels, religious institutions, colleges, universities, residential use buildings, licensed parking facilities, and businesses which sell alcoholic beverages.

If you have questions, you may send an email to <u>businesslicenses@minneapolismn.gov</u>, contact your <u>License Inspector</u>, or call our office at 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 ( <a href="mailto:businesslicenses@minneapolismn.gov">businesslicenses@minneapolismn.gov</a> ), US mail, or drop it
	off at our office.
2.	There is a fee, an investigative fee, plus a new license processing charge, for this application. You can pay by
	Cash: Drop off your application at our office.
	Check: Mail or drop off your application at our office.
	Credit Card: Mail, drop off or email your application to <a href="mailto:businesslicenses@minneapolismn.gov">businesslicenses@minneapolismn.gov</a> . <b>Do not add</b>
	your credit card information on this application. We will call you to securely charge your credit card.
3.	Business Plan for Extended Hours (Form #1)
	Police Safety Plan Review Form (Form #2)
	Sound Management Plan (Form #3)
4.	Attach a copy of the Lease Agreement, Bill of Sale, Purchase Agreement, Contract for Deed, Loan
	Agreements, and/or Promissory Notes for the business and/or building.
5.	Notification: You need to send a letter to your City Council Member, Neighborhood Organization, and
	Business Association(s). Tell them your business name, address and type of license; your name, email address
	and telephone number; and include your Business Plan.   Attach a copy of your letters or emails.

2. Applicant Information			
Legal Company Name	Business Name/DBA		
Name (Last, First, MI)	Owner Partner On Site Manager		
Business Address	City	State	Zip Code
Mailing Address (if different than business address)	City	State	Zip Code
E-mail Address	Cell Phone Number	mber Business Telephone Number	
Minnesota Sales Tax ID Number (Required)	Social Security Number or Indiv	idual Tax ID (ITIN)	(Required)
Type of Ownership: Corporation LLC Sole Proprietor Partnership Non-Profit	Date of Incorporation	State of Inco	rporation
Is this business publicly traded?  Yes  No	Proposed Opening Date:		
3. Business I	nformation		
License(s) Requested:			
Starting a new business in a new building.	Adding a new license t	to an existing bu	usiness.
(New Business)	(New License)		
Starting a new business in an existing building.	Taking over an existing	g business. (Nev	v Owner)
(New Business) Name of Previous Tenant:	Name of existing business:		
Changing Equipment.	Remodeling Only.	<del></del>	
4. Ow	ners		
List all owners and partners. Ownership must add up to	o 100%. Attach additional sh	neets if necessar	·y.
Full Name: Last, First, Middle		Telephone	•
Home Address	City	State	Zip
Title	Date of Birth	Ownership %	
Full Name: Last, First, Middle	L .	Telephone	
Home Address	City	State	Zip
Title	Date of Birth	Ownership %	
Full Name: Last, First, Middle		Telephone	
Home Address	City	State	Zip
Title	Date of Birth	Ownership %	

Full Name: Last, First, Middle		Telephone	
Home Address	City	State	Zip
Title	Date of Birth	Ownership	%
5. Company (	Operations		
Days and Hours of Operation:		Gross Square for Business U	_
Give us a description of the services and products at your business.			
You may not have any live entertainment. You may have radio, television, or electronically reproduced music. Music/noise cannot be amplified. Describe your entertainment:			
List any licenses you currently have or previously held in Minneapolis (business or individual).  Have you ever had a business license denied or revoked by any government entity?  Yes  No If Yes, Indicate the Date of Denial/Revocation, Government Agency, and Reason for Denial or Revocation.			
Are you planning or have you completed any construction or remodeling? Yes No	Name of Contractor or Bui	lding Manager	
Explain the scope of the remodeling or construction.			
6. Workers Compensation			
Workers' Compensation Company	Policy Number	Dates of Cove	rage
I certify that I am not required to carry workers compensation insurance because I am self-insured. I am the sole proprietor and I have no employees. I have no employees who are covered by workers compensation law. Only employees who are specifically exempted by statute are not covered by the workers compensation law. These include spouse, parents, and children regardless of age. All other workers whose work is controllable by the employer must be covered.			

	7. Verification			
The City of Minneapolis uses the information		•		
	You are not legally required to provide this information. If you refuse, we cannot approve your application.			
MN Statute 270C.72 requires your Minnesot		•		
Individual Tax ID Number. These may be give	en to the Minnesota Commissione	r of Revenue if requested.		
After we approve your license, all information except your Social Security Number is public (MN Statutes,				
Chapter 13).				
Α	signature is required.			
I have read and agree to the Terms and C	Conditions for electronic signatures	s, records and payment.		
I, (print name)	, ce	rtify or declare under penalty		
of perjury under the laws of the State of Mir	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 i	information is subject to verification	on 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.			
Signature of Applicant	Title	Date		

# 8. Additional Information

- 1. No license will be issued for longer than one year.
- 2. You cannot transfer your license to any other person or location.
- 3. For reasonable accommodations or alternative formats, please call us at 612-673-2080 or send an email to <a href="mailto:businesslicenses@minneapolismn.gov">businesslicenses@minneapolismn.gov</a>. Individuals who are deaf or hard of hearing can use a relay service by calling 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.

# **Business Plan Requirements for Extended Hours**

The Minneapolis Code of Ordinances, Chapter <u>309.40</u>, requires applicants to describe in detail your business operations. Attach a typed report that includes all the following items. You may attach extra documents to your report.

1.	Hours of Operation  Hours for every day of the week Inside and outside hours
2.	Safety  Attach your Police Safety Plan Review Form to help prevent illegal behaviors and disorderly customers at your business, parking area, and neighborhood.
3.	Noise  Attach your Sound Management Plan which details how you will manage sound from your business.
4.	Litter Removal  You are required to clean litter within a 100 foot radius from your business. Describe your plans for litter, graffiti, and garbage. Include staff and hours assigned and plans during the warm weather months.
5.	<ul> <li>Entertainment</li> <li>Describe the following:</li> <li>type of entertainment at your business</li> <li>days and hours of the entertainment and</li> <li>age group which the entertainment is directed</li> </ul>
	Acknowledgement and Agreement
	(print_name), an authorized corporate officer, partner or owner, hereby knowledge and agree to the following:
	<ul> <li>☐ The attached business plan is a true and correct; and</li> <li>☐ Any material change in the business plan must be submitted to an approved by the Business Licenses</li> <li>☐ Division before implementation; and</li> <li>☐ 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.</li> <li>☐ I have read and agree to the Terms and Conditions for electronic signatures.</li> <li>☐ typing your name, you are electronically signing this application.</li> </ul>
Si	gnature of Applicant: Date: Title: Date:

#### City of Minneapolis Licenses and Consumer Services

CITY OF POLICE

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# Police Department Safety Plan Review for Alcohol Businesses or Extended Hours Licenses

All businesses licensed by the City of Minneapolis must provide adequate security to prevent criminal activity, loitering, lurking and disorderly conduct at their business, including parking areas, per MCO 259.250 (4). Additionally, all alcohol license holders must prevent negative secondary effects directly attributable to the existence of their business, per MCO 360.55.

Not providing adequate security to make your business safe could have an impact on the success of your business and your ability to continue to operate.

Adequate security is not "one size fits all". Even a well-vetted plan does not fit every circumstance. The following considerations and major components of a safety plan were developed in collaboration with successful business owners, the Minneapolis Police Department, the Office of Violence Prevention, and the Minnesota Licensed Beverage Association.

It is important that this review happens with the Minneapolis Police Department. Business owners meeting face to face with Police representatives is a way to develop a positive connection.

inis portion to be completed by Applicant		
Name of Business:	Address:	_
Contact Person:	Phone Number:	

#### **Business Safety Plan Requirements and Process**

- 1. Please review the following components of a business safety plan.
- 2. Draft a plan that will best ensure the safety of your business, customers and the surrounding community, according to your business model.
- 3. Schedule a review of your plan by MPD Personnel to be determined by the Precinct Commander. The review should occur at the proposed business, if possible.
- 4. You must include copies of your License Application, Business Plan, Safety Plan and Sound Plan with this form. A Sound Plan is not required for off sale alcohol licenses.
- 5. Request peer support from a member of the business community by contacting your <u>Business</u> <u>Association</u>.

#### **Business Safety Plan**

Based on industry best practices, a successful business will have a safety plan that includes the following components:

#### A. Staffing and Procedures

Definition: Staffing for your business includes the following: Staff levels, different job titles and job expectations. This will include when the business is operating and closed. Please focus on staffing related to providing a safe environment for your customers, staff, and community.

- 1. Who will perform hiring? Will you perform criminal background checks to inform hiring decisions? Will each job have a detailed job description? Will staff, especially management, have experience in industry or training?
- 2. Will you have dedicated safety personnel? Will you hire contracted safety personnel? Or, will you have regular in-house staff perform safety duties? If so, what levels during the week and during the weekend? Will you change this during special events or when you increase your occupancy? Will safety personnel be recognizable/wear uniforms?
- 3. What will your scheduling plan look like? Will it differ from summer to winter? Will special events at the business or in the city impact your staffing numbers? Will there be managers and/or supervisors? Will you cross train your staff to perform many duties?
- 4. Duties: Inside the premises? Outside the premises? Frequency of rounds? How will you address loitering? Will you have dedicated parking lot security staff if you have a parking lot? Will you work with neighboring parking lots that your customers use? This can help ensure safety.
- 5. Security Philosophy of Respectful Enforcement considerations: Will you offer regular de-escalation training? What procedures will you follow if it is necessary to escort a patron from the premises? Will your staff work in teams? \*\*Please note that if you hire an outside professional security company, they must be licensed by the Minnesota Board of Private Detective and Protective Agent Services.
- 6. Incident Logs: How will you communicate policies, incidents, and updates to employees?
- 7. Do you plan to create a No Admittance List? Who has the responsibility for managing the list? What will be your criteria for adding or removing someone? Will you share this list with Business Licensing?
- 8. Add to your plan how your business will follow Hennepin County curfew times.

#### **B. Exit Strategies**

Definition: How you will move customers out of and away from your business before the time you can no longer have them there? This could be 1:30am, 2:30am, or the time your conditions need you to close.

- 1. Before closing time: Will you inform customers in advance? Alter lights and/or music? At what time will you stop alcohol and/or food service?
- 2. Closing Time: Will you provide escorts for customers and/or staff? Will you be monitoring your parking lot for illegal activities and/or disturbances? Will your business take part in traffic management?
- 3. Will you use valet services? Contracted or in-house? Make sure your safety plan includes protecting customers during high volume closing times. In some busy areas of the city, grid-lock can occur at closing time. This could be due to your valet service. How will you work with neighbors to assure access and safety for the neighborhood?
- 4. What are your plans for an emergency evacuation, sheltering in place, and an active shooter?

#### C. Training

Definition: Training your staff on your safety plan can be the best way to make sure they follow it. Describe staff training that includes the following:

- staff meetings
- formal presentations
- name of trainer (or training company)
- topics covered
- ongoing training program (and for new-hires)
- policy for carding
- use of electronic ID scanners
- reward/discipline policy for staff that have served alcohol to minors
- self-audits.

The following information is on our website:

**Alcohol Server Training** 

<u>De-escalation Presentation Prepared by the Barbara Schneider Foundation (Dec 7, 2020)</u>
Trespassing Presentation Prepared by City Attorney's Office and Trespass Notice Form (Nov 18, 2020)

Other types of training can include, but are not limited to:

- racial equity
- sensitivity
- hospitality
- bystander intervention
- sexual harassment
- any others that could help you and your staff create a safe and welcoming place for patrons to visit

#### D. Crime Prevention Through Environmental Design (CPTED)

Definition: CPTED uses design to discourage crime and promote building security. Architects design buildings/properties to hold up to the elements and natural disasters. We can also design them to prevent crime.

- 1. Having enough interior and exterior lighting levels can promote safety. What lighting will your business provide?
- 2. Having video surveillance can help protect your business from crime. It can also help support Police investigating crimes that may happen there or nearby. What video surveillance will your business provide?
- 3. Natural sight lines allow for you to see someone or something from any given point in a room. It can also add to the safety of your business. Consider how much of the business your staff can see at any given point.
- 4. Make sure that private spaces are only accessible by staff to prevent a crime from happening in them.

#### E. Peer and Professional Support

Definition: Peers are other businesses willing to offer guidance to your new business. Professional support would be who you hire or contract to help keep your business safe.

- 1. Who will be your business peer support?
- 2. Will you need extra professional support? Professional Security? Part-time Police Officers?

#### F. Regular Review

Definition: Safety plan review should occur at regular intervals of time to keep it fresh and up to date.

- 1. How often will you review your safety plan? Annually? Proactively before a special event? Reactively after an incident?
- 2. When you perform a self-review, will you keep records of this so that you can share it with others if you decide to do so?

#### G. Large Crowds Arriving at Once

Definition: If an event or bus let out at your business, you could have a large crowd arriving at once, that could overwhelm your staff.

1. What is your occupancy?

applications.

- 2. Will you allow party buses or pedal pubs to drop off a large crowd of people at your business? If so, how will you handle the crowd entering your business?
- 3. If applicable, how will your business handle let outs from concerts or games?

Police Representative	Badge #
Comments:	
MPD Signature	Date
Applicant Signature	Date

The Minneapolis Police Department does not approve safety plans or endorse license applicants or

This portion to be completed by MPD

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# **Sound Management Plan Requirements**

An effective Sound Plan helps you balance your entertainment goals with those of the community. Not all questions apply to your business. Answer all that are relevant both indoor and outdoor.

#### 1. Speakers

Describe the position of speakers to deflect or absorb excessive noise.

How will you minimize low-frequency music beats?

What time will your turn down music and what time you turn off speakers?

#### 2. Closing Time

When will you stop serving alcohol? Turn up lights? Turn down music?

What time you will seat your last customers? How will you tell customers of closing time? What time will you ask customers to leave?

How will you manage noisy customers?

How will you remind customers to lower their voices to respect residents? This includes customers who park on residential streets.

#### 3. Outdoor Capacity

List the capacity of your outdoor area.

Describe how you will manage the area to prevent over occupancy.

Describe how the seating design will minimize or deflect excessive sound.

#### 4. Equipment

Describe your sound metering equipment and/or music systems with self-regulators. How do you plan to use them?

#### 5. Staff

Describe sound management training for managers, supervisors, bartenders, hosts, servers, and security staff. What are their duties, including the frequency of rounds?

Describe how you will remind, relocate, and/or remove noisy customers?

Describe your community outreach. This can include neighborhood association meetings or downtown LINC meetings, for example.

#### 6. Special Events

What are your plans for special events in the city?

#### 7. Complaints

Describe how you will address sound complaints? This can include a telephone number other than your business number for residents to call for sound concerns.

#### 8. Architectural Design or Enhancements

Describe the use of sound blocking walls, fences, and/or landscape.

How you plan to direct sound away from occupied buildings.

# Additional Resources For more information about resources and solutions, send an email to EnvServicesInfo@minneapolismn.gov

or call 612-673-3867. Here are common concerns.

1. Do you plan to use an outdoor area? No No

2. Is your seating capacity over 200 people? No

3. Will you have amplified sound? No

4. Are you located in a residential area? No

5. Do customers tend to all leave at closing time? No

6. Do customers park in residential areas? No

7. Is your mechanical equipment located within 100 feet of a residential area? No

8. Do you have a routine maintenance schedule for mechanical equipment? No

9. Have you received complaints about sound? No

10. Do you want to learn more about sound management plans? Products to measure and regulate sound?

This includes sound engineers, sound meters, for example. | Yes | No