

City of Minneapolis Licenses and Consumer Services

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

Expiration: Sept 1
AP: BLMotor/GasFill
MCO: 287
Adm Issuance: Yes

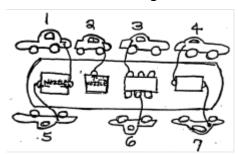
License Application: Gas Station

Definition: A gasoline filling station sells gasoline or other fuels to the public. A license is not required where tanks or pumps are for private use only.

If you have a car wash, you do not need a Car Wash license.

If you are checking fluid levels, replacing filters, and/or providing other minor services, you do not need a Repair Garage license.

Your license fee is based on the number of simultaneous fueling locations.



(7) simultaneous fueling locations

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.
2.	There is a 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 businesslicenses@minneapolismn.gov . Do not
	add your credit card information on this application. We will call you to securely charge your credit card.
3.	Attach a list of simultaneous fueling locations.
4.	Sewer Availability Charge (SAC): The Metropolitan Council charges a fee for new or upgraded sewer
	connections. You can find out online if a SAC is due for your address. If you have questions, call 612-673-3000
	or email <u>development@minneapolismn.gov</u> .
	Attach a copy of your SAC Determination Letter.
5.	<u>Surveillance Cameras</u> : Confectionary Stores, Gasoline Filling Stations, Grocery Stores, Off-Sale Liquor Stores,
	and Tobacco Dealers are required to have a surveillance camera operating in their stores during business
	hours.

2. Additional Licenses Would you like to apply for another license? 1. Check all that apply and attach the documents listed. You do not have to attach duplicate copies. 2. You may not need to complete any additional applications. 3. You will be charged a fee for each additional license. If you have any questions, send an email to businesslicenses@minneapolismn.gov or call 612-673-2080. Confectionery/Convenience Store: The sale of ready-to-eat, single-serving, pre-packaged snack items and beverages. (License Fee) Attach the following: 8.5" x 11" scaled Floor Plan A copy of your Minnesota Department of Health Certified Food Protection Manager certificate A copy of the menu and/or list of food items for sale. Attach a Data Privacy Advisory: This is required for the applicant and each owner and/or partner. Include a copy of your driver's license and background report. This report must be dated within 30 days of receipt of this application and is available from the State of Minnesota Bureau of Criminal Apprehension at 1430 Maryland Ave E. St. Paul, MN 55106 or at 651-793-2400. Here is a list of all state telephone numbers. No one can have a conviction in the last five (5) years related to operating a food business. This also can include food subsidy program or controlled substances violation. **Food Plan Requirement:** Are you doing any of the following: Starting a food business at a location that NEVER had a license for food business Adding or replacing equipment that requires gas, plumbing or mechanical connections Adding or replacing ventless cooking equipment or a ventless hood If you checked any of the boxes above, you MUST complete and email a Food Plan Review Form to <u>development@minneapolismn.gov</u>. There is a <u>fee</u> for this review. *This is a separate review and we cannot* approve your license until it is completed. Permits are required for any equipment changes or work requiring gas, plumbing or mechanical connections. If you have questions, call 612-673-3000 or email development@minneapolismn.gov. **Grocery Store**: The sale of food and food accessories. (License Fee) Attach the following: 8.5" x 11" scaled Floor Plan A copy of your Minnesota Department of Health Certified Food Protection Manager certificate A copy of the menu and/or list of food items for sale Attach a Data Privacy Advisory: This is required for the applicant and each owner and/or partner. Include a copy of your driver's license and background report. This report must be dated within 30 days of receipt of this application and is available from the State of Minnesota Bureau of Criminal Apprehension at 1430 Maryland Ave E. St. Paul, MN 55106 or at 651-793-2400. Here is a list of all state telephone numbers. No one can have a conviction in the last five (5) years related to operating a food business. This also can include food subsidy program or controlled substances violation. **Food Plan Requirement:** Are you doing any of the following: Starting a food business at a location that NEVER had a license for food business Adding or replacing equipment that requires gas, plumbing or mechanical connections Adding or replacing ventless cooking equipment or a ventless hood If you checked any of the boxes above, you MUST complete and email a Food Plan Review Form to <u>development@minneapolismn.gov</u>. There is a <u>fee</u> for this review. *This is a separate review and we cannot* approve your license until it is completed. Permits are required for any equipment changes or work requiring gas, plumbing or mechanical connections. If you have questions, call 612-673-3000 or email development@minneapolismn.gov. Off Sale Beer: The sale of 3.2 beer in original packages for drinking offsite the business. Examples: Grocery Store, Convenience Store, and/or Gas Station. (License Fee) Complete and attach an Off Sale Beer Application.

Repair Garage: The repair of motor vehicles. This includes mechanical, service, maintenance, diagnostics,					
bodywork, and/or parts. A repair garage license is not required if you are only checking fluid levels, replacing					
filters or other minor services. (<u>License Fee</u>)					
Attach an Insurance Certificate with \$100,000/\$300,000 personal injury or death and \$10,000 for property					
damage.					
Restaurant/Food Manufacturer: A food business preparing food and beverages for customers. A license					
is required for sit-down restaurants, fast food restaurants, and coffee shops. (License Fee) Attach the					
following:					
8.5" x 11" scaled Floor Plan					
A copy of your Minnesota Department of Health Certified Food Protection Manager certificate					
A copy of the menu and/or list of food items for sale					
Attach a Data Privacy Advisory: This is required for the applicant and each owner and/or partner. Include a					
copy of your driver's license and background report. This report must be dated within 30 days of receipt of					
this application and is available from the State of Minnesota Bureau of Criminal Apprehension at 1430					
Maryland Ave E. St. Paul, MN 55106 or at 651-793-2400. Here is a list of all state telephone numbers. No one					
can have a conviction in the last five (5) years related to operating a food business. This also can include food					
subsidy program or controlled substances violation.					
Food Plan Requirement: Are you doing any of the following:					
Starting a food business at a location that NEVER had a license for food business					
Adding or replacing equipment that requires gas, plumbing or mechanical connections					
Adding or replacing ventless cooking equipment or a ventless hood					
If you checked any of the boxes above, you MUST complete and email a <u>Food Plan Review Form</u> to					
<u>development@minneapolismn.gov</u> . There is a <u>fee</u> for this review. <i>This is a separate review and we cannot</i>					
approve your license until it is completed.					
Permits are required for any equipment changes or work requiring gas, plumbing or mechanical					
connections. If you have questions, call 612-673-3000 or email development@minneapolismn.gov .					
Tobacco: The sale of tobacco and tobacco products in retail stores. (License Fee)					
Attach a Tobacco Supplemental Information Form.					
Towing Company: Private property towing and car starting. (<u>License Fee</u>)					
Complete and attach a Motor Vehicle/Towing application.					
Vending Machines					
Attach a list with the type of food/items in each machine.					

3. 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 Business Telephone Number					
Minnesota Sales Tax ID Number (Required)	Social Security Number or Individual 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:					
4. Business I	nformation					
License(s) Requested:						
Starting a new business in a new building.	Adding a new license t	o an existing bu	ısiness.			
(New Business)	(New License)					
Starting a new business in an existing building.	Taking over an existing business. (New Owner)					
(New Business) Name of Previous Tenant:	Name of existing business:					
Changing Equipment.	Remodeling Only.					
5. Ow	ners					
List all owners and partners. Ownership must add up to	o 100%. Attach additional sh	neets if necessar	٧.			
Full Name: Last, First, Middle		Telephone	,			
, ,						
Home Address	City	State	Zip			
Title	Date of Birth	Ownership %				
- Hall I am a second						
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	%				
6. Company (Operations						
Days and Hours of Operation:	Gross Square Footage for Business Use:						
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.							
in res, indicate the Date of Demai, Revocation, Government Agency, and Reason for Demai of 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.							
7. Workers Co	mpensation						
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.							

	8. Verification				
The City of Minneapolis uses the information on this application to determine qualifications for a license.					
You are not legally required to provide this information. If you refuse, we cannot approve your application.					
MN Statute 270C.72 requires your Minnesota Tax ID Number and either a Social Security Number or					
Individual Tax ID Number. These may be given to the Minnesota Commissioner of Revenue if requested.					
After we approve your license, all information except your Social Security Number is public (MN Statutes,					
Chapter 13).					
A signature is required.					
I have read and agree to the <u>Terms and Conditions</u> for electronic signatures, records and payment.					
I, (print name)		certify or declare under penalty			
of perjury under the laws of the State of Minne	esota that the information on	this application, checklist, and			
attached documents is true and correct. All information 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 sig	ning this application.				
Signature of Applicant	Title	Date			

9. 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 businesslicenses@minneapolismn.gov. 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.