

License Application Guidelines and Checklist

License Type: Temporary On Sale Liquor or Temporary On Sale Wine License	
<p>Minnesota Statute 340A.404 authorizes this license only to a charitable, religious, or non-profit corporation in existence for three years; a political committee registered under MN Statutes Sec. 10A.14; a brewer who manufacturers less than 3,500 barrels of malt liquor in a year; or a club as defined by MCO 360.10.</p> <p>Minimum distance requirements from schools or churches (300 feet) do not apply to this license as defined in MCO 360.125(3). Temporary licenses for the sale of alcoholic beverages shall not be granted for more than three 4-day events, four 3-day events, six 2-day events, twelve 1-day events, or any combination which exceeds twelve (12) days per calendar year or more than once within any 30 day period to any one organization or location.</p> <p>Wine Tasting Events, as defined by Minnesota Statute 340A.418, are limited to four (4) hours or less.</p> <p>If an application is submitted less than thirty (30) days prior to an event or without sufficient time for staff to review and verify required approvals, the application may not be accepted. An additional late fee will apply.</p> <p>Additional fees may also apply for live and/or outdoor entertainment. A License Inspector will determine this.</p>	
Staff Initials	Application Checklist Applications will not be accepted until all requirements have been satisfied.
	<input type="checkbox"/> 1. City of Minneapolis Temporary On Sale Liquor Application (Form #1)
	<input type="checkbox"/> 2. State of MN Application and Permit for a 1 to 4 Day Temporary On Sale Liquor/Wine License – (Form #2) Upon approval, you will be issued an electronic Buyers Card Number which authorizes you to purchase beverage alcohol from a distributor. The On-Sale Liquor Licensee cannot purchase beverage alcohol for temporary events. www.dps.state.mn.us/alcgamb/alcgamb.aspx .
	<input type="checkbox"/> 3. Attach proof of the Licensed On-Sale Liquor Establishment’s liquor liability insurance covering the event. See Sample Form #3 attached.
	<input type="checkbox"/> 4. Will off-duty police officers provide security for this event? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, attach a Certificate of Liability Insurance (Sample Form #3). This must be furnished by your Insurance Agent with the mandatory changes and the following coverages: <input type="checkbox"/> \$300,000.00 for each accident or occurrence for injury or death and \$5,000.00 property damage <input type="checkbox"/> Or a combined single limit of liability of \$300,000.00 for injury, death or property damage
	<input type="checkbox"/> 5. Additional Permits – Complete and attach Form #4 with your application.
	<input type="checkbox"/> 6. Is this organization a <input type="checkbox"/> charitable, religious, or non-profit organization? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, attach a copy of the non-profit certificate of incorporation or IRS 501(c)(3) letter. <input type="checkbox"/> political committee registered under Minnesota Statute 10A.14? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> microbrewer who manufacturers less than 3.500 barrels per year? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, attach state license. <input type="checkbox"/> club as defined by MCO 360.10? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, attach documentation verifying status.
	<input type="checkbox"/> 7. Attach a copy of the consent of the owner or manager of the premises authorizing use of the area.
	<input type="checkbox"/> 8. Attach a drawing showing the area with scaled dimensions. Indicate how the area will be enclosed, the location of tables and chairs, alcohol serving area, and other important features.
	<input type="checkbox"/> 9. \$ _____ Fee \$ _____ Additional 50% Late Fee if application has been filed less than 30 days prior to the event.
Additional Information	
<p>Your License Application</p> <ul style="list-style-type: none"> a. Incomplete applications will be returned. b. All applications must be signed by an officer. c. Make a duplicate copy of this packet for your personal records before submitting. <p>Hours of Operation – 1 City Hall: Mondays – Thursdays: 8:00 am – 4:00 pm. Fridays: 10:00 am – 4:00 pm.</p> <p>Information in Other Languages: Para asistencia 612-673-2700. Rau kev pab 612-673-2800. Hadii aad Caawimaad u baahantahay 612-673-3500.</p>	



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

#1

For Office Use Only
License # LIC
CSR:
Fee: \$
Date:

Temporary On Sale Liquor/Wine Application

1. BACKGROUND INFORMATION	
Organization Name	What will be Served at the Event: <input type="checkbox"/> Liquor <input type="checkbox"/> Wine <input type="checkbox"/> Strong Beer <input type="checkbox"/> 3.2 Beer <input type="checkbox"/> Food
Contact Person	Cell Phone Number E-mail Address
2. EVENT INFORMATION	
Name of Event	Event Day(s), Date(s) and Time(s)
Estimated TOTAL attendance	
Name of Location for Event	Address of Event
Purpose of the Event	
3. ALCOHOL SERVICE	
Name of On-sale liquor establishment responsible for alcohol service at the event	
Address	License Number
Contact Person	Telephone Number
Date of Alcohol Server Awareness Training	
Will this event be a wine tasting as defined by MN Statute 340A.418? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Will any other individual or organization organize, promote, assist with or receive remuneration from this event? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes, name of individual or organization	Contact Person
Address	Telephone Number
Will your organization receive the majority of the proceeds from the event? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, explain.	
Will the alcoholic beverages be donated for this event? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, state the type and value/amount \$_____
If Yes, name of individual or organization	Contact Person
Address	Telephone Number

4. ENTERTAINMENT

Venue: Indoor Entertainment Outdoor Entertainment No Entertainment

Will there be a Band DJ Speakers # _____ Musicians? Will the entertainment be amplified? Yes No

Describe all types of Entertainment/Activities to be provided at the event. Include indoor and outdoor.

Days/Dates/Times of Entertainment

What type of enclosure will be used for the outdoor area? N/A Indoor Only

Describe Security for the Event:

Has this organization had any temporary liquor, wine, or beer licenses in Minnesota in the past 12 months? Yes No
If Yes, complete the following. (Attach additional sheets if necessary.)

Event / Dates	Event / Dates
1.	2.
3.	4.
5.	6.
7.	8.
9.	10.
11.	12.

5. VERIFICATION

The data you furnish on this application will be used by the City of Minneapolis to assess your qualifications for licensure. Disclosure of this information is voluntary. You are not legally required to provide this data; however, if you fail to do so, the City of Minneapolis may be unable to process this application.

A SIGNATURE IS REQUIRED IN ORDER TO PROCESS THIS APPLICATION

I, (print name) _____, certify or declare under penalty of perjury under the laws of the State of Minnesota that the foregoing is true and correct. All information given is subject to verification by the State of Minnesota.

SIGNATURE OF APPLICANT _____ TITLE _____ DATE _____

THIS SECTION TO BE FILLED OUT BY LICENSE INSPECTOR

This application meets the minimum requirements of MCO 362.35 (liquor) 363.41(wine)

If no, explain:

Number of temporary licenses in this calendar year: _____

Previous issues:

Concerns about this event and resolutions:

Approved hours for the event:

Evacuation Plan Required? Yes No Completed and Attached.

Police Security Plan Required? Yes No Completed and Attached.

I recommend do not recommend approval: Temporary on Sale Liquor License Temporary On Sale Wine License

Inspector: _____ Date _____

This is to certify that I have examined this application and the information meets the conditions in the Minneapolis Code of Ordinances.

License Official _____ Date _____



Minnesota Department of Public Safety
Alcohol and Gambling Enforcement Division
445 Minnesota Street, Suite 222, St. Paul, MN 55101
651-201-7500 Fax 651-297-5259 TTY 651-282-6555
**APPLICATION AND PERMIT FOR A 1 DAY
TO 4 DAY TEMPORARY ON-SALE LIQUOR LICENSE**

Name of organization _____ Date organized _____ Tax exempt number _____

Address _____ City _____ State Minnesota Zip Code _____

Name of person making application _____ Business phone _____ Home phone _____

Date(s) of event _____ Type of organization
 Club Charitable Religious Other non-profit

Organization officer's name _____ City _____ State Minnesota Zip Code _____

Organization officer's name _____ City _____ State Minnesota Zip Code _____

Organization officer's name _____ City _____ State Minnesota Zip Code _____

Organization officer's name _____ City _____ State Minnesota Zip Code _____

Location where permit will be used. If an outdoor area, describe.

If the applicant will contract for intoxicating liquor service give the name and address of the liquor license providing the service.

If the applicant will carry liquor liability insurance please provide the carrier's name and amount of coverage.

APPROVAL

APPLICATION MUST BE APPROVED BY CITY OR COUNTY BEFORE SUBMITTING TO ALCOHOL AND GAMBLING ENFORCEMENT

City or County approving the license

Date Approved

Fee Amount

Permit Date

Date Fee Paid

City or County E-mail Address

City or County Phone Number

Signature City Clerk or County Official

Approved Director Alcohol and Gambling Enforcement

CLERKS NOTICE: Submit this form to Alcohol and Gambling Enforcement Division 30 days prior to event.

ONE SUBMISSION PER EMAIL, APPLICATION ONLY.

PLEASE PROVIDE A VALID E-MAIL ADDRESS FOR THE CITY/COUNTY AS ALL TEMPORARY PERMIT APPROVALS WILL BE SENT BACK VIA EMAIL. E-MAIL THE APPLICATION SIGNED BY CITY/COUNTY TO AGE.TEMPORARYAPPLICATION@STATE.MN.US

CERTIFICATE OF LIABILITY INSURANCE

Certificate cannot be pending, binder or TBA.

The Legal/Corporate name must match exactly (word for word) to the Approved License Name (including Inc. or LLC), Trade Name (DBA), and address of premises.

Minnesota Statute 340A.409: Liquor liability insurance policy number must be included on certificate with coverage dates identical to license period or must state: "Coverage is continuous until cancelled."

Personal Injury or Death: \$50,000/\$100,000

Property Damage: \$10,000

Other Pecuniary Loss: \$50,000/\$100,000

Loss of Means of Support: \$50,000/\$100,000

Temporary Events must include Name of Event, Date, and Location on certificate.

Original signature or stamp of agent.

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.					
IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).					
PRODUCER Agency Address City, State, Zip			CONTACT NAME: PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL ADDRESS: INSURER(S) AFFORDING COVERAGE NAIC #		
INSURED			INSURER A: INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:		
COVERAGES		CERTIFICATE NUMBER:		REVISION NUMBER:	
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.					
INSR LTR	TYPE OF INSURANCE	ADDC/INSR WVD	POLICY NUMBER	POLICY (MM/DD/YY)	POLICY (MM/DD/YY)
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				EACH OCCURRENCE \$ TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COM/PROP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB EXCESS LIAB CLAIMS-MADE DED RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/ MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A		WC STATU- TORY LIMITS OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)					
CERTIFICATE HOLDER			CANCELLATION		
ADDITIONAL INSURED: City of Minneapolis – Licenses and Consumer Services 350 south 5 th Street, Room 1 City Hall Minneapolis, MN 55415			SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.		
			AUTHORIZED REPRESENTATIVE		

Applications will be returned if requirements are not complete.

Additional Permits and Licenses

Frequently Used Permits and Licenses

- Alcohol:** The applicant agrees to not permit the sale or consumption of intoxicating liquors without first obtaining the appropriate liquor license. Contact the Licenses Division at 612-673-2080. Applications: [Temporary Liquor](#), [Temporary Wine](#), [Temporary Beer](#).
- Amplified Music:** Noise permit required. Contact the Environmental Services Division, 612-673-3867.
- Animal Permits:** Contact Minneapolis Animal Care and Control, 612-370-3892.
- Electrical Permit** for temporary service and outlets. Contact the state of Minnesota 612-866-1979 or 1-800-342-5354.
- Fire Works and Fire Related Permits:** Contact the Minneapolis Fire Department, 612-335-3772.
- Heating (Mechanical) Permit:** Temporary heat or air conditioning. Contact the Inspections Division, 612-673-3000 or 311.
- MN DOT:** 651-234-7911.
- MTC Transit Detours:** 612-349-7400.
- Parades:** Must submit a map of the route. Contact the Transportation Division 612-673-2222.
- Park Board Permits:** 612-230-6441.
- Plaza Permit:** Required for Peavey Plaza, Loring Greenway, or Chicago Mall.
- Plumbing and Gas:** Inspections for potable water, gas burners and discharges to sewers. Contact the Inspections Division at 612-673-3000 or 311.
- Races:** Call Public Works at (612) 673-5755 or (612) 673-2411.
- Recycling Containers:** May be rented for a fee from Minneapolis Solid Waste and Recycling. Must be requested ten days in advance.
- Security and Off Duty Police:** Security plan must be approved before your event. Contact the Police Special Event Coordinator at 612-673-3942.
- Short Term Food Permits** and **Event Food Sponsor Permits** are required for the sale of food and/or beverages at community based events. Contact Minneapolis 311 at minneapolis311@minneapolismn.gov or call 311 within Minneapolis, (612) 673-3000 outside Minneapolis.
- Special Event Permit:** Amusement Buildings, Bonfires, Canopies, Exhibit/Tradeshows, Fireworks, Liquid or Gas filled Vehicle in an Assembly Area, LP/Propane, Open Flames/Candles in an Assembly Area, Private Hydrants, Rooftop Heliports, Temporary Assemblies, and Tents/Temporary Membrane Structures. Contact Minneapolis 311 at minneapolis311@minneapolismn.gov, call 311 within Minneapolis, (612) 673-3000 outside Minneapolis.
- Street Closures** for block events, parade routes, detours, etc. Contact Transportation and Parking Services Division at 612-673-5750.
- Temporary Expansion of License:** On-Sale Liquor, Wine or Beer establishments may use unlicensed portions of their premises (indoor or outdoor) and/or provide additional entertainment.
- Temporary Extended Hours License:** Establishments that do not sell or serve alcohol may operate later than authorized hours. Short Term Food and Event Food Sponsor Permits may be required.
- Temporary Toilets:** Must use a state of Minnesota licensed Service Company and provide an adequate number of units per industry guidelines. Contact vendors in the yellow pages.
- Tents:** A detailed plan must be approved by Building and Fire Inspectors. Call 311 or 612-673-3000.
- Traffic Control:** 612-673-5330. Hourly fees are charged.