

THE CITY OF



OWATONNA

City Administration
Kris M. Busse, City Administrator
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DATE: May 13, 2021
TO: Honorable Mayor, City Council Members and City Administrator
FROM: Jeanette Clawson, Administrative Assistant
SUBJECT: Temporary Liquor License Application

Purpose:

Council approval of a Temporary On-Sale Intoxicating Liquor License application received from the Knights of Columbus for the 2021 Corky's Softball Event

Background:

The 2021 Corky's Softball Tournament is planned for July 29th – August 1st. The Knights of Columbus will serve alcohol in the tent set at the Fairgrounds Park as they have in previous years. All requirements for a Temporary Liquor License have been completed and a Certificate of Liability Insurance requested to be received prior to the event

Budget Impact:

Fee for a Temporary On-Sale Liquor license is \$50.00

Recommendation:

Staff recommends approval of this license application.



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
Knights of Columbus	Jan 1, 1904	9760494

Address	City	State	Zip Code
820 S Elm, PO Box 623	Owatonna	Minnesota	55060

Name of person making application	Business phone	Home phone
Mark Cunningham	507-451-6103	

Date(s) of event	Type of organization
Thursday, July 29, 2021 - Sunday, August 1, 2021	<input checked="" type="checkbox"/> Club <input type="checkbox"/> Charitable <input type="checkbox"/> Religious <input type="checkbox"/> Other non-profit

Organization officer's name	City	State	Zip Code
Joel Elbert	Owatonna	Minnesota	55060

Organization officer's name	City	State	Zip Code
Tom Elbert	Owtaonna	Minnesota	55060

Organization officer's name	City	State	Zip Code
Dave Lax	Owatonna	Minnesota	55060

Organization officer's name	City	State	Zip Code
Gary Sandford	Owatonna	Minnesota	55060

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

At the Fairgrounds Park and softball diamonds.

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.

American Trust
 \$2,000,000

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**