



City Clerk's Office
 221 East Clark Street
 Albert Lea, MN 56007-2496
 Telephone: 507-377-4335
 Fax: 507-377-4336

LICENSE APPLICATION
 *ON-SALE-OFF-PREMISE
 ONE DAY LIQUOR LICENSE- \$50.00

PLEASE TYPE OR PRINT LEGIBLY

APPLICANT:

NAME: _____
 ADDRESS: _____
 PHONE NO. _____ (Cell) _____

BUSINESS:

NAME: _____
 ADDRESS: _____
 PHONE NO. _____ (Cell) _____

DATE(S) OF EVENT: _____

LOCATION OF EVENT: _____

TYPE OF EVENT: _____

***CERTIFICATE OF INSURANCE FOR THE DATE OF THE EVENT AND LOCATION ARE REQUIRED**

State of Minnesota)
 County of Freeborn) ss
 City of Albert Lea)

THE UNDERSIGNED HEREBY AGREES TO COMPLY WITH THE TERMS OF THE ALBERT LEA CITY CODE AND THE LAWS OF THE STATE OF MINNESOTA AS THEY RELATE TO THE LICENSE AND OPERATION OF THE LICENSE BEING APPLIED FOR. I UNDERSTAND FALSIFICATION OF ANY PART OF THIS APPLICATION IS CAUSE FOR DENIAL OR REVOCATION.

 Signature

 Date

OFFICE USE ONLY

Date Received: _____

Check/Cash/CC: _____

Processor Initials: _____