



### Checklist for Temporary On-Sale Liquor License

Business Name: \_\_\_\_\_

Event Date: \_\_\_\_\_

A Temporary On-Sale License can only be issued to:

- Clubs, charitable organizations, religious organizations, or non-profit organizations
- This license cannot be issued to an individual
- There is no fee
- The State of Minnesota allows 12 events per organization, per year
- Each location is only allowed to host 12 events per year
- After approval by City Council, the application must be forwarded to the State
- **State of Minnesota approval may take up to 30 days.**

#### License Fees

Temporary On-Sale Liquor License

No fee



Minnesota Department of Public Safety  
Alcohol and Gambling Enforcement Division  
445 Minnesota Street, Suite 1600, St. Paul, MN 55101  
651-201-7507 TTY 651-282-6555  
**APPLICATION AND PERMIT FOR A 1 DAY  
TO 4 DAY TEMPORARY ON-SALE LIQUOR LICENSE**

Name of organization		Date of organization		Tax exempt number	
<input type="text"/>		<input type="text"/>		<input type="text"/>	
Organization Address (No PO Boxes)		City	State	Zip Code	
<input type="text"/>		<input type="text"/>	Minnesota	<input type="text"/>	
Name of person making application		Business phone		Home phone	
<input type="text"/>		<input type="text"/>		<input type="text"/>	
Date(s) of event	Type of organization <input type="checkbox"/> Microdistillery <input type="checkbox"/> Small Brewer				
<input type="text"/>	<input 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		
<input type="text"/>	<input type="text"/>	Minnesota	<input type="text"/>		
Organization officer's name	City	State	Zip Code		
<input type="text"/>	<input type="text"/>	Minnesota	<input type="text"/>		
Organization officer's name	City	State	Zip Code		
<input type="text"/>	<input type="text"/>	Minnesota	<input type="text"/>		

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	
<input type="text"/>		<input type="text"/>	
Fee Amount		Permit Date	
<input type="text"/>		<input type="text"/>	
Event in conjunction with a community festival <input type="checkbox"/> Yes <input type="checkbox"/> No		City or County E-mail Address	
<input type="text"/>		<input type="text"/>	
Current population of city			
<input type="text"/>			

Please Print Name of City Clerk or County Official

Signature City Clerk or County Official

**CLERKS NOTICE:** Submit this form to Alcohol and Gambling Enforcement Division 30 days prior to event  
No Temp Applications faxed or mailed. Only emailed.

**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**