




Minnesota Department of Public Safety
Alcohol and Gambling Enforcement Division
445 Minnesota Street, Suite 1600, St. Paul, MN 55101
651-201-7507 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 Jack Pine Brewery		Date organized Jun 9, 2022	Tax exempt number 2765361
Organization Address 15593 Edgewood Dr	City Baxter	State Minnesota	Zip Code 56425
Name of person making application Patrick Sundberg		Business phone 218-270-8072	Home phone 218-820-7829
Date(s) of event August 12-14th, 2022	Type of organization <input type="checkbox"/> Microdistillery <input checked="" type="checkbox"/> Small Brewer <input type="checkbox"/> Club <input type="checkbox"/> Charitable <input type="checkbox"/> Religious <input type="checkbox"/> Other non-profit		
Organization officer's name Patrick Sundberg	City Baxter	State Minnesota	Zip Code 56425
Organization officer's name	City	State Minnesota	Zip Code
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Location where permit will be used. If an outdoor area, describe.
Outdoor music festival at the Northland Arboretum, 14250 Conservation Dr, Baxter, MN. Primary event will be held Saturday the 13th. I'm requesting the license extend Friday-Sunday if we are able to find another fundraising opportunity the day before or after the main event. 

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

If the applicant will carry liquor liability insurance please provide the carrier's name and amount of coverage.
Insurance policy on file with the city.

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

Please Print Name of City Clerk or County Official

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