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INTEROFFICE MEMORANDUM

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**TO:** CHIEF CIANNI  
**FROM:** REBECCA HOFF  
**SUBJECT:** BP MARSH ENTERPRISES INC. BERNIES ESQUIRE CLUB  
**DATE:** 8/07/23

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**BACKGROUND INVESTIGATION:**

BERNAL MARSH  
PAULETTE MARSH  
MAXSONN MARSH

Pursuant to your request, a criminal background check has been conducted on the individual(s) listed above for the purpose of liquor licensing in the City of Dickinson. Resources used included:

ND Courts  
City of Dickinson contacts  
NCIC  
CJIS

This search revealed the following criminal history;

Maxsonn Marsh- 2009 MIP, Resisting Arrest, Obstructing Public Officer  
2007 MIC

*Mc-100  
02/10*



# CITY OF DICKINSON

## INITIAL APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE

For Year 2023

Application for:

- Commercial On/Off-Sale (\$3,000)
- Lodge or Club (\$3,000)
- Motel or Hotel (\$3,000)
- Restaurant On-Sale (\$2,500)
- Military Club Beer and Wine (\$700)
- Microbrewery Pub (\$700)
- Beer and Wine Concession Licenses (\$550)
- Distillery License (\$700)
- Brewer Taproom License (\$2,000)
- Domestic Winery License (N/A)
- Beer Only On-Sale License (\$700)
- Beer and Wine Only On-Sale License (\$1,250)
- Sunday Permit (All on-sale establishments must check Sunday Permit.  
Optional only for off sale establishments. See paragraph 5, below)

**NOTE:** In addition to said fees, each applicant for a new license or a transfer of a license shall, at the time of submission of the application for such issuance or transfer, pay the sum of an application fee and an issuance fee or transfer fee as a non-refundable application or transfer fee.

The undersigned hereby applies for the license or licenses checked above, and agrees, if granted a license, to promptly advise the City of any changes in the information contained in this application.

1. **BUSINESS INFORMATION:**

Business Name: BPMARSH Enterprises Inc. DBA Bernie's Esque Club  
Mailing Address: P.O. Box 389 Dickinson ND 58601  
Street Address: 43 Sims Street Dickinson ND 58601  
Phone Number: 701 483 4495

2. **PROPOSED LICENSEE INFORMATION (please complete either 2.a. or 2.b. as appropriate)**

a. Individual or Partnership:  
Name(s): \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Birth Date(s):   /  /     /  /    
Social Security # \_\_\_\_\_ Driver's License # \_\_\_\_\_  
Please Attach - Occupation Record for Last Five Years  
US Citizen: Y / N

b. Corporation:  
Name of Corporation: BPMARSH Enterprises Inc  
Date of Incorporation: 01/23/87 State of Incorporation: ND  
Web Address: Beet & drinking buddy.com  
(Attach copy of Certificate of Incorporation)  
(Attach list of each officer, director, and proposed manager indicating address, email address, citizenship status, and percentage of stock ownership in corporation.)

3. **LOCATION INFORMATION:**

Legal description of business location: Lot: L1-2 Block: B3  
Addition or Subdivision: D.P. Dickinson

Property/Building Owner Information (If different than applicant)

Name: B. P. MARSH Commercial Rentals  
Mailing Address: P.O. Box 389  
City, State, Zip: Dickinson, ND 58602  
Telephone: 701 590 9876  
Email: lodyluck@ndsupernet.com  
Zoning: Commercial  
Present Occupancy: Public Club  
Are Taxes Current?  (Please attach verification from Stark County)

Please attach a comprehensive site drawing, including, but not limited to: layout of the building(s) and how they lay on the property, the extent of the area(s) in the building in which alcoholic beverages will be sold and/or served, and building and property dimensions.

4. GENERAL:

a. Name and contact information for person responsible for complying with all city ordinances and state law, on behalf of this license.

Name: Bernie Marsh  
Mailing Address: P.O. Box 389  
City/State/Zip: Dickinson, ND 58602  
Telephone: 701 590 9876  
Email: lodyluck@ndsupernet.com

b. Attach a complete history of the applicant(s) residency, employment, and business ownership for the five years leading up to the date of this application.

c. Have you ever been engaged in the sale or distribution of alcoholic beverages prior to this application? If so, give date and type of business and address: Dickinson, ND Public Club 43 5th Street  
1987 to present

d. Have you ever had a liquor license rejected by any municipality, state or federal authority? (Y/) If yes, give details:

e. Have you ever been convicted or any violation of any law of the United State or the state of North Dakota, or local ordinance governing the manufacture, sale, distribution or possession of alcoholic beverages? (Y/) If yes, give date(s) and details:

f. Have you ever had a liquor license for the sale of intoxicating liquor revoked or suspended for any violation or any state law or local ordinance? (Y/) If yes, give date(s) and details:

g. Have you ever been indicted or convicted of a crime either in North Dakota or elsewhere? (Y/) If yes, give date(s) and details:

h. Attach list of names and contact information of all persons, silent, or otherwise, interested in any manner in said business, or who will have charge, management, or control of the establishment for which license is requested:

<u>Bernie C Marsh</u>	<u>701 590 9876</u>
<u>Paulette M Marsh</u>	<u>701 290 8928</u>
<u>Maryann Marsh</u>	<u>701 290 8929</u>

i. Has any person, other than applicant, any right, title, or interest in the leasehold, or in the furniture, fixtures, or equipment in the premises for which license is requested? NO

(Y/) If yes, attach list of names and contact information.

j. Have you any agreement or understanding or intention to have any agreement or understanding with any person, partnership or corporation to obtain for any other, or transfer to any other person this license, or to obtain it for any other than the specific use of the applicant? (Y/) If yes, please give details:

- k. Have you interest whatsoever, directly or indirectly, in any other liquor or alcoholic beverage establishment either wholesale or retail in North Dakota or any another state?  
(Y ) If yes, attach list of business names and addresses of establishments.
- l. Have you or any licensees listed on this application been convicted of a Felony or any other alcohol related violation of criminal or traffic law? (No ) \*Yes \_\_\_\_\_  
\*If yes, please provide date, location (State & City) and description of the offense: \_\_\_\_\_
- m. Will you be engaged in any other form of business other than that to be covered by this license? (Y ) If yes, please attach description of other business, including employer if that applies.
- n. The applicant hereby does expressly consent that any person(s) duly authorized by the city of Dickinson may enter upon the premises described in this application at any reasonable hour of the day or night including all hours in which the establishment is occupied, and at such times they shall have free access to all portions of the property comprising the licensed premises for the purpose of inspecting such premises for any possible violation of laws of the state of North Dakota or ordinances of the city of Dickinson regardless whether said laws pertain to the sales of alcoholic beverages. Such access shall be permitted without necessity of a search warrant.
- o. Applicant acknowledges that this license, if granted includes the ability to open business on Sunday and therefore the business must collect and submit to the state of North Dakota the Hospitality Tax (Restaurant and Lodging)
- p. Applicant acknowledges that if this is an application for a restaurant related license, at least 50% of sales of the business must be in the form of prepared food.
- q. The applicant hereby acknowledges that if this license is idle for more than six months in any 12 month period, the City will revoke said license and offer it for public sale.
- r. The applicant hereby acknowledges that this license is not transferable nor may the ownership change by more than 25% without prior approval of the city of Dickinson.
- s. Please attach the names and contact information of three local business references.
- t. The applicant hereby acknowledges that by signing this application he/she/they admit that the information contained in this application is true and accurate to the best of their knowledge.
- u. The applicant hereby acknowledges that they shall cooperate to the fullest extent in obtaining a complete background investigation concerning any persons involved with the individual applicant or the applicant's organization.

5. The undersigned represents and warrants that the hospitality tax imposed under Section 35.125 of the Dickinson City Code has been and will continue to be collected to qualify the licensee as a qualified alcoholic beverage licensee for purposes of Sections 4.08.270 and 4.08.280 of the Dickinson City Code authorizing Event permits and Sunday permits. (This paragraph is not applicable to applicants who have not applied for a Sunday permit)

Dated this 2 day of August, 2023

Individual or Partnership Application:

\_\_\_\_\_  
Applicant Signature(s)

\_\_\_\_\_  
Applicant Signature(s)

Corporation:

Brian C. M. L.  
\_\_\_\_\_  
President's Signature

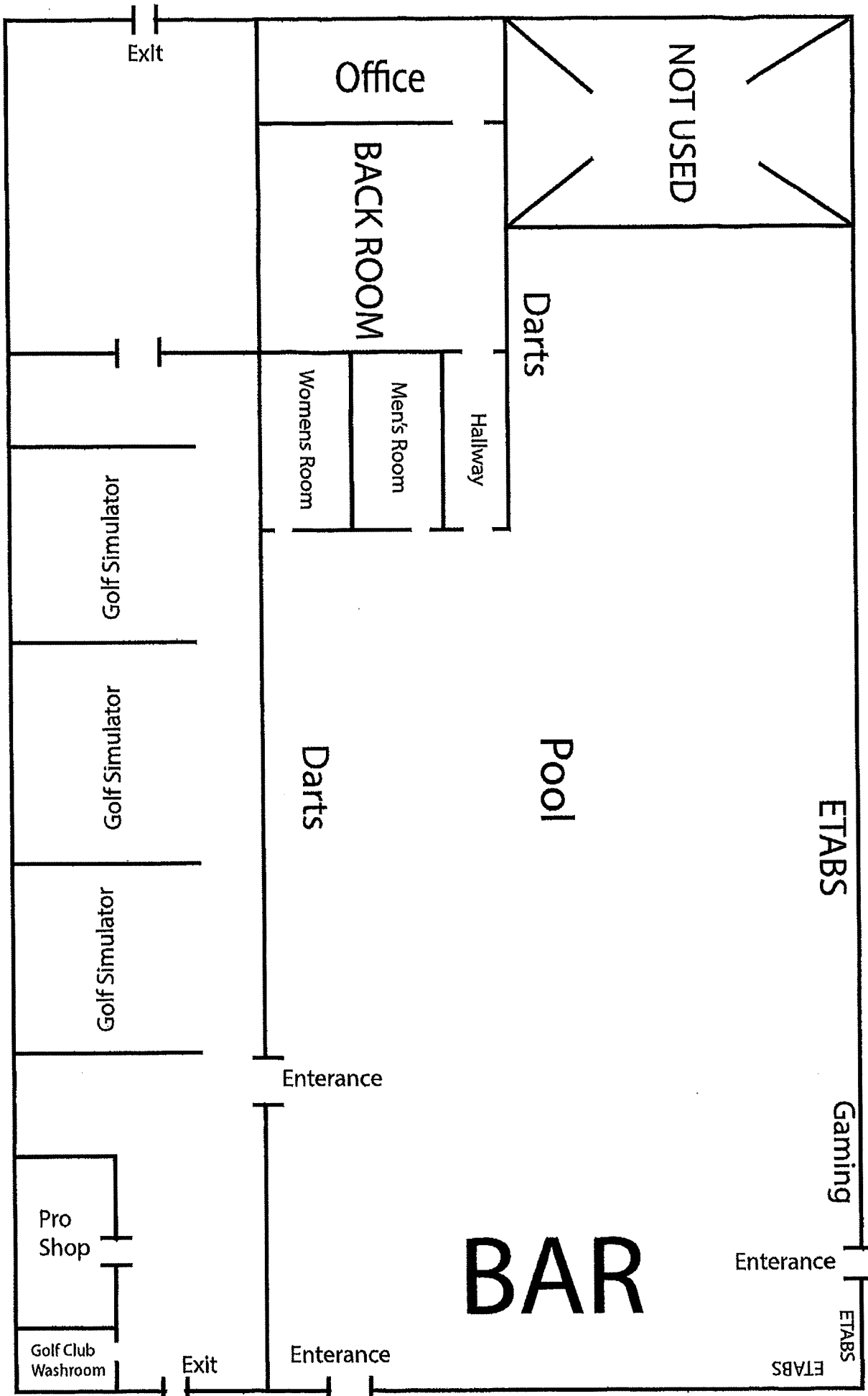
Secretary's Signature

*Paulette Marsh*

N

150'

Esquire Club



NOT USED

Office

BACK ROOM

Darts

Hallway

Mens Room

Womens Room

Pool

Darts

ETABS

Gaming

BAR

Golf Simulator

Golf Simulator

Golf Simulator

Pro Shop

Golf Club Washroom

Exit

Entrance

Entrance

Entrance

Exit

ETABS

ETABS

25'

50'

**4s            Three Local Business References**

Preston Obrigeawitch      Badlands Music      701-290-7877

Tracy Tooz                      Tooz Contruction      701-260-4431

Shannon Galster              Dickinson Dental Center      701-590-4866



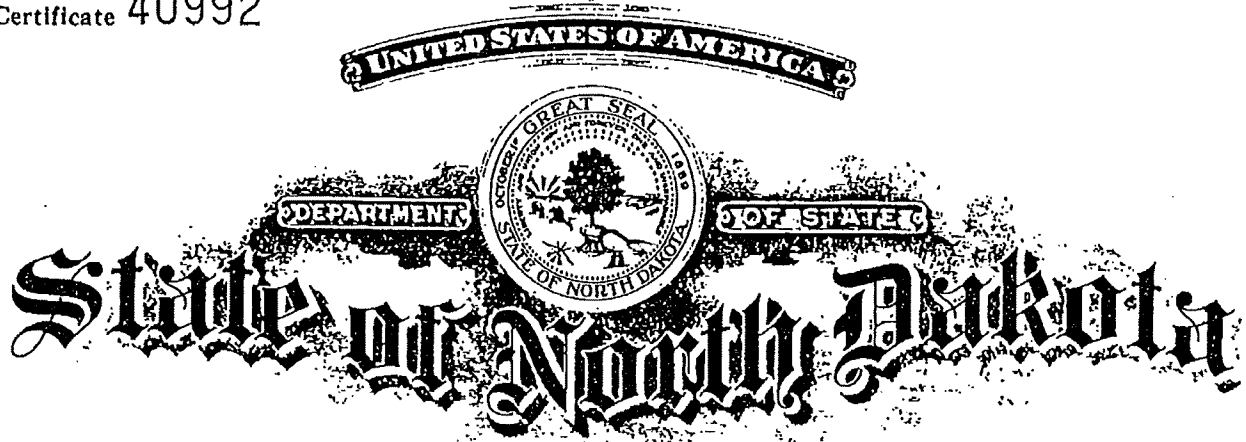
## **2b                    Officer and Manager List**

Office	Name	Address	CS
President	Bernie Marsh	425 2 <sup>nd</sup> Ave W Dickinson	USA
		ladyluck@ndsupernet.com	
	50% ownership		
Sec/Treas	Paulette Marsh	425 2 <sup>nd</sup> Ave W Dickinson	USA
		ladyluck@ndsupernet.com	
	50% ownership		
Manager	Maxsonn Marsh	36 6 <sup>th</sup> Ave W Dickinson	USA

## **4b                    Applicant History**

Bernie Marsh	425 2 <sup>nd</sup> Ave West, Dickinson, ND
	Bernie's Esquire        50%
Paulette Marsh	43 Sims Street, Apt #1, Dickinson, ND
	Bernie's Esquire        50%
Maxsonn Marsh	36 6 <sup>th</sup> Avenue West, Dickinson, ND

Certificate 40992



CERTIFICATE OF INCORPORATION  
OF

.....  
B.P. MARSH ENTERPRISES, INC.

The undersigned, as Secretary of State of the State of North Dakota, hereby certifies that duplicate originals of Articles of Incorporation for the incorporation of

.....  
B.P. MARSH ENTERPRISES, INC.

duly signed and verified pursuant to the provisions of the North Dakota Business (10-19.1 N.D.C.C.) Corporation Act, have been received in this office and are found to conform to law.

ACCORDINGLY the undersigned, as such Secretary of State, and by virtue of the authority vested in him by law, hereby issues this Certificate of Incorporation to

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B.P. MARSH ENTERPRISES, INC.

and attaches hereto a duplicate original of the Articles of Incorporation.

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State at the Capitol in the City of Bismarck, this.....23rd.....day of.....July.....A. D., 19 87.

*Ben Meier*  
.....  
BEN MEIER Secretary of State.

By.....  
Deputy.