MARSHALL CULTIVATING THE BEST IN US	Application Alcoholic Beverages at City-Owned Facilities and Parks License: \$30/Day
Name of Applicant/Organization: VISIF	
DBA Name (if <u>different)</u> : Marshoul	Convention & VISitor Bureau
Address: 1651 VICTORY T	Drve
City/State/Zip: Marshall	MN 54258
Phone Number: 0200500 507-53	37-1805 Email Address: Cassi Marse Visit Marshall
Description of Event: <u>ICE DOG</u>	hockey games NAHL Mn. com
League @ Red	Baron Arener
Estimated Attendance: 1000 lacin ni	Digne Dates/Time of Event: Dec 2nd 3rd 7pm
On-Sale Intoxicating Liquor License Holder:	-uzzys Bar
Address: 236 W. Main	street
City/State/Zip: Marshall MN	54258
Phone Number: 507 - 532 - 6515	5 Email Address: FUZZYSbar@iw.net

Required Submittals:

- A Certificate of Liability Insurance
- A Certificate of Compliance Minnesota Workers' Compensation Law form.
- A Completed Form SP:C1
- A Copy of the On-Sale Intoxicating Liquor License Issued by the City of Marshall
- A Consent of the Release of Information

I hereby submit this application for Alcoholic Beverages at City-Owned Facilities and Parks in accordance with the provisions stated in the ordinances of the City of Marshall.

Signature of Applicant	CASSI WEISS Name (printed)	i0 · 17 · 22 Date
FEE PAID PERMIT	APPROVAL Initials	Date
AMOUNT DATE		
RECEIPT NO		
CERT OF INS. REC'D	CITY CLERK	