



Minnesota Department of Public Safety
Alcohol and Gambling Enforcement Division
 445 Minnesota Street, Suite 222, St. Paul, MN 55101
 651-201-7500 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	Date organized	Tax exempt number
Holy Redeemer Council 1621 K of C	4/1/1912	[REDACTED]

Address	City	State	Zip Code
P.O. Box 1105	Marshall	MN	56258

Name of person making application	Business phone	Home phone
Michael Oney	[REDACTED]	[REDACTED]

Date(s) of event	Type of organization
October 21, 2023	<input type="checkbox"/> Microdistillery <input type="checkbox"/> Small Brewer <input type="checkbox"/> Club <input type="checkbox"/> Charitable <input type="checkbox"/> Religious <input checked="" type="checkbox"/> Other non-profit

Organization officer's name	City	State	Zip Code
Jeff Yorde	Marshall	MN	56258

Organization officer's name	City	State	Zip Code
Kevin Gruhot	Marshall	MN	56258

Organization officer's name	City	State	Zip Code
Michael Oney	Marshall	MN	56258

Organization officer's name	City	State	Zip Code
Stan Dopheide	Marshall	MN	56258

Location where permit will be used. If an outdoor area, describe.
 4-H Bldg @ Lyon County Fairgrounds. With favorable weather, an enclosed trailer w/b located outside 4-H Bldg, customer will be served Brau Brothers beer. Customer will drink inside the 4-H Bldg. With unfavorable weather, beer will be served inside the 4-H Bldg.

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

 Fee Amount

 Permit Date

 Date Fee Paid

 City or County E-mail Address

 City or County Phone Number

 Signature City Clerk or County Official

 Approved Director Alcohol and Gambling Enforcement

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