

TOBACCO LICENSE APPLICATION FORM

City of Marshall ~ 344 West Main Street ~ Marshall MN 56258
Phone (507) 537-6763 ~ Fax (507) 537-6830

LICENSE PERIOD FROM 10-23-19 TO 12-31-19

ANNUAL FEE: \$150.00/Per Facility – Due with Application Receipt # _____

TO COMPLY WITH THE CITY CODE OF MARSHALL, MINNESOTA
REGULATING THE SALE OF TOBACCO.

NAME OF APPLICANT: Kam Vongkhamchanh
(First) (Middle) (Last)

HOME ADDRESS: 1405 Parkside Dr
(R.R., Box or Street)
Marshall, MN 56258
(Town, State and Zip Code)

MAILING ADDRESS: 1405 Parkside Dr
(R.R., Box or Street)
Marshall, MN 56258
(Town, State and Zip Code)

NAME AND ADDRESS OF LICENSED FACILITY: Ton Kao LLC
(Name)
110A N US Hwy 59
(Street)
Marshall, MN 56258
(Town, State and Zip Code)

BUSINESS PHONE: (507) 993-5210

HOME PHONE: ()

Ku Vongkhamchanh
Signature of Applicant

10/14/2019
Date