



Intoxicating Liquor License Application

License Period From: 9/1/2022 To: 12/31/2022
~~01/01/2023~~ ~~12/31/2023~~

Receipt Number: _____ Amount Paid: _____

If applicant is an individual, it shall be completed by such person; if a corporation, by an officer; if a partnership, by one of the general partners; if an unincorporated association, by the manager or managing officer.

1. New Application Renewal Application
- Type of License (Select all that apply)
- | | |
|---|------------|
| <input checked="" type="checkbox"/> On-Sale Liquor | \$3,000.00 |
| <input checked="" type="checkbox"/> On-Sale Sunday | \$200.00 |
| <input type="checkbox"/> On-Sale 3.2 % Malt Liquor | \$250.00 |
| <input type="checkbox"/> Off-Sale 3.2 % Malt Liquor | \$90.00 |
| <input type="checkbox"/> Brewer Taproom | \$500.00 |
| <input type="checkbox"/> Wine | \$600.00 |
| <input type="checkbox"/> Club License | \$275.00 |

2. Type of applicant Individual Corporation Club Partnership Other organization

3. Legal name of licensee (individual, partnership, corporation, organization or club) Atlantic Place, LLC
Address 1600 Hahn Road Marshall MN 56258 Phone 507-829-8486
PO Box 1083 Street City State Zip

4. Business name Same as above Phone _____
Address _____
Street City State Zip

5. Minnesota Business Tax ID Number (Per Minnesota Statute Section 270C.72) [REDACTED]
Federal Business Tax ID Number _____
Individual – Social Security Number: _____

6. Proof of Workers' Compensation Insurance Coverage
Insurance company name _____ Dates of coverage _____
Policy number/Self-insurance permit number (Per Minnesota Statute Section 176.182) _____

I am **not** required to have workers' compensation liability coverage because
 I have no employees covered by the law Other (Specify on an attached document.)

Section 1: Building/premises

All applicants complete this section.

7. Since the license was last issued, have there been any changes in the ownership of the building where the licensed establishment is located? Yes No

If yes:
Building owner Knochenmus Enterprises, LLP Phone 507-829-8486
Business address PO Box 1083 - Marshall MN 56258
Street 1600 Hahn Road City State Zip