



Minnesota Department of Public Safety
Alcohol and Gambling Enforcement Division
445 Minnesota Street, Suite 1600, St. Paul, MN 55101
651-201-7507 TTY 651-282-6555

**APPLICATION AND PERMIT FOR A 1 DAY
TO 4 DAY TEMPORARY ON-SALE LIQUOR LICENSE**

Name of organization <u>Marshall Area Chamber of Commerce</u>		Date of organization <u>02/11/1930</u>		Tax exempt number <u>41-0395440</u>	
Organization Address (No PO Boxes) <u>317 West Main Street,</u>		City <u>Marshall</u>	State <u>Minnesota</u>	Zip Code <u>56258</u>	
Name of person making application <u>Sam Lund / Bruce Gruhot</u>		Business phone <u>507-532-4484</u>		Home phone <u></u>	
Date(s) of event <u>August 25th, 2026</u>		Type of organization ☐ Microdistillery ☐ Small Brewer ☐ Club ☐ Charitable ☐ Religious ☐ Other non-profit			
Organization officer's name <u>Leslie Hart</u>		City <u>Marshall</u>	State <u>Minnesota</u>	Zip Code <u>56258</u>	
Organization officer's name <u></u>		City <u></u>	State <u>Minnesota</u>	Zip Code <u></u>	
Organization officer's name <u></u>		City <u></u>	State <u>Minnesota</u>	Zip Code <u></u>	

Location where permit will be used. If an outdoor area, describe.

~~Western Equipment Finance - BAH - 4:30-6:30~~

SMSU Schumacher Regional Event Center
1501 State Street, Marshall, MN 56258

If the applicant will contract for intoxicating liquor service give the name and address of the liquor license providing the service.

NO

If the applicant will carry liquor liability insurance please provide the carrier's name and amount of coverage.

NO

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
Event in conjunction with a community festival ☐ Yes ☐ No	City or County E-mail Address
Current population of city	

Please Print Name of City Clerk or County Official

Signature City Clerk or County Official

CLERKS NOTICE: Submit this form to Alcohol and Gambling Enforcement Division 30 days prior to event

No Temp Applications faxed or mailed. Only emailed.

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