



118 Central Avenue North, New Prague, MN 56071
phone: 952-758-4401 fax: 952-758-1149

MEMORANDUM

TO: HONORABLE MAYOR AND CITY COUNCIL
FROM: JOSHUA TETZLAFF, CITY ADMINISTRATOR
SUBJECT: NEW PRAGUE CHAMBER OF COMMERCE – 1-4 DAY TEMPORARY ON-SALE LIQUOR LICENSE FOR DOŽÍNKY DAYS
DATE: JULY 9, 2024

Attached is an application for a 1-4 Day Temporary On-Sale Liquor License from the New Prague Chamber of Commerce, requesting permission to serve alcoholic beverages at Dožínky Days on September 20-21, 2024, at the Chamber Beer Garden, located on Central Avenue North (on the street).

All of the conditions of the Temporary On-Sale Liquor License application have been met by the applicant.

The Temporary On-Sale Liquor License is issued with the understanding that the Licensee is responsible to adhere to all liquor provisions found in Chapter 340A and any other statutes or rules that may apply in serving alcohol.

Recommendation

Staff recommends approval of the application and issuing a 1-4 Day Temporary On-Sale Liquor License to the New Prague Chamber of Commerce for Dožínky Days on September 20-21, 2024.



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 New Prague Chamber of Commerce		Date organized	Tax exempt number
Address 101 E. Main St.		City New Prague	State MN
		Zip Code 56071	
Name of person making application Brooke Sticha		Business phone 758-4360	Home phone
Date(s) of event September 20 - 21, 2024		Type of organization <input type="checkbox"/> Club <input type="checkbox"/> Charitable <input type="checkbox"/> Religious <input type="checkbox"/> Other non-profit	
Organization officer's name Carla Sticha		City New Prague	State MN
		Zip Code 56071	
Organization officer's name Cassie Barten		City New Prague	State MN
		Zip Code 56071	
Organization officer's name		City	State
			MN
Organization officer's name		City	State
			MN

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

Central Ave N. on street with stage (beer garden, enclosed)

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.

New Prague Chamber of Commerce - \$1,000,000

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