

## 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		Date of organization Tax exempt number			pt number
Giesenbrau Bier Co		Feb 2017			
Organization Address (No PO Boxes)	City		State		Zip Code
1306 1st St NE	New Prague		MN		56071
Name of person making application	Business pho		ne	Home phone	
Erin Hutton		9527584226		7202248	277
Date(s) of event	Type of orga	anization [	Microdistille	ry 🔀 Sn	nall Brewer
May 4th 2024	Club [	Charitable	Religiou	s 🗌 Othe	er non-profit
Organization officer's name	City		State		Zip Code
Erin Hutton	New Prague		MN		56071
Organization officer's name City			State		Zip Code
			MN		
Organization officer's name City			State		Zip Code
			MN		
If the applicant will carry liquor liability insurance please provide th Cincinnati Insurance \$2,000,000.00	ie carrier's nai	me and amou	nt of coverag	e.	
APP	PROVAL				
APPLICATION MUST BE APPROVED BY CITY OR COUNTY BEF		G TO ALCOHOL AN			Т
City or County approving the license	51412024				
Fee Amount			Permit D	ate	
Event in conjunction with a community festival Yes No	jsch	OEMWON City	or County E-r	ew- P nail Addre	ss NP
Josh Tetzlaff					
Please Print Name of City Clerk or County Official	_	e City Clerk or	•		
<b>CLERKS NOTICE:</b> Submit this form to Alcohol and (	uampling l	Entorcemei	nt Divisior	SU days	s 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. TEMPORARY APPLICATION @ STATE.MN.US