



Minnesota Department of Public Safety  
 Alcohol and Gambling Enforcement Division  
 445 Minnesota Street, Suite 1600, St. Paul, MN 55101  
 651-201-7507 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	Date organized	Tax exempt number
Forward New Prague Foundation	1/17/2023	92-1785025

Organization Address	City	State	Zip Code
305 Columbus Ave S	New Prague	MN	56071

Name of person making application	Business phone	Home phone
Den Gardner		6123253981

Date(s) of event	Type of organization
June 1, 2024	<input type="checkbox"/> Microdistillery <input type="checkbox"/> Small Brewer <input type="checkbox"/> Club <input checked="" type="checkbox"/> Charitable <input type="checkbox"/> Religious <input type="checkbox"/> Other non-profit

Organization officer's name	City	State	Zip Code
Den Gardner	New Prague	MN	56071

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		MN	

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		MN	

Location where permit will be used. If an outdoor area, describe.  
 Hotel Broz 212 Main St W New Prague Mn 56071

If the applicant will contract for intoxicating liquor service give the name and address of the liquor license providing the service.  
 Schultzy's Restaurant Group LLC dba 1319 Woodside Tavern

If the applicant will carry liquor liability insurance please provide the carrier's name and amount of coverage.  
 Schultzy's Restaurant Group LLC c/o  
 Atlas Insurance Brokers -\$1,000,000.00

**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 \_\_\_\_\_ Please Print Name of City Clerk or County Official \_\_\_\_\_

**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](mailto:AGE.TEMPORARYAPPLICATION@STATE.MN.US)**