



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**

**RECEIVED**  
APR 14 2025

Name of organization

Giesenbrau Bier Co

Date of organization

Feb 2017

BY: \_\_\_\_\_ Tax exempt number

4664430

Organization Address (No PO Boxes)

1306 1st ST NE

City

New Prague

State

MN

Zip Code

56071

Name of person making application

Erin Hutton

Business phone

9527584226

Home phone

7202248277

Date(s) of event

June 13th 2025

Type of organization ☐ Microdistillery ☐ Small Brewer  
☐ Club ☐ Charitable ☐ Religious ☐ Other non-profit

Organization officer's name

Erin Hutton

City

New Prague

State

MN

Zip Code

56071

Organization officer's name

City

State

MN

Zip Code

Organization officer's name

City

State

MN

Zip Code

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

Holy Trinity front out door area

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.

Cincinnati Insurance 2million

**APPROVAL**

APPLICATION MUST BE APPROVED BY CITY OR COUNTY BEFORE SUBMITTING TO ALCOHOL AND GAMBLING ENFORCEMENT

City of New Prague

City or County approving the license

\$100

Fee Amount

Event in conjunction with a community festival ☐ Yes ☒ No

8,102

Current population of city

Joshua Tezloff, City Administrator

Please Print Name of City Clerk or County Official

Date Approved

6-13-2025

Permit Date

aschapekahn@ci.new-prague.mn.us

City or County E-mail Address

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**