



City of Minneapolis
Licenses and Consumer Services
505 Fourth Ave. S., Room 220
Minneapolis, MN 55415
Telephone: 612-673-2080
www.minneapolismn.gov/businesslicenses

For Office Use Only

AP: BLAmend/
BLAddLate
MCO: 360.80
Adm Issuance: Yes

License Application: Special All Night Bowling, Pool or Billiards

Definition: Any business with either a bowling or pool hall/billiard license and an on-sale liquor, wine, or beer license, may remain open to the public for up to 24 hours per day for games of bowling, pool and /or billiards. Businesses which do not sell beer, wine, or liquor are not eligible for this permit.

If you have questions, send an email to businesslicenses@minneapolismn.gov or call 612-673-2080.

1. Application Requirements

1. Complete the application and include all the requirements listed below. Incomplete applications may be returned. You may send your application by email (businesslicenses@minneapolismn.gov), US mail, or drop it off at our office.
2. There is a [fee](#), plus a new license processing charge, for this application. You can pay by
 - Cash:** Drop off your application at our office.
 - Check:** Mail or drop off your application at our office.
 - Credit Card:** Mail, drop off or email your application to businesslicenses@minneapolismn.gov. **Do not add your credit card information on this application.** We will call you to securely charge your credit card.
3. **Alcohol License Change Form** (Form #1)
4. **Amended Business Plan** (Form #2)
 - [Police Safety Plan Review Form](#)
 - [Sound Management Plan](#)

2. Additional Information

1. No license will be issued for longer than one year.
2. You cannot transfer your license to any other person or location.
3. For reasonable accommodations or alternative formats, please call us at 612-673-2080 or send us an email at businesslicenses@minneapolismn.gov. Individuals who are deaf or hard of hearing can use a relay service to call 311 at 612-673-3000.
4. Information in other languages: Para asistencia 612-673-2700. Rau kev pab 612-673-2800. Hadii aad Caawimaad u baahantahay 612-673-3500.

Alcohol License Change Form

#1

1. Type of License Change

<input type="checkbox"/> Amending a Business Plan	<input type="checkbox"/> New Corporate Officer
<input type="checkbox"/> Corporate Name Change	<input type="checkbox"/> New Manager
<input type="checkbox"/> Corporate Shares Purchase	<input type="checkbox"/> New Shareholder/Partner
<input type="checkbox"/> Downgrading Entertainment Class	<input type="checkbox"/> Special All Night Bowling /Pool/ Billiards
<input type="checkbox"/> Downgrading License Type	<input type="checkbox"/> Special Late Night Food
<input type="checkbox"/> Expansion of Premises	<input type="checkbox"/> Upgrading Entertainment Class
<input type="checkbox"/> Internal Transfer of Shares	<input type="checkbox"/> Upgrading License Type

2. Background Information

I, _____, as Owner Partner, request the following detailed description on behalf of _____:
(Legal Corporation Name of Business)

Business Name (DBA)		Business Address
Business E-mail Address		Personal E-mail Address
Business Telephone Number	Cell Phone Number	Type and Class of License(s) Currently Held
<input type="checkbox"/> Interior Expansion: New Seating Capacity: _____ New Fire Occupancy: _____ or <input type="checkbox"/> N/A		
<input type="checkbox"/> Exterior Expansion: New Seating Capacity: _____ New Total Customer Capacity: _____ or <input type="checkbox"/> N/A		

3. Verification

A signature is required.

- I have read and agree to the [Terms and Conditions](#) for electronic signatures, records and payment.
- I certify or declare under penalty of perjury under the laws of the State of Minnesota that the information on this application, checklist, and attached documents is true and correct. All information given is subject to verification by the State of Minnesota. I understand that false information may result in the denial, suspension, or revocation of my business license.

By typing your name, you are electronically signing this application.

Signature _____ Title _____ Date _____

Amended Business Plans

Attach a typed report describing in detail changes to your business operations. You may attach extra documents to your report.

1. Alcohol Server Training Plan. Describe staff training that includes:

- Name of trainer
- Topics covered
- Ongoing training program
- Policy for carding and the use of electronic ID Scanners
- Reward and discipline policy for serving alcohol to minors and
- Self-audits

Our website has for more information about [Alcohol Service Resources](#).

No changes.

2. Safety. Attach your [Police Safety Plan Review Form](#) to help prevent illegal behaviors and disorderly customers at your business, parking area, and neighborhood.

No changes.

3. Noise. Attach your [Sound Management Plan](#) which details how you will manage sound from your business. A Sound Plan is not required for Off Sale Liquor stores.

No changes.

4. Litter Removal. You are required to clean litter within a 100 foot radius from your business. Describe your plans for litter, graffiti, and garbage. Include staff and hours assigned and plans during the warm weather months.

No changes.

5. Entertainment. Describe the following:

- type of entertainment at your business
- days and hours of the entertainment and
- age group which the entertainment is directed

No changes.

6. Team Sponsorships. Tell us the types of teams you may sponsor: softball, broomball, soccer, rugby, football, or other competitive sports.

No changes.

7. Hours of Operation.

- Specify the hours for every day of the week
- Include both inside and outside hours

No changes.

8. Food Service.

- List the hours of full food service and reduced food service
- Include the staffing model of your kitchen

No changes.

9. Charitable Gambling Activities. Identify the types of games, hours, gambling manager and name of charity.

No changes.

10. Applicant's Experience and Background with Liquor, Restaurant or Retail Sales. Include a resume or summary of work experience.

No changes.

11. Advertising. Attach a copy of all the sites you will advertise, such as social media, website, flyers, coupons, table tents, etc.

No changes.

12. Promoters. If you plan to work with promoters, you must have a written signed contract that includes the following:

- Statement of truth in advertising
- Cancellation rights if contract is not followed
- Promoter contact information

Submit a sample contract. Signed contracts must be made available to licensing official upon request.

No changes.

Acknowledgement and Agreement

I, (print name) _____, an authorized corporate officer, partner or owner, hereby acknowledge and agree to the following:

The attached business plan is a true and correct; and

Any material change in the business plan must be submitted to an approved by the Business Licenses Division before implementation; and

Violation of this business plan may result in suspension, revocation, or refusal to renew my license or in a civil fine determined by the Minneapolis City Council.

I have read and agree to the [Terms and Conditions](#) for electronic signatures.

By typing your name, you are electronically signing this application.

Signature of Applicant: _____ Title: _____ Date: _____