

License Application: Vending Machines – Adding Additional Machines

Definition: Individuals with a Vending Machine License may add additional machines that they own and maintain to their current license. The vending machine license fee is applied to each machine.

If you do not currently have a Minneapolis Vending Machine license, use the [Vending Machine](#) application.

For any questions, send an email to businesslicenses@minneapolismn.gov or call 612-673-2080.

1. Application requirements

- Complete the information 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.
- There is a [fee](#), for this application. You can pay by
 - ☐ **Cash:** Do not mail cash, must pay in person.
 - ☐ **Check:** Make checks payable to- Minneapolis Finance Department
 - ☐ **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.

Applicant Name		Business Name	
Business Address		License Number	
E-mail address		Business Telephone Number	Cell Phone Number
Number of Machines	Building Address	Location of Machines in Building	Manager at Location
Total:			

The City of Minneapolis uses the information on this application to determine qualifications for a license. You are not legally required to provide this information. If you refuse, we cannot approve your application. MN Statute 270C.72 requires your Minnesota Tax ID Number and either a Social Security Number or Individual Tax ID Number. These may be given to the Minnesota Commissioner of Revenue if requested. After we approve your license, all information except your Social Security Number is public (MN Statutes, Chapter 13).

A signature is required.

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

I, (print name) _____, 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 of Applicant _____ Title _____ Date _____