



Lake Minnetonka Conservation District
5341 Maywood Road, Suite 200
Mound, MN 55364
 Phone: (952) 745-0789

ON-SALE INTOXICATING LIQUOR LICENSE

LMCD Fee _____ License # _____ Name of Boat _____

(For LMCD use) _____ Public Hearing Date _____

Because this form is to be copied, please use black ink or type. The form may be filled out online and printed.

I _____ as _____ for
 (Name of person making application) (individual owner, officer, or partner)

and in behalf of _____ hereby submit in
 (Myself, names of partners, name of corporation or association)

duplicate this application for on-sale intoxicating liquor license for the _____ located at

 (Name of Charter Boat)

 (Street address of home port of call)

For the sale of intoxicating liquor in accordance with the provisions of the Minnesota Statutes, Chapter 340A and Chapter 437, Section 6, Minnesota Laws 1986, and of Lake Minnetonka Conservation District (LMCD) Code Chapter V, §5.01 to 5.02 Subd.2, 5.02 Subd. 4 to 5.09, and 5.41 to 5.47 and to LMCD Resolution No 54, commencing upon board approval, 20__ and ending December 31 of the licensed year. Liquor sales are not allowed under LMCD license while charter boat is in the port-of-call; license for those sales falls under the jurisdiction of the municipality involved.

Annual fee for an on-sale intoxicating liquor license..... \$1,000.00
 Annual fee for a special license authorizing sale of intoxicating liquor on Sunday....\$ 150.00

Fee for a preliminary investigation required to be paid on submission of an initial application or an application for transfer of an on-sale liquor license with any balance to be refunded and any over-cost to be prepaid \$3,000.00

TOTAL FEE ATTACHED..... \$

(Application fees are non-refundable)

In support of said application and in accordance with the requirements as set forth in said ordinance, there is also attached hereto, in white duplicate: () Part I, General Information; () Part II., Personal Information; () Liquor Liability Insurance (Dram Shop Statement)

Date: _____

 Signature of person making application

For _____
 (Myself, names of partners, names of corporation or association)