

Date: February 27, 2023 Item No.: 10.b

Department Approval

City Manager Approval

Item Description: Approval of 1Temporary Liquor License, and 2 Temporary Gambling Permits

BACKGROUND

Chapter 301 of the City Code requires all applications for business and other licenses to be submitted to the City Council for approval. The following application is submitted for consideration:

Temporary Liquor License

- 6 Saint Rose of Lima Catholic School
- 7 2048 Hamline Ave N.
- 8 Roseville, MN 55113

9

Saint Rose of Lima Catholic School will be hosting a fundraising event for their Athletic booster Club on April 1, 2023. This is their first event in 2023, their total number of days is 1 out of the limit of 12 for the calendar year.

13

14

Temporary Gambling Permit

- Saint Rose of Lima Catholic School
- 16 2048 Hamline Ave N.
- 17 Roseville, MN 55113

18

Saint Rose of Lima Catholic School will be holding a raffle at their location at 2048 Hamline Ave N. on April 1, 2023.

212223

- International Union of Operating Engineers, Local 49
- 24 2829 Anthony Lane S
- 25 Minneapolis, MN 55418

26

International Union of Operating Engineers, Local 49 is a non-profit group which is holding a raffle at Midland Hills Country Club located at 2001 Fulham St. on July 17, 2023.

29

30 POLICY OBJECTIVE

31 Required by City Code

32 **BUDGET IMPLICATIONS**

33 The correct fees were paid to the City at the time the application(s) were made.

34 RACIAL EOUITY IMPACT SUMMARY

35 NA

STAFF RECOMMENDATION 36

- Staff has reviewed the application(s) and has determined that the applicant(s) meet all City requirements. 37
- Staff recommends approval of the license(s). 38

REQUESTED COUNCIL ACTION

Motion to approve the Temporary Liquor License for St. Rose of Lima Catholic School, and the Temporary 40 41

Gambling Permits for St. Rose Catholic School and International Union of Operating Engineers Local 49.

42 43

44

45

46

39

Prepared by: Katie Bruno, Deputy City Clerk

A: Application, Saint Rose of Lima Catholic School Attachments:

B: Application, Saint Rose of Lima Catholic School

C: Application, International Union of Operating Engineers Local 49



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 organiz	ed	Tax exer	npt number
Saint Rose of Lima Catholic School	and the second s	9/1/1941		8570281	
Address	City		State		Zip Code
2048 Hamline Ave. No.	Roseville		Minnesota		55113
Name of person making application		Business pho	one	Home p	hone
Joseph Juaire jjuaire@saintroseoflima.net		651-357-120	4		elika kanana arawa katiyi ini maya maya antani ini angaya
Date(s) of event	Type of orga	anization	Microdistille	ery Sı	mall Brewer
April 1, 2023	Club [Charitable	X Religiou	ıs 🗍 Oth	ner non-profit
Organization officer's name	City		State	Feat	Zip Code
Father Marc Paveglio	Roseville		Minnesota		55113
Organization officer's name	City		State		Zip Code
		And the second s	Minnesota	distinct and Military	
Organization officer's name	City		State		Zip Code
			Minnesota		1
Location where permit will be used. If an outdoor area, describe. School cafeteria. Athletic Booster Club Bean Bag Toss and Raffle fither the applicant will contract for intoxicating liquor service give the	name and ad	ldress of the lid	quor license	providing	the service.
School cafeteria. Athletic Booster Club Bean Bag Toss and Raffle					the service.
School cafeteria. Athletic Booster Club Bean Bag Toss and Raffle f the applicant will contract for intoxicating liquor service give the f the applicant will carry liquor liability insurance please provide the Catholic Mutual Insurance, \$1,000,000	ne carrier's nai PROVAL	me and amoui	nt of covera <u>c</u>	ge.	
School cafeteria. Athletic Booster Club Bean Bag Toss and Raffle f the applicant will contract for intoxicating liquor service give the f the applicant will carry liquor liability insurance please provide the Catholic Mutual Insurance, \$1,000,000	ne carrier's nai PROVAL	me and amoui	nt of covera <u>c</u>	ge. ENFORCEMEN	
School cafeteria. Athletic Booster Club Bean Bag Toss and Raffle f the applicant will contract for intoxicating liquor service give the f the applicant will carry liquor liability insurance please provide the Catholic Mutual Insurance, \$1,000,000 API APPLICATION MUST BE APPROVED BY CITY OR COUNTY BEI	ne carrier's nai PROVAL	me and amoui	nt of coverag	ge. Enforcemen	
f the applicant will contract for intoxicating liquor service give the f the applicant will carry liquor liability insurance please provide the Catholic Mutual Insurance, \$1,000,000 APPLICATION MUST BE APPROVED BY CITY OR COUNTY BEI	ne carrier's nai PROVAL	me and amoui	nt of coverag	ge. ENFORCEMEN roved Date	NT
School cafeteria. Athletic Booster Club Bean Bag Toss and Raffle f the applicant will contract for intoxicating liquor service give the f the applicant will carry liquor liability insurance please provide the Catholic Mutual Insurance, \$1,000,000 APPLICATION MUST BE APPROVED BY CITY OR COUNTY BEI City or County approving the license Fee Amount	ne carrier's nai PROVAL	me and amoul	nt of coverag	ge. ENFORCEMEN roved Date mail Addre	NT ess

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

MINNESOTA LAWFUL GAMBLING

LG220 Application for Exempt Permit

11/17 Page 1 of 2

An exempt permit may be issued to a nonprofit organization that:

- · conducts lawful gambling on five or fewer days, and
- awards less than \$50,000 in prizes during a calendar year.

If total raffle prize value for the calendar year will be \$1,500 or less, contact the Licensing Specialist assigned to your county by calling 651-539-1900.

Application Fee (non-refundable)

Applications are processed in the order received. If the application is postmarked or received 30 days or more before the event, the application fee is **\$100**; otherwise the fee is **\$150**.

Due to the high volume of exempt applications, payment of additional fees prior to 30 days before your event will not expedite service, nor are telephone requests for expedited service accepted.

, , , , , , , , , , , , , , , , , , , ,	
ORGANIZATION INFORMATION	
Organization Name: Saint Rose of Lima Catholic Scho	Previous Gambling Ool Permit Number: X-62002-21-037
Minnesota Tax ID Number, if any: <u>8570281</u>	Federal Employer ID Number (FEIN), if any: 41-0790158
Mailing Address: 2048 Hamline Ave North	
City: Roseville	State: MN zip: 55113 County: Ramsey
Name of Chief Executive Officer (CEO): Fr. Marc	Paveglio
CEO Daytime Phone: 651-357-1201 CEMail permit to (if other than the CEO): jjuaire@	(permit will be emailed to this email address unless otherwise indicated below
NONPROFIT STATUS	santi oseonima.net
THE PROPERTY OF THE PROPERTY O	
Type of Nonprofit Organization (check one): Fraternal ✓ Religious	Veterans Other Nonprofit Organization
Attach a copy of <u>one</u> of the following showing	
(DO NOT attach a sales tax exempt status or feder	al employer ID number, as they are not proof of nonprofit status.)
IRS toll free at 1-877-829-5500. IRS - Affiliate of national, statewide, or If your organization falls under a parent 1. IRS letter showing your parent organization falls under a parent organization falls unde	Secretary of State website, phone numbers: www.sos.state.mn.us 651-296-2803, or toll free 1-877-551-6767 er in your organization's name your federal income tax exempt letter, have an organization officer contact the international parent nonprofit organization (charter) corganization, attach copies of both of the following: nization is a nonprofit 501(c) organization with a group ruling; and nt organization recognizing your organization as a subordinate.
GAMBLING PREMISES INFORMATION	
Name of premises where the gambling event will be (for raffles, list the site where the drawing will take Physical Address (do not use P.O. box): 2072 Hai	e place): Saint Rose of Lima Catholic School
Check one: City: Roseville	Zip: 55113 County: Ramsey
	Zip: County:
Date(s) of activity (for raffles, indicate the date of	the drawing): April 1, 2023
Check each type of gambling activity that your org	anization will conduct:
Bingo Paddlewheels	Pull-Tabs Tipboards 🗸 Raffle
from a distributor licensed by the Minnesota Gaml devices may be borrowed from another organizati	ards, raffle boards, paddlewheels, pull-tabs, and tipboards must be obtained bling Control Board. EXCEPTION: Bingo hard cards and bingo ball selection ion authorized to conduct bingo. To find a licensed distributor, go to identify the List of Licenses tab. or call 651-539-1900

the Minnesota Gambling Control Board)	MENT (required before submitting application to		
CITY APPROVAL for a gambling premises located within city limits	COUNTY APPROVAL for a gambling premises located in a township		
The application is acknowledged with no waiting period.	The application is acknowledged with no waiting period.		
The application is acknowledged with a 30-day waiting period, and allows the Board to Issue a permit after 30 d (60 days for a 1st class city).	The application is acknowledged with a 30-day waiting period, and allows the Board to issue a permit after 30 days.		
The application is denied.	The application is denied.		
Print City Name:	Print County Name:		
Signature of City Personnel:	Signature of County Personnel:		
Title: Date:			
	TOWNSHIP (if required by the county)		
The city or county must sign before submitting application to the Gambling Control Board.	On behalf of the township, I acknowledge that the organization is applying for exempted gambling activity within the township limits. (A township has no statutory authority to approve or deny an application, per Minn. Statutes, section 349.213.) Print Township Name: Signature of Township Officer:		
	Title: Date:		
CHIEF EXECUTIVE OFFICER'S SIGNATURE (re			
The information provided in this application is complete and ac report will be completed and returned to the Board within 30 d	curate to the best of my knowledge. I acknowledge that the financial ays of the event date.		
REQUIREMENTS	MAIL APPLICATION AND ATTACHMENTS		
Complete a separate application for: • all gambling conducted on two or more consecutive days; • all gambling conducted on one day. Only one application is required if one or more raffle drawings acconducted on the same day. Financial report to be completed within 30 days after the gambling activity is done: A financial report form will be mailed with your permit. Completed and return the financial report form to the Gambling Control Board.	Mail application with: a copy of your proof of nonprofit status; and application fee (non-refundable). If the application is postmarked or received 30 days or more before the event the application fee is \$100; otherwise the fee is \$150. Make check payable to State of Minnesota.		
Your organization must keep all exempt records and reports for 3-1/2 years (Minn. Statutes, section 349.166, subd. 2(f)).	Questions? Call the Licensing Section of the Gambling Control Board at 651-539-1900.		
Data privacy notice: The information requested application. Your orgon this form (and any attachments) will be used address will be public by the Gambling Control Board (Board) to by the Board. All other	anization's name and ment of Public Safety; Attorney General; Commissioners of Administration, Minnesota er information provided will Management & Budget, and Revenue: Legislati		

Data privacy notice: The information requested on this form (and any attachments) will be used by the Gambling Control Board (Board) to determine your organization's qualifications to be involved in lawful gambling activities in Minnesota. Your organization has the right to refuse to supply the information; however, if your organization refuses to supply this information, the Board may not be able to determine your organization's qualifications and, as a consequence, may refuse to issue a permit. If your organization supplies the information requested, the Board will be able to process the

application. Your organization's name and address will be public information when received by the Board. All other information provided will be private data about your organization until the Board issues the permit. When the Board issues the permit, all information provided will become public. If the Board does not issue a permit, all information provided remains private, with the exception of your organization's name and address which will remain public. Private data about your organization are available to Board members, Board staff whose work requires access to the information; Minnesota's Depart-

ment of Public Safety; Attorney General; Commissioners of Administration, Minnesota Management & Budget, and Revenue; Legislative Auditor, national and International gambling regulatory agencies; anyone pursuant to court order; other individuals and agencies specifically authorized by state or federal law to have access to the Information; individuals and agencies for which law or legal order authorizes a new use or sharing of information after this notice was given; and anyone with your written consent.

4/22 Page 1 of 4

An exempt permit may be issued to a nonprofit organization that:

- · conducts lawful gambling on five or fewer days, and
- awards less than \$50,000 in prizes during a calendar year.

If total raffle prize value for the calendar year will be \$1,500 or less, contact the Licensing Specialist assigned to your county by calling 651-539-1900.

Application Fee (non-refundable)

Applications are processed in the order received. If the application is postmarked or received 30 days or more before the event, the application fee is **\$100**; otherwise the fee is **\$150**.

Due to the high volume of exempt applications, payment of additional fees prior to 30 days before your event will not expedite service, nor are telephone requests for expedited service accepted.

ORGANIZATION INFORMATION				
Organization Name: International Union of Operating Engineers, Local 49 Previous Gambling Permit Number: X-X-93312-19-006 Federal Employer ID Number, if any: 8099149 (Payroll purposes) Number (FEIN), if any: 41-0329340				
Mailing Address: 2829 Anthony Lane South				
City: Minneapolis State: MN Zip: 55418 County: Hennepin				
Name of Chief Executive Officer (CEO): Jason George, Business Manager/Financial Secretary				
CEO Daytime Phone: 612-788-9441 CEO Email: jgeorge@local49.org (permit will be emailed to this email address unless otherwise indicated below)				
Email permit to (if other than the CEO):				
NONPROFIT STATUS				
Type of Nonprofit Organization (check one): Fraternal Religious Veterans Other Nonprofit Organization				
Attach a copy of one of the following showing proof of nonprofit status: (DO NOT attach a sales tax exempt status or federal employer ID number, as they are not proof of nonprofit status.)				
A current calendar year Certificate of Good Standing Don't have a copy? Obtain this certificate from: MN Secretary of State, Business Services Division 60 Empire Drive, Suite 100 St. Paul, MN 55103 IRS income tax exemption (501(c)) letter in your organization's name Don't have a copy? To obtain a copy of your federal income tax exempt letter, have an organization officer contact the IRS toll free at 1-877-829-5500. IRS - Affiliate of national, statewide, or international parent nonprofit organization (charter) If your organization falls under a parent organization, attach copies of both of the following: 1. IRS letter showing your parent organization is a nonprofit 501(c) organization with a group ruling; and 2. the charter or letter from your parent organization recognizing your organization as a subordinate.				
GAMBLING PREMISES INFORMATION				
Name of premises where the gambling event will be conducted (for raffles, list the site where the drawing will take place):Midland Hills Country Clug Club Physical Address (do not use P.O. box): 2001 Fulham Street Check one:				
City: Roseville Zip: 55113 County: Ramsey				
Township: Zip: County:				
Date(s) of activity (for raffles, indicate the date of the drawing): <u>July 17th, 2023</u>				
Check each type of gambling activity that your organization will conduct:				
Bingo Paddlewheels Pull-Tabs Tipboards Raffle Gambling equipment for bingo paper, bingo boards, raffle boards, paddlewheels, pull-tabs, and tipboards must be obtained doubted many be between the property of the Minnesota Gambling Control Board. EXCEPTION: Bingo hard cards and bingo ball selection				
devices may be borrowed from another organization authorized to conduct bingo. To find a licensed distributor, go to www.mn.gov/gcb and click on Distributors under the List of Licensees tab, or call 651-539-1900.				

LG	220 Application for Exempt Permit	4/2: Page 2 of 4
LOC the	CAL UNIT OF GOVERNMENT ACKNOWLEDGME Minnesota Gambling Control Board)	NT (required before submitting application to
	CITY APPROVAL for a gambling premises located within city limits	COUNTY APPROVAL for a gambling premises located in a township
	The application is acknowledged with no waiting period.	The application is acknowledged with no waiting period.
	The application is acknowledged with a 30-day waiting period, and allows the Board to issue a permit after 30 days (60 days for a 1st class city).	The application is acknowledged with a 30-day waiting period, and allows the Board to issue a permit after 30 days.
The application is denied.		The application is denied.
Print City Name:		Print County Name:
Signature of City Personnel:		Signature of County Personnel:
Title:	Date:	Title: Date:
	The city or county must sign before submitting application to the Gambling Control Board.	TOWNSHIP (if required by the county) On behalf of the township, I acknowledge that the organization is applying for exempted gambling activity within the township limits. (A township has no statutory authority to approve or deny an application, per Minn. Statutes, section 349.213.) Print Township Name: Signature of Township Officer: Date:
CHI	EF EXECUTIVE OFFICER'S SIGNATURE (requ	ired)
repor Chief	nformation provided in this application is complete and accura t will be completed and returned to the Board within 30 days Executive Officer's Signature: (Signature must be CEO's signature Name: Jason George, Business Manager/Financial Secr	e; designee may not sign) Date: 2/3/23
REQ	UIREMENTS	MAIL APPLICATION AND ATTACHMENTS
		Mail application with: a copy of your proof of nonprofit status; and application fee (non-refundable). If the application is postmarked or received 30 days or more before the event, the application fee is \$100; otherwise the fee is \$150.

Financial report to be completed within 30 days after the gambling activity is done:

A financial report form will be mailed with your permit. Complete and return the financial report form to the Gambling Control Board.

Your organization must keep all exempt records and reports for 3-1/2 years (Minn. Statutes, section 349.166, subd. 2(f)).

Make check payable to State of Minnesota.

To: Minnesota Gambling Control Board 1711 West County Road B, Suite 300 South Roseville, MN 55113

Questions?

Call the Licensing Section of the Gambling Control Board at 651-539-1900.

Data privacy notice: The information requested on this form (and any attachments) will be used by the Gambling Control Board (Board) to determine your organization's qualifications to be involved in lawful gambling activities in Minnesota. Your organization has the right to refuse to supply the information; however, if your organization refuses to supply this information, the Board may not be able to determine your organization's qualifications and, as a consequence, may refuse to issue a permit. If your organization supplies the information requested, the Board will be able to process the

application. Your organization's name and address will be public information when received by the Board. All other information provided will be private data about your organization until the Board issues the permit. When the Board issues the permit, all information provided will become public. If the Board does not issue a permit, all information provided remains private, with the exception of your organization's name and address which will remain public. Private data about your organization are available to Board members, Board staff whose work requires access to the information; Minnesota's Depart-

ment of Public Safety; Attorney General; Commissioners of Administration, Minnesota Management & Budget, and Revenue; Legislative Auditor, national and international gambling regulatory agencies; anyone pursuant to court order; other individuals and agencies specifically authorized by state or federal law to have access to the information; individuals and agencies for which law or legal order authorizes a new use or sharing of information after this notice was given; and anyone with your written consent.

This form will be made available in alternative format (i.e. large print, braille) upon request.