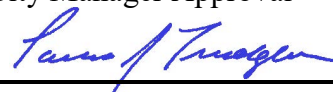



REQUEST FOR COUNCIL ACTION

Date: August 9, 2021
Item No.: 9.b

Department Approval

City Manager Approval



Item Description: Approval of 1 Temporary On-Sale Liquor License and 2 Massage Therapy Establishment licenses

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 applications are submitted for consideration:

Temporary Liquor License

Bent Brewstillery
1744 Terrace Dr
Roseville, MN 55113

Bent Brewstillery is hosting a BBQ event on September 11, 2021. This is their third event in 2021, their total number of days is 4 out of the limit of 12 for the calendar year.

Massage Therapy Establishment

Restore by the River, LLC
2233 Hamline Ave #207
Roseville, MN 55113

Kasinko Massage, LLC
2480 Fairview Ave N #119
Roseville, MN 55113

POLICY OBJECTIVE

Required by City Code

FINANCIAL IMPACTS

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

STAFF RECOMMENDATION

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

REQUESTED COUNCIL ACTION

Motion to approve the Temporary Liquor License, and Massage Therapy Establishment Licenses.

Prepared by: Katie Bruno, Deputy City Clerk

Attachments: A: Application, Bent Brewstillery
B: Application, Restore by the River
C: Application, Kasinko Massage



Minnesota Department of Public Safety
 Alcohol and Gambling Enforcement Division
 445 Minnesota Street, Suite 222, St. Paul, MN 55101
 651-201-7500 Fax 651-297-5259 TTY 651-282-6555
**APPLICATION AND PERMIT FOR A 1 DAY
 TO 4 DAY TEMPORARY ON-SALE LIQUOR LICENSE**

Attachment A

Name of organization	Date organized	Tax exempt number
Bent Brewstillery	Jun 11, 2011	45-2650 83

Address	City	State	Zip Code
1744 Terrace Dr	Roseville	Minnesota	55113

Name of person making application	Business phone	Home phone
Bartley Blume	651-233-3843	

Date(s) of event	Type of organization
9/11/21	<input checked="" type="checkbox"/> Club <input type="checkbox"/> Charitable <input type="checkbox"/> Religious <input type="checkbox"/> Other non-profit

Organization officer's name	City	State	Zip Code
Bartley Blume	Roseville	Minnesota	55113

Organization officer's name	City	State	Zip Code
		Minnesota	

Organization officer's name	City	State	Zip Code
		Minnesota	

Organization officer's name	City	State	Zip Code
		Minnesota	

Location where permit will be used. If an outdoor area, describe.
 BBQ Event on premises

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.
 West Bend Insurance Company
 Aggregate Limit \$2,000,000
 Each Common \$1,000,000

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

City or County approving the license	Date Approved
Fee Amount	Permit Date
Date Fee Paid	City or County E-mail Address
	City or County Phone Number

Signature City Clerk or County Official _____ Approved Director Alcohol and Gambling Enforcement _____

CLERKS NOTICE: Submit this form to Alcohol and Gambling Enforcement Division 30 days prior to event.

**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**



Administration Department, License Division
2660 Civic Center Drive, Roseville, MN 55113
(651) 792-7023

Massage Therapy Establishment License Application

New License Renewal For License Year Ending June 30, 2021

Business Name Restore by the River LLC #007

Business Address 2233 Hamline Ave. N. St. Paul, MN 55113

Business Phone (651) 447-1177

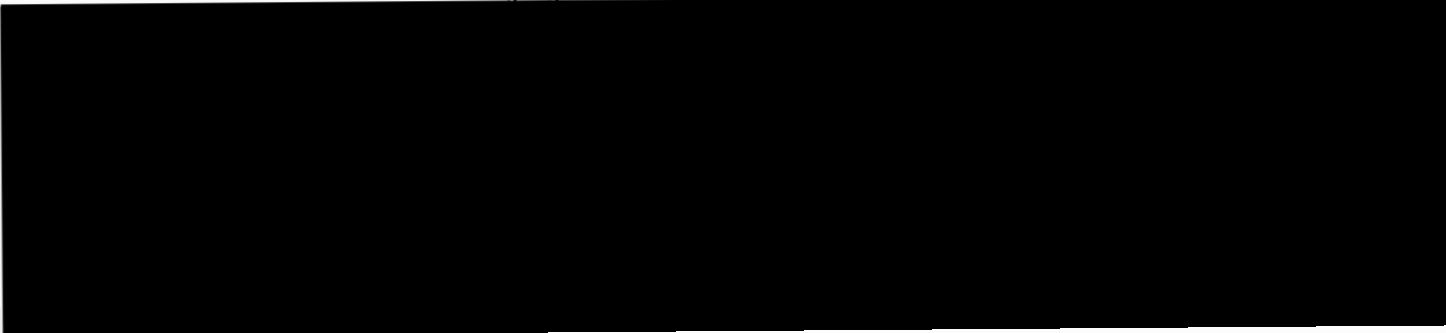
Email Address amsthe123@gmail.com



Attach Proof of Minnesota Tax Identification form

Person to Contact in Regard to Business License:

Full Legal Name (Please Print) Matthews Amy M



Sex: Male Female

Have you ever used or been known by any name other than the legal name given above?
 Yes No If Yes, List each full name along with dates and places where used.

Has the business held any previous massage therapy establishment licenses in the past five years? If yes, in which city was it licensed?
 Yes St. Paul No

NOTE: Failure to disclose previous licenses will result in an automatic denial of your application.

Falsification of answers given or material submitted will result in denial of application.

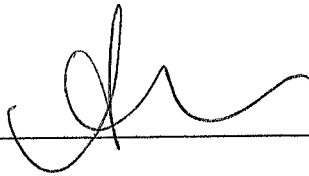
The information that you are asked to provide on the application is classified by State law as either public, private or confidential. All data, with the exception of driver's license numbers and social security numbers, will constitute public record if and when the license is granted. Our intended use of the information is to perform the background check procedures required prior to license issuance. If you refuse to supply the information, the license application may not be processed.

CONSENT TO BACKGROUND CHECK I hereby consent to and authorize the Roseville Police Department to use the information I have provided to check criminal histories, arrest and driving records, and warrant information; and for the Police Department to consider these records to determine my eligibility for a License. I understand that the information contained in the criminal background investigation is not public, except that it may be conveyed to other law enforcement or licensing agencies.

By signing below you certify that the above information is correct and authorize the City of Roseville Police Department to run your information for the required background checks. In addition, you acknowledges that you are responsible for reviewing the background and work history of your employees, including those that have received a massage therapist license from the City.

(Note: Background checks and application processing may take up to 60 days to complete).

Signature _____



Date _____

08/02/2021

Payment due at the time of application:

First time applicants: Background Investigation Fee	\$150
Annual License Fee (prorated quarterly)	\$300
October-December	\$150
January-March	\$75
April-June	\$37

Make checks payable to: City of Roseville



Administration Department, License Division
2660 Civic Center Drive, Roseville, MN 55113
(651) 792-7023

Massage Therapy Establishment License Application

Form fields for license application: New License (checked), Renewal, Business Name (Kasinko Massage LLC), Business Address (2480 Fairview Ave N. unit. 121), Business Phone ((651) 785-3757), Email Address (KASINKOMASSAGE@GMAIL.COM), For License Year Ending June 30, 2022

Person to Contact in Regard to Business License:

Full Legal Name (Please Print) LOR KA SEN

Sex: Male Female (checked)

Have you ever used or been known by any name other than the legal name given above? Yes No (checked) If Yes, List each full name along with dates and places where used.

Has the business held any previous massage therapy establishment licenses in the past five years? If yes, in which city was it licensed?

Yes No (checked)

NOTE: Failure to disclose previous licenses will result in an automatic denial of your application.


Falsification of answers given or material submitted will result in denial of application.

The information that you are asked to provide on the application is classified by State law as either public, private or confidential. All data, with the exception of driver's license numbers and social security numbers, will constitute public record if and when the license is granted. Our intended use of the information is to perform the background check procedures required prior to license issuance. If you refuse to supply the information, the license application may not be processed.

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(Note: Background checks and application processing may take up to 60 days to complete).

Signature  _____

Date AUG 3, 2021

Payment due at the time of application:

First time applicants: Background Investigation Fee	\$150
Annual License Fee (prorated quarterly)	\$300
October-December	\$225
January-March	\$150
April-June	\$75

Make checks payable to: City of Roseville