



**On Sale 3.2 Malt Liquor
License Fee: \$425.00**

111 Hassan Street Southeast
Hutchinson, MN 55350
(320) 587-5151/Fax: (320) 234-4240

**City of Hutchinson
APPLICATION FOR 3.2 MALT LIQUOR LICENSE – ON SALE
In provisions of the City of Hutchinson Municipal Code Chapter 112**

All applications must be received at least 30 days before City Council Meeting in order to be considered

Business/Applicant Information			
_____		_____	
<i>Business Name</i>		<i>Phone Number</i>	
_____		_____	_____
<i>Business Address</i>		<i>City</i>	<i>State</i> <i>Zip</i>

<i>Type of Business</i>			
Applicant Information			
_____		_____	
<i>Applicant Name</i>		<i>Phone Number</i>	
_____		_____	_____
<i>Applicant Address</i>		<i>City</i>	<i>State</i> <i>Zip</i>
Corporate Information			
_____		_____	
<i>Corporate Name</i>		<i>Phone Number</i>	
_____		_____	
<i>Corporate Address</i>		<i>City</i>	
_____		_____	
<i>State</i>		<i>Zip</i>	
Officer(s)/Owner(s) of the Organization/Business (if necessary, list additional names on separate sheet)			
_____		_____	
<i>Name</i>		<i>Title</i>	
_____		_____	
<i>Name</i>		<i>Title</i>	
_____		_____	
<i>Name</i>		<i>Title</i>	
Checklist			
The following items need to be completed and/or attached in order for the application to be processed:			
Certificate of insurance covering the license period: <input type="checkbox"/> yes <input type="checkbox"/> no			
Application fee paid in full (check or money order): <input type="checkbox"/> yes <input type="checkbox"/> no			
Application completed in full and signed by applicant: <input type="checkbox"/> yes <input type="checkbox"/> no			



HUTCHINSON

A CITY ON PURPOSE.

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Hutchinson, MN 55350

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Release of Information Form

As an applicant for a license/permit from the City of Hutchinson, Minnesota, I am required to furnish information, which that agency may use in determining my moral, physical, mental, and financial qualifications. In this connection, I hereby expressly authorize release of any and all information, which you may have concerning me, including information of a confidential or privileged nature.

I hereby release the agency with which I am seeking an application for a permit, and any organization, company, or person furnishing information to that agency as expressly authorized above, from any liability for damage, which may result from furnishing the information requested.

Applicant's Information <i>(Please Print)</i>			
Name:	_____	_____	_____
	<i>First Name</i>	<i>Middle Name</i>	<i>Last Name</i>
Address:	_____		
	_____	_____	_____
	<i>City</i>	<i>County</i>	<i>State</i>
Date of Birth:	_____	_____	_____
	<i>Month</i>	<i>Day</i>	<i>Year</i>
Place of Birth:	_____	_____	
	<i>City</i>	<i>State</i>	
Social Security Number:	_____		
Driver's License Number:	_____		

Applicant's Signature

Date

*Please allow two weeks lead time for an investigation (this **does not** include time allowed for scheduling a public hearing if necessary, a publication notice and a City Council meeting).