CARNIVALS, SHOWS, PUBLIC ENTERTAINMENT (Indoor) LICENSE APPLICATION

Office of the City Clerk City of Robbinsdale

, hereby make application for an Entertainment License, subject to provisions of City Ordinances. I do hereby swear that the several answers and statements, and any attached information set forth by me in this application are true.

Fee: \$150/year

\$75/day

The City Ordinance requires that the data requested in this application must be submitted in order for the City to determine your eligibility for the license. Refusal to provide the data may result in an automatic denial of the requested license. The data provided shall be classified in accordance with the Minnesota Government Data Practices Act. The City Staff shall investigate the data provided. A recommendation for approval or denial, based upon the applicant's eligibility is determined by the provisions of the licensing ordinance and other applicable laws, shall be forwarded to the City Council for final determination. Access to the data provided shall be by officials and employees of the City engaged in administering or monitoring the provisions of the licensing ordinance; and also as allowed for by the Minnesota Government Data Practices Act.

PLEASE PRINT OR TYPE YOUR RESPONSES

(Provide in full the first, middle and last names where requested)

Applicants Full Name & Title			Trade Name or D.B.A.			
Business Address			City	State Zip		Zip
Drivers License No./State Issued Date of E		rirth Residence Phone No.			Business Phone No.	
2nd Contact Person		2nd Contact Residence Phone No.		2nd Contact Business Phone No.		
3rd Contact Person		3rd Contact Residence Phone No.		3rd Contact Business No.		
Provide names, address and phone	numbers of	f three business	references from the met	tropolita	nn area:	
()))	
Provide names, address and phone	numbers or	f three financial	references from the me	tropolita	an area:	
<u> </u>)		(()	
Type of entertainment:Number of Entertainers:Instruments:						
Props and other equipment: Date(s):		Ti	me(s):			
		_				

Set up date and times:					
Describe method of advertising:					
Describe type of security that will be provided during the enterta	ainment:				
Describe provisions for sanitary services:					
Phone Number:	Contact Person:				
The Licensee must submit all of the following (check each item	to indicate it is attached to this application):				
least thirty (30) days before the beginning of the proposed e	D. INDOOR ENTERTAINMENT: * 1) Cash or corporate surety bond made out to the City of Robbinsdale in the amount of \$1,000. (1100.04) 2) \$1,000,000 CSL liability insurance policy with the City of Robbinsdale as additional named insured and certificate holder. * Bond and liability insurance may also be required for indoor entertainment, depending on location and other circumstances. E. Minnesota Tax/Workers Compensation form City Clerk, 4100 Lakeview Ave N., Robbinsdale, MN 55422, at intertainment. Questions should be directed to the City Clerk at				
(763)531-1255 Applicant Signature:	Date:				
RECOMMENDATION OF DEPARTMENT HEADS (Init memorandum)	ial your approval. Give reason for denial on separate DENY/MEMO				
<u>APPROVE</u> <u>CON</u>	NDITIONS? ATTACHED				
Building Official					
Chief of Police					
Fire Marshal					
City Planner					
RETURN TO CITY CLERK'S OFFICE BY:					
PUBLIC HEARING DATE:					
COUNCIL ACTION:					
CONDITIONS:					