CONVENIENCE FOOD/DRIVE-IN

Office of the City Clerk

_____ Building Official

____ City Planner

Office of the City of Rob	ne City Clerk Obinsdale						Fee: \$50/	'year
•		harab	y maka annlica	ition for a Convenience	Food/D	riva In Licansa	subject to provisions	of City
Ordinances. I	do hereby swear that the seve	ral answers	and statements,	and any attached inform	nation se	et forth by me in	this application are true	e.
license. Refuse with the Minne based upon the City Council f	nance requires that the data ral to provide the data may reesota Government Data Pract applicant's eligibility is determination. Acc provisions of the licensing of	esult in an autices Act. Thermined by the cess to the description.	ntomatic denial he City Staff sh he provisions of lata provided si	of the requested license hall investigate the data of the licensing ordinand hall be by officials and	e. The or provide ce and or lemploy	data provided shad. A recomment ther applicable bysees of the City	nall be classified in accordant and ation for approval or laws, shall be forwarded by engaged in administe	ordance denial d to the
	<u>P1</u>	LEASE P	RINT OR T	TYPE YOUR RES	SPONS	<u>SES</u>		
	(Provide	in full the	e first, midd	le and last names	where	requested)		
Appli	cant Name & Title	Trade Name or D.B.A.						
	Business Address			G.	G			
Busin				City	State	e	Zip	
Drive	Drivers License No./State Issued Date of Bi		rth	Residence Phone No.		Business Phone No.		
2nd C	2nd Contact Person 2nd Contact		2nd Contact R	esidence Phone No.	2nd C	Contact Business	Phone No.	
General/PMinnesota	UIREMENTS: ublic Liability Certificate of lateral Tax/Workers' Compensation alid Hennepin County Licens	n Forms					Health Dept.)	
Applicant Sign	ature:							
Date:								
RECOMMEN	DATION OF DEPARTME	ENT HEADS	(Initial your	r approval. Give reason	for deni	ial on separate n	nemorandum.)	
	A PDD OVE		CONDITIO	ONC?		NY/MEMO		

LICENSE APPLICATION