

375 Jackson Street, Suite 220 St. Paul, Minnesota 55101-1806 Phone: 651-266-8989 Fax: 651-266-8951 Visit our website at www.stpaul.gov/dsi

Class "N" License District Council Form

Please complete this form and submit it, via mail or in-person, to the appropriate District Council prior to submitting your application to the City. This notification will allow time for the community to talk with you and provide feedback to the city on your proposed business.

License(s) being applied for:				
BUSINESS INFORMATION				
Applicant Name:	Title:			
Contact Person:	Phone/Email:			
Business Type:	Date of Anticipated Opening:			
Business Address:				
Company Name:	Doing Business As:			
Will you operate the business personally?	Yes	No		
If no , who will operate it?				
ZONING VARIANCE INFORMATION Have you sought a Zoning variance? If so, for what:				
When do you anticipate a decision by the City on your request?				
Do you intent to seek a parking agreement?	Yes	No		
If yes , please provide more information:				
ZONING INFORMATION				

Please answer the following questions (if business is located in Saint Paul proper):

- A. What is the gross floor area for this business?B. What was the previous use of this space?
- D. Is the parking leased or owned?
- E. How many different uses are in the building?
 - i. What are these uses? What is the gross floor area for each?

a.		
	Use	Area
b.		
	Use	Area
c.		
	Use	Area

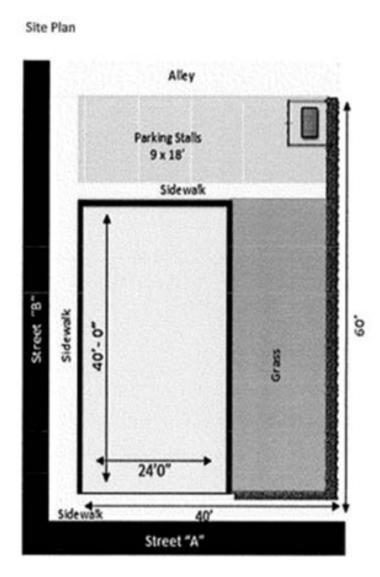
C. How many off-street parking spaces are provided for this business only?

- i. Are there any bar/restaurants in the building operating after midnight? If yes, please list them:
- F. Do you own the property or are you leasing it?
- G. Business Plan

Please provide details of your business plan for the business for which a license is being requested.

- a. Description of Business
- b. Days and Hours Business will be Operating
- c. All Business Services Provided
- d. Outside usage
 - i. Explain all use(s) of outside areas, including all potential activities and associated times
 - ii. Provide description of planned activities to prevent/address safety and neighborhood livability issues, including a security plan

- H. Please attach a site plan of the licensed property (See provided example)
 - I. Drawn to scale
 - II. Showing dimensions
 - III. Showing all property lines
 - IV. Showing the parking lot
 - V. Label all rooms/spaces



Please answer these questions if you are applying for a restaurant/bar/brewery license:

C.	Do you intend to have a drive-thru window?	Yes	No
D.	Will you have a permanent menu board?	Yes	No
E.	Do you intend to serve liquor?	Yes	No
F.	Is this restaurant associated with a chain or franchised business?	Yes	No
G.	Is a self-service condiment bar proposed?	Yes	No
Н.	Are trash receptacles provided for self-service bussing?	Yes	No
l.	Will there be hard finished, stationary seating?	Yes	No
J.	Are your main course food items	Pre Packaged	To Order

K. If you intend to have outdoor seating, please provide additional detail regarding the size of the space and location (sidewalk or patio), hours of operation (if they vary from business hours), how the space will be lit, if live entertainment will be offered, etc.

L. Where do you intend to serve liquor (indoor, outdoor, main level, etc.)?

DSI's Mission

To preserve and improve the quality of life in Saint Paul by protecting and promoting public health and safety for all.

^{*}Please answer the following additional question if you intend to serve liquor