



SAINT PAUL
SAFETY & INSPECTIONS

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

ACKNOWLEDGEMENT OF RECEIPT

CITY OF SAINT PAUL'S TOBACCO ORDINANCE

I acknowledge that I was given a copy of the City of Saint Paul's Legislative code 324, 295 & 65.535, State Statutes 461.21 & 297F.01 and Federal Drug Administration (FDA) 1140.34 for tobacco, by the Department of Safety and Inspections (DSI).

By signing below, I the license holder/applicant for a Tobacco Products Shop license acknowledges that I am responsible for reading, understanding and complying with the information contained therein for the establishment located at;

Business Address: _____

Doing Business As (DBA): _____

License Holders Print Name

Date

License Holders Signature

Date

DSI Office Use Only:

Received By:

Date