



5959 Main Avenue NE  
P.O. Box 9  
Albertville, MN 55301

### APPLICATION FOR ONE-DAY 3.2% MALT LIQUOR LICENSE

<p>The undersigned certifies that it complies with Minnesota State Statutes, Section 340.001, Subdivision 7, in that it qualifies as a “<i>Bona Fide Club</i>” within that section, and that this application makes petition for a limited license as a “<i>Bona Fide Club</i>” for a limited, non-intoxicating malt liquor license.</p> <p>A license fee of <b>\$10.00 per day</b> is required to accompany this application.</p>	<b>Office Use Only</b>
	Date Rec'd: _____
	Amount Pd: _____
	Check/Cash: _____
	License mailed: _____

1. Name of Applicant (organization): \_\_\_\_\_
2. Name and Address of President and Secretary of Applicant:  
\_\_\_\_\_  
\_\_\_\_\_
3. Purpose for which funds derived will be used: \_\_\_\_\_  
\_\_\_\_\_
4. Date(s) of activity: \_\_\_\_\_
5. Premises from which 3.2% malt liquor will be dispensed on said date:  
\_\_\_\_\_
6. Hours of operation
7. Number of previous license obtained this calendar year: \_\_\_\_\_
8. Name, address, telephone number and position held with Club of person signing this application: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature \_\_\_\_\_  
Date