



Minnesota Department of Public Safety
ALCOHOL AND GAMBLING ENFORCEMENT DIVISION
 444 Cedar St./Suite 222
 St. Paul, MN 55101-5133
 (651) 201-7507 FAX (651) 297-5259 TDD (651) 282-6555



**APPLICATION AND PERMIT
 FOR A 1 DAY TEMPORARY CONSUMPTION & DISPLAY PERMIT**

(City or county may not issue more than 10 permits in any one year)

TYPE OR PRINT INFORMATION

| | | | |
|--|---|-------------------|----------|
| NAME OF ORGANIZATION | DATE ORGANIZED | TAX EXEMPT NUMBER | |
| STREET ADDRESS | CITY | STATE | ZIP CODE |
| NAME OF PERSON MAKING APPLICATION | BUSINESS PHONE () | HOME PHONE () | |
| DATE SET UPS WILL BE SOLD | TYPE OF ORGANIZATION CLUB CHARITABLE RELIGIOUS OTHER NONPROFIT | | |
| ORGANIZATION OFFICER'S NAME | ADDRESS | | |
| ORGANIZATION OFFICER'S NAME | ADDRESS | | |
| ORGANIZATION OFFICER'S NAME | ADDRESS | | |
| Location where permit will be used. If an outdoor area, describe | | | |
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APPROVAL

APPLICATION MUST BE APPROVED BY CITY OR COUNTY BEFORE SUBMITTING TO LIQUOR CONTROL

CITY/COUNTY _____ DATE APPROVED _____

CITY FEE AMOUNT _____ PERMIT DATE _____
 (Not to exceed \$25)

DATE FEE PAID _____

SIGNATURE CITY CLERK OR COUNTY OFFICIAL _____

APPROVED DIRECTOR ALCOHOL AND GAMBLING ENFORCEMENT _____

NOTE: Submit this form to the city or county 30 days prior to event. Forward application signed by city and/or county to the address above. If the application is approved the Alcohol and Gambling Enforcement Division will return this application to be used as the permit for the event

PS-09098(12/09)

RIGHTS OF SUBJECTS OF GOVERNMENT DATA

LICENSE AND PERMIT DATA

“TENNESSEN WARNING”

In accordance with the Minnesota Government Data Practices Act, the City of Rochester is required to inform you of your rights as they pertain to the information collected about you. Public information is that information which is available to the general public; Private information is that information which is available to you, not to the public; and confidential information is that information which is not available to you or the public. The information we collect from you is either public or private. The separation of that information is as follows:

PUBLIC – NAME AND ADDRESS OF APPLICANT(S) AT THE TIME OF APPLICATION

PRIVATE – SOCIAL SECURITY INFORMATION, BIRTH DATE INFORMATION

(MS 13.355 & 13.37(a))

The information collected and required from you is to determine your eligibility for a City of Rochester License or Permit. If you do not supply the required information, the City of Rochester will not be able to determine your eligibility.

The dissemination and use of the private data we collect is limited to that necessary for the administration and management of the licensing program. Persons or agencies with whom this information may be shared include:

CITY, COUNTY, AND STATE PERSONNEL INVOLVED IN DETERMINING YOUR ELIGIBILITY, CONTRACTED PUBLIC AUDITORS, AND THOSE INDIVIDUALS TO WHOM YOU GIVE YOUR EXPRESS WRITTEN PERMISSION.

Unless otherwise authorized by state statute or federal law, other government agencies utilizing the reported private data must also treat the information private.

You may wish to exercise your rights as contained in the Minnesota Government Data Practices Act. These rights include:

**THE RIGHT TO SEE AND OBTAIN COPIES OF THE DATA MAINTAINED ON YOU.
THE RIGHT TO BE TOLD THE CONTENTS AND MEANING OF THE DATA.
THE RIGHT TO CONTEST THE ACCURACY AND COMPLETENESS OF THE DATA.**

To exercise these rights, contact the City Clerk’s Office, Room135, City Hall, Rochester, Mn. 55904

I HAVE READ AND UNDERSTAND THE ABOVE INFORMATION REGARDING MY RIGHTS AS A SUBJECT OF GOVERNMENT DATA.

(Signature of Data Subject)

(Date)

White Copy - City Clerk's Office

Buff Copy - Applicant