



**City of Minneapolis  
Licenses and Consumer Services**

350 South 5<sup>th</sup> Street – Room 1  
Minneapolis, MN 55415–1391  
Phone: 612-673-2080  
Fax: 612-673-3399 TTY: 612-673-2157

[www.minneapolismn.gov/business-licensing](http://www.minneapolismn.gov/business-licensing)

## Liquor Caterer's Notification Form

**This form must be sent to [BusinessLicenses@minneapolismn.gov](mailto:BusinessLicenses@minneapolismn.gov) at least 24 hours before your event with alcohol service. You are required to obtain all applicable permits.**

1. LICENSEE INFORMATION		
Business Name (DBA):	Legal/Corporate Name:	Liquor Caterer's License #
Contact Person	Email address	Telephone Number
Describe in detail the principal menu and/or services rendered.		
2. EVENT INFORMATION		
Name and Purpose of the Event (i.e. Jones Wedding Reception)		<input type="checkbox"/> Private Event <input type="checkbox"/> Open to the Public
Business/Building/Location Name		Address
Event Contact Person	Cell Phone Number	Email Address
Date(s)	Time(s)	
Number of people: Guests _____ Staff _____		Type of alcohol to be served: <input type="checkbox"/> Liquor <input type="checkbox"/> Wine <input type="checkbox"/> Beer
List all that will be provided: <input type="checkbox"/> Band <input type="checkbox"/> D.J. <input type="checkbox"/> Dance Area <input type="checkbox"/> Food <input type="checkbox"/> Tent <input type="checkbox"/> Other: _____		
Location Description: <input type="checkbox"/> Licensed Premises <input type="checkbox"/> Unlicensed Premises <input type="checkbox"/> Private Residence <input type="checkbox"/> Other _____		
Event is to be held: <input type="checkbox"/> Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both Indoors and Outdoors		
Identify how the area will be enclosed: _____		
Name of Security Company		# of Security Personnel
I will have the following documents on site during the event:		
<b>Yes    N/A</b>		
<input type="checkbox"/>	<input type="checkbox"/>	Copy of City of Minneapolis Liquor Caterer's License
<input type="checkbox"/>	<input type="checkbox"/>	Copy of this form
<input type="checkbox"/>	<input type="checkbox"/>	Copy of State Liquor Caterer's Permit
<input type="checkbox"/>	<input type="checkbox"/>	Contract between caterer and event sponsor
<input type="checkbox"/>	<input type="checkbox"/>	Approval letter from property owner allowing the sale and consumption of alcoholic beverages
<input type="checkbox"/>	<input type="checkbox"/>	Diagram of premises
<input type="checkbox"/>	<input type="checkbox"/>	Tent permit (Fire) - 612-201-2624
<input type="checkbox"/>	<input type="checkbox"/>	LP gas tank permit (Fire) - 612-201-2624
<input type="checkbox"/>	<input type="checkbox"/>	Temporary occupancy permit (Fire) - 612-201-2624
<input type="checkbox"/>	<input type="checkbox"/>	Amplified sound permit (Environmental Health) - 612-673-3516
<input type="checkbox"/>	<input type="checkbox"/>	Street closure permit (Transportation and Parking Services) - 612-673-5750
3. VERIFICATION		
I agree to permit entry to any officer or investigator who may have legal authority for the purpose of inspection or search. I certify that the above information is true and complete and agree to comply with all applicable laws related to liquor catering.		
<b>SIGNATURE</b> _____	<b>TITLE</b> _____	<b>DATE</b> _____
<b>MAKE CHECKS PAYABLE TO: MINNEAPOLIS FINANCE DEPARTMENT, OR ALL MAJOR CREDIT CARDS ACCEPTED STAFF WILL CONTACT FOR PAYMENT</b>		

