



City of Mora  
101 Lake Street South  
Mora, MN 55051-1588

Tel: 320.364.1173  
Fax: 320.679.3862  
E-mail: [n.segelstrom@cityofmora.com](mailto:n.segelstrom@cityofmora.com)

## **BUSINESS LICENSE APPLICATION Instructions**

- 1) Read and follow these instructions carefully.
- 2) If you have any questions contact Natasha Segelstrom, Administrative Service Director at city hall. Her telephone and e-mail address are shown above.
- 3) Fill in all forms completely and accurately. Attach additional information as directed.
- 4) Incomplete applications **will be returned**, do not submit incomplete applications, it will delay the approval process.
- 5) Renewal applications for alcoholic beverage licenses can take up to four weeks to process. New applications for alcoholic beverage licenses will take longer.
- 6) All annual licenses expire at midnight on August 31<sup>st</sup> each year.
- 7) Complete and sign this **Business License Application** form.
- 8) Complete and sign the attached **Supplemental Application** specific to your license type.
- 9) Complete and sign the attached **Workers' Compensation Certification of Compliance** form.
- 10) Submit a copy of the **Liability Insurance Certificate AND Liquor Liability Insurance Certificate** if applicable for a liquor license.
- 11) Complete and sign the attached **Alcohol Gambling & Enforcement application** form, if applicable for alcohol and/or tobacco licenses.
- 12) Calculate fees and attach payment made *payable to the City of Mora*.
- 13) Submit forms, supporting documentation, and payment to the City of Mora at the above address.
- 14) The license, if approved, will be mailed to you.



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## BUSINESS LICENSE APPLICATION

Municipal Use Only

License Number:

Period Covered:

Approval Date:

Term:

☐ New License or ☐ Renew License

<b>Name of Applicant</b> (name of individual, partnership, corporation, or association):			
Applicant Address:			
Applicant City/State/Zip:			
Applicant Phone:		Applicant Email Address:	
Applicant Cell Phone:		U.S. Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No	
Applicant Driver's License Number:		Applicant Date of Birth:	
<b>Business Name/dba:</b>			
Business Address:			
Business Phone:		Business Website:	
Minnesota Tax ID Number:		Federal Tax ID Number:	
Kanabec County Parcel/Property ID Number: 22.			
IF BUSINESS IS TO BE CONDUCTED UNDER A DESIGNATION, NAME OR STYLE OTHER THAN THE NAME OF THE APPLICANT, ATTACH COPY OF THE CERTIFICATE OF ASSUMED NAME, AS REQUIRED BY CHAPTER 333, MINNESOTA STATUTES CERTIFIED BY THE OFFICE OF THE SECRETARY OF STATE.			

### License Types

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Liquor On-Sale \$2,200      | <input type="checkbox"/> Brew Pub On-Sale \$2,200           | <input type="checkbox"/> Club Liquor On-Sale <200 \$300     |
| <input type="checkbox"/> Liquor Sunday On-Sale \$200 | <input type="checkbox"/> Brew Pub Off-Sale \$225            | <input type="checkbox"/> Club LQ. On-Sale 201-500 \$500     |
| <input type="checkbox"/> Wine On-Sale \$375          | <input type="checkbox"/> Brewer Tap Room \$500              | <input type="checkbox"/> Club LQ. On-Sale 501-1000 \$650    |
| <input type="checkbox"/> 3.2 Beer On-Sale \$125      | <input type="checkbox"/> Small Brewer Off-Sale \$225        | <input type="checkbox"/> Club LQ. On-Sale >1000 \$800       |
| <input type="checkbox"/> 3.2 Beer Off-Sale \$125     | <input type="checkbox"/> Consumption & Display \$125        | <input type="checkbox"/> Tobacco \$125                      |
| <input type="checkbox"/> Pawnbroker \$2,000          | <input type="checkbox"/> Taxicab \$35                       | <input type="checkbox"/> Mixed Municipal Solid Waste \$500  |
| <input type="checkbox"/> Massage Therapist \$60      | <input type="checkbox"/> Sexually Oriented Business \$5,000 | <input type="checkbox"/> Roll-Off Service Solid Waste \$150 |
- ☐ Temporary: Liquor On-Sale / 3.2 Beer On-Sale / Liquor Consumption & Display (Circle ONE)  
\$75 for one day license + \$15 per additional day

**Total Fees:** \$ \_\_\_\_\_

### Term

The applicant requests the above licenses for a term from 12:01 am on the \_\_\_\_\_ day of \_\_\_\_\_ to 12:00 am midnight on the \_\_\_\_\_ day of \_\_\_\_\_.

(All business license periods end 12:00 am midnight, August 31, except for temporary liquor licenses).

### Submittal Checklist

- ☐ Completed Business License Application.
- ☐ Completed Supplemental Application
- ☐ Application Fees made payable to "City of Mora".
- ☐ Completed and signed Certificate of Compliance Minnesota Workers' Compensation Law form.
- ☐ Completed and signed Background Investigation Consent Release.
- ☐ Completed Alcohol and Gambling Enforcement, MN Dept. of Revenue, or other required external organization form(s).
- ☐ Copy of Certificate of Insurance.

\*\* Incomplete applications **will be returned**, do not submit incomplete applications, it will delay the approval process.

Please note: License applications may take up four weeks to process, so please allow ample time between the application and your first event.

### Applicant Signature

I certify that I have read the above questions, and the answers are true and correct to the best of my knowledge.

\_\_\_\_\_ shall perform its activities in full conformance with applicable federal, state and local laws, and shall be responsible for, and shall indemnify, defend and hold harmless the City of Mora and all of the City's officers, employees and agents from and against all claims, suits, liability, damages and losses, specifically including, but not limited to those for loss of use of property, for damage to any property, real or personal, for injury to or death of any person, and for all other liabilities whatsoever including related expenses and actual attorney fees in any way sustained by reason of the activities authorized by this license, permit or agreement in connection with the actions of

\_\_\_\_\_ its employees, agents or officers within the City of Mora.  
(Licensee Name)

The foregoing shall not be construed to be an agreement to indemnify the City of Mora, its officers, agents, or employees against liability for claims, suits, damages and losses to the extent that such claims, suits, damages and losses were caused by or resulting from the gross negligence or willful misconduct of the City of Mora, its officers, employees or agents. This permit, license or agreement shall be construed in accordance with the laws of the State of Minnesota.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### (FOR CITY USE ONLY)

Application Reviewed by City Clerk: ☐ With Conditions ☐ Without Conditions ☐ Not Applicable

Comments/Conditions:

Signature:

Date:

Application Reviewed by Planning/Zoning Dept.: <input type="checkbox"/> With Conditions <input type="checkbox"/> Without Conditions <input type="checkbox"/> Not Applicable	
Comments/Conditions:	
Signature:	Date:

Application Reviewed by Building Department: <input type="checkbox"/> With Conditions <input type="checkbox"/> Without Conditions <input type="checkbox"/> Not Applicable	
Comments/Conditions:	
Signature:	Date:

Application Processed and Reviewed by Licensing Clerk:		
Date Filed:	Fee(s) Paid: \$	Receipt Number:
Background Check Submitted:	<input type="checkbox"/> Approve <input type="checkbox"/> Deny	Property Taxes:
Council Disposition: <input type="checkbox"/> Approve <input type="checkbox"/> Deny	Date:	License Number(s):
Licensing Agent Signature: _____		Date: _____
Comments:		