



Minnesota Department of Public Safety
Alcohol and Gambling Enforcement Division (AGED)
445 Minnesota Street, Suite 1600, St. Paul, MN 55101-5133
Telephone 651-201-7507 Fax 651-297-5259 TTY 651-282-6555
www.dps.mn.us

Application for Optional 2 AM Liquor License

License type code: 2AM License Expiration Date _____ ID# _____
(For Office Use Only)

Licensee Name: _____

Trade Name: _____

Licensed Location Address: _____

City, State, Zip Code: _____

Business Phone: _____

If the above named licensee is a corporation, partnership, or LLC, complete the following for each partner/officer:

Partner/Officer Name	(First Middle Last)	DOB	Social Security #	Home Address
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Partner/Officer Name	(First Middle Last)	DOB	Social Security #	Home Address
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Partner/Officer Name	(First Middle Last)	DOB	Social Security #	Home Address
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Licensee must report previous 12 month on sale alcoholic beverage gross receipts by checking one of the boxes below. Next to the box you check is your 2 AM license fee. Make check payable to: **Alcohol and Gambling Enforcement Division (AGED)**. Mail this application and check to : AGED, 445 Minnesota St., Suite 222, St. Paul, MN 55101.

\$300 2 AM license fee - Up to \$100,000 in on sale gross receipts for alcoholic beverages

\$750 2 AM license fee - Over \$100,000, but not over \$500,000 in on sale gross receipts for alcoholic beverages

\$1,000 2 AM license fee - Over \$500,000 in on sale gross receipts for alcoholic beverages

\$200 2 AM license fee - 3.2% On Sale Malt Liquor licensees or Set Up license holders

\$200 2 AM license fee - Did not sell alcoholic beverages for a full 12 months prior to this application

Yes No Does your city or county licensing official allow the sale of alcoholic beverages until 2 AM?

City Clerk/County Auditor Signature _____ Date _____

(I certify that the city or county of _____ approves the sale of alcoholic beverages until 2 AM)

Licensee Minnesota Tax ID Number (Required) _____

Licensee Signature _____ Date _____

(I certify that I have answered the above questions truthfully and correctly)

Licensee: Prior to submitting this application to the Alcohol and Gambling Enforcement Division, it must be signed by your local city or county licensing official.