

**CITY OF WOODBURY  
DEPARTMENT OF ADMINISTRATION  
CLERK DIVISION  
8301 VALLEY CREEK ROAD  
WOODBURY, MN 55125  
651-714-3524**

**How to apply for a Temporary Liquor License:**

Under state statute, temporary liquor licenses may be issued to a club or charitable, religious, or other nonprofit organization in existence for at least three years and the licenses are subject to the terms set by the issuing county or city.

**Items to submit to the Woodbury City Clerk for review:**

1. Temporary Liquor License Application
2. Temporary Liquor License applicants are required to provide the City with proof of non-profit status.
3. Letter of intent and description of the event
4. Fee:
  - Intoxicating Liquor and Wine - \$50.00 per day (s) of event: This license must be approved by the Woodbury City Council and Minnesota Department of Public Safety Alcohol and Gambling Enforcement Division
  - 3.2% Malt Liquor - \$25.00 per event: This license must be approved by the Woodbury City Council
5. Information regarding servers. Please note: Servers responsible for the service of alcohol must attend a brief training session conducted by a public safety staff member.
6. Identify one individual that will remain alcohol free and provide name and cell number to the City. This individual will be the contact person during the event.

**Questions regarding temporary liquor licensing should be directed to:**

**Kimberlee K. Blaeser, City Clerk - 651-714-3524**

**City of Woodbury  
 Department of Administration – Clerk Division  
 8301 Valley Creek Road  
 Woodbury, MN 55125  
 651-714-3524**

**APPLICATION AND PERMIT  
 FOR A TEMPORARY ON-SALE 3.2% MALT LIQUOR LICENSE**

NAME OF ORGANIZATION	DATE ORGANIZED	TAX EXEMPT NUMBER	
STREET ADDRESS	CITY	STATE	ZIP CODE
NAME OF PERSON MAKING APPLICATION	BUSINESS PHONE ( )	HOME PHONE ( )	
<b>DATES &amp; TIMES LIQUOR WILL BE SOLD</b>	TYPE OF ORGANIZATION (circle one) CLUB   CHARITABLE   RELIGIOUS   OTHER NONPROFIT		
ORGANIZATION OFFICER'S NAME	ADDRESS		
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Location where license will be used. If an outdoor area, please describe.

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**Main Contact name and number for day/night of event:** \_\_\_\_\_

Is the property owned or leased by the organization? Yes   No   If no, who may we contact to confirm that your organization has authorization to hold the event at this location? Name \_\_\_\_\_ Phone \_\_\_\_\_

I agree to waive my constitutional rights against search and seizure and will freely permit peace officers to inspect the premises and agree to the forfeiture of this license if found to have violated the provisions of the ordinance providing for the granting of this license.

I hereby solemnly swear that the foregoing statements are true and correct to the best of my knowledge and that I agree to comply with the provisions of the ordinance under which this license is granted.

Applicant's Signature \_\_\_\_\_ Applicant's Title \_\_\_\_\_

Subscribed and sworn to before me this

\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
 Notary Public

APPROVAL

Date Approved by City Council \_\_\_\_\_ License Dates \_\_\_\_\_

\_\_\_\_\_  
 Signature of City Clerk

City Seal

\_\_\_\_\_  
 Signature of Mayor

Please return completed application along with \$25.00 to Kim Blaeser, City Clerk, Department of Administration, 45 days prior to your event.