



SPECIAL EVENT PERMIT APPLICATION

All application materials must be received before your application will be processed.

SPECIAL EVENT PERMIT FEES:

- 1. Permit Fee: \$50 (waived for non-profit)**
- 2. Background Investigation Fee: \$35/applicant**

Required Documentation

	Completed Application Form
	Location Map
	Completed Background Check Authorization Form with Proof of Identification (valid drivers license or state issued ID, passport, military ID)
	Insurance Certificate for the event.
	If applicable: City Application for Mobile Food Vendor, Copy of MN Food Truck License and Anoka County registration.

This application requests information that may be classified as private or confidential under the Minnesota Data Practices Act. State law or City ordinance requires this information. The information will be used to determine your eligibility for issuance of a license, permit, or identification card. You are not required to provide all of the requested information but failure to provide the information may result in a denial of the license.

DIRECTIONS: This form must be filled out completely. An incomplete application will be rejected.

1. Applicant Full Name: _____

(Must appear exactly as shown on state issued ID or passport)

2. Event Details:

Name of Event:

Date and Hours of Operation:

Set-Up/Take-Down Date/Time:

Location:

Purpose:

Is a fee charged? YES NO If yes, amount: \$ _____

	Expected Number of Attendees: _____
3. Entertainment Details	Describe any entertainment which includes sound amplification or any other noise impact, including the hours:
4. Food:	Describe any food to be served: Describe any plans for cooking/preparing food in the event area, including details of any fuel or electrical sources to be used: If a food truck(s) will be used, complete City Application for Mobile Food Vendor (attached) and provide proof of State license and County registration.
5. Beverages:	Will any alcoholic beverages be served: YES NO If YES, describe the method to be used to verify the age of any purchasers to ensure all consumption is only by persons over the age of 21:
6. Vendors:	Describe any vendors or concessionaires that will be on site during the event and the purpose of the vendor/concessionaires:
7. Safety and Security	Describe proposed procedures for set-up, operation, internal security, and crowd control: If the event is at night: Describe how the area will be lighted to allow for the safety of participants. Describe plans to provide first aid if necessary:

8. Sanitation	Describe clean up plans for trash and recycling. Include number of trash receptacles and details on who will be responsible for clean-up of the event. Describe the number and location of portable or permanent toilets available to event attendees. If using portable toilets, provide company name.
9. City Services	Are city services and/or equipment needed for this event? City equipment includes: barricades, cones, signage, and other equipment that may be borrowed from the City on an as-needed basis. YES NO If YES, list:
10. Location Map	Include the following details on the location map: - Size/location of any tents/structures - Entertainment/stage locations - Alcoholic beverage concession area - Food concession area (cooking, serving, and consumption) - General merchandise/vendor/concession area - Portable toilet areas - First Aid location - Parking areas - Fireworks/pyrotechnics area if applicable (submit separate license application) - Fencing - Any additional electrical wiring installed for the event - Trash receptacles

Applicant Signature

Date



BACKGROUND AUTHORIZATION AND TENNESSEN WARNING

A BACKGROUND AUTHORIZATION AND TENNESSEN WARNING Form must be completed for each applicant and submitted together with the license application. The application background fee is non-refundable.

The City of Lino Lakes is investigating background information for approval of a request for licensing. This application requests information, which may be classified as private or confidential under the Minnesota Data Practices Act. State law or City ordinance requires this information. The information will be used to determine eligibility for issuance of the license or renewal. Failure to provide the information may result in a denial of the license.

Your background may include (but not limited to):

Criminal History, Driver's License Check, Outstanding Warrants, Fingerprinting, Photograph, Civil & Criminal Record Check, IRS Document Check, Credit Check and Interview.

Any information that you provide will be made accessible to the following persons or entities:

- A. The subject(s) of the data, which may include someone other than yourself.
- B. Individuals within the City of Lino Lakes whose work assignments reasonably require access to the information you provide.
- C. Any persons, entities or agencies authorized by state or federal law to have access to the information. These include, but are not necessarily limited to, the following:
 1. Law enforcement agencies. The information you provide may be referred to a law enforcement agency for purposes of initiating or furthering a criminal investigation. You are advised, however, that any statements you make under threat of discipline, or evidence obtained as a result of such statements, cannot be used against you in any criminal proceeding.
 2. Contracting Parties. Where a contract between the City of Lino Lakes requires that such party have access, the information you provide will be shared with that contracting party. The contracting party may not disclose the information except as authorized by state or federal law.
 3. City Attorneys. The information you provide may be shared with the City of Lino Lakes attorneys, if the information is related to a matter upon which the City of Lino Lakes has requested legal advice.
 4. Open Meetings. If it becomes reasonably necessary to discuss such information at any meeting required by law to be open to the public, the information you provide may become available to the public at such meeting.
 5. Court Order. The information you provide will be made available to any persons or entities authorized by court order to have access to the information.

6. Persons or entities who have the express written consent of the data subject, who may be someone other than you.

TENNESSEN WARNING

Data is requested from the applicant on various forms. The purpose and intended use of the requested data is to verify the applicant meets all state statute and city code provisions and, if the license or permit is approved, to verify that all required data remains current. The following data collected, created, or maintained is classified under the Minnesota Government Data Practices Act as Private data until license approval when the data becomes Public: (13.41, Subd.4).

1. Data submitted by applicants (other than names and designated addresses)
2. Orders for hearing and findings of fact
3. Conclusions of law and specification of the final disciplinary action contained in the record of the disciplinary action
4. Entire record concerning the disciplinary proceeding
5. License numbers
6. License status

The following data collected, created, or maintained is classified as Private: (13.41, Subd. 2).

1. The identity of complaints who have made reports concerning licenses or applicants which appear in inactive complaint data unless the complainant consents to the disclosure
2. The nature or content of unsubstantiated complaints when the information is not maintained in anticipation of legal action
3. Inactive investigative data relating to violations of statutes or rules
4. The record of any disciplinary proceeding except as limited by Subd. 4

The following data collected, created, or maintained is classified as Confidential: (13.41, Subd.3).

1. Active investigative data relating to the investigation of complaints against any license
Under law, private data may be shared with licensing and inspection employees, approval authorities, insurance providers, law enforcement employees, contracted inspection officials, as required by court order and City officials who have a bona fide need for it.

The City of Lino Lakes may make any data classified as private or confidential accessible to an appropriate person or agency if the licensing agency determines that failure to make the data accessible is likely to create a clear and present danger to public health or safety. We ask that you complete or provide all data requested on the application form(s) unless we have noted that it is not required. Refusal to supply required information may mean that your application cannot be processed.

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

Signed

Date

BACKGROUND CHECK AUTHORIZATION

DIRECTIONS: This form must be filled out entirely. **Attach a copy of your valid ID, license, or passport.**

1. True Name (exactly as on ID or passport): _____
2. Maiden, Alias, or Former Name: _____
3. Residential Address: _____

4. County in which you reside: _____
5. Date of Birth _____
6. Place of Birth _____
7. Phone Number: _____
8. Email Address: _____
9. Business Address: _____

10. Business Phone: _____
11. Driver's License/ID Number:
Have you ever had a DL in another state? YES NO If yes, state: _____
12. Marital Status Married Single Divorced

If married, provide spouse true name, place/date of birth, and maiden name

13. Address(es) at which you have lived during the preceding 10 years (begin with present address). Attach additional sheets if needed.

<i>List Street, City, State, Zip</i>	<i>Date range</i>

I authorize the Lino Lakes Public Safety Department and the Minnesota Bureau of Criminal Apprehension to disclose all criminal background information on me as permitted by law to the City of Lino Lakes for the purpose of a background check.

The expiration of this authorization shall be one year from the date of my signature.

Signature of Applicant _____ Date _____



City of Lino Lakes
Application for Mobile Food Vendor

Application Fee:

\$50 - Inspection completed during business hours
\$75/hr. (2 hr. minimum) - Inspection completed
after business hours
Fee may be waived with current Anoka County fire
inspection.

*Checks and money order payable to "City of Lino
Lakes" VISA, Mastercard, Discover accepted*

Contact Information:

Fire Lieutenant Brian Finke
(651) 248-2464
Deputy Director Dan L'Allier
(651) 288-2910

APPLICANT INFORMATION:

Name (s): _____ Date: _____

Address: _____

Phone Number (s): _____

Email Address: _____

INFORMATION ON BUSINESS OWNER (if different from Applicant):

Business Owner: _____

Address: _____

Telephone: _____ Email: _____

Minnesota Sales Tax ID Number: _____ Federal Tax ID Number: _____

Primary Vending Site Address/Location Description: _____

Hours and Days of Operation: _____

Describe the Principal Products Rendered: _____

VEHICLE INFORMATION:

Year/Make/Model of Vehicle Used: _____

VIN Number: _____ License Plate Number: _____

PLEASE INITIAL THE FOLLOWING STATEMENTS:

- ☐ I HAVE ATTACHED A CURRENT MN DEPARTMENT OF HEALTH CERTIFICATE (if needed)
- ☐ I HAVE ATTACHED A CURRENT MN DEPARTMENT OF HEALTH FOOD MANAGER CERTIFICATION
- ☐ REQUIRED – I HAVE ATTACHED A CURRENT ANOKA COUNTY HEALTH CERTIFICATE AND FOOD ESTABLISHMENT CERTIFICATE
- ☐ REQUIRED - * I HAVE ATTACHED LETTERS OF CONSENT FOR LOCATING ON PUBLIC OR PRIVATE PROPERTY
- ❖ You will need to obtain permission by the City in order to park in public parking areas including City Parks.
- ☐ REQUIRED – I HAVE ATTACHED ALL INSURANCE CERTIFICATES (VEHICLE AND LIABILITY)
- ☐ REQUIRED – I HAVE READ AND WILL OBEY ALL RULES AND REGULATIONS RELATING TO MOBILE FOOD VENDOR OPERATIONS, LOCATIONS AND ALL OTHER REQUIREMENTS
- ☐ REQUIRED – I WILL HAVE A CURRENT CERTIFIED FIRE EXTINGUISHER WITHIN THE VEHICLE AT ALL TIMES.
- ☐ REQUIRED – I HAVE INCLUDED THE LICENSE FEE OF 50.00 MADE PAYABLE TO THE CITY OF LINO LAKES. FEE MAY BE WAIVED WITH CURRENT ANOKA COUNTY FIRE INSPECTION.

The data you provided on this application will be used by the City of Lino Lakes to assess your qualifications for a permit. After issuance of a permit, all information contained in this application, will be public information pursuant to Minnesota Statutes, Chapter 13.

I, (print name) _____, certify or declare under penalty of perjury under the laws of the State of Minnesota that the foregoing is true and correct. All information given is subject to verification by the State of Minnesota.

Signature of Applicant: _____ Date: _____

OFFICE USE ONLY			
Application Received By: _____		Date Received: _____	
_____ Fee Paid [50.00]	Approved by: _____		Date: _____

❖ **Submit completed applications to City Offices, 640 Town Center Pkwy, Lino Lakes, MN 55014**