ROSEVILLE

REQUEST FOR COUNCIL ACTION

Date: 11-16-2009
Item No.: 11.a

Department Approval

City Manager Approval

Item Description: Conduct public hearing for Crab Addison, Inc. dba Joe's Crab Shack application for On-Sale Intoxicating Liquor License.

Background

Joe's Crab Shack has applied for an On-Sale Intoxicating Liquor License at 2704 Snelling Avenue North. The City Attorney will review the application prior to the issuance of the license to ensure that it is in order. A representative from Crab Addison, Inc. dba Joe's Crab Shack will attend the hearing to answer any questions the Council may have.

Financial Implications

The revenue that is generated from the license fees collected is used to offset the cost of police compliance checks, background investigations, enforcement of liquor laws, and license administration.

Council Action

Conduct public hearing and consider approving/denying the On-Sale Intoxicating Liquor license, Crab Addison, Inc. dba Joe's Crab Shack located at 2704 Snelling Avenue North.

Prepared by: Chris Miller, Finance Director
Attachments: A: Applications

ALCOHOL AND GAMBLING ENFORCEMENT DIVISION
444 Cedar St., Suite 133, St. Paul, MN 55101-5133
Fax (651) 297-5259
(651) 201-7507 TTY (651) 282-6555
WWW.DPS.STATE.MN.US

APPLICATION FOR COUNTY ON-SALE INTOXICATING LIQUOR LICENSE

No license will be approved or released until MN Liquor Control receives the $20 Retailer ID Card fee.

Workers Compensation Insurance Company: Zurich American Insurance Company Policy # WC9140442-03
LICENSEE'S SALES & USE TAX ID # 1170415 To apply for MN sales tax number call 651-296-6181
LICENSEE'S FEDERAL TAX ID # 76-0444189

Applicant's name (Business, partnership, LLC, Corporation)	DOB	Social Security #	DBA or trade name
Crab Addison Inc.			Joe's Crab Shack

License address	Business phone	Applicant's home phone
2704 Snelling Avenue North	pending	

City	County	State	Zip Code	License period
Roseville	Ramsey	mN	55113-1732	From To

Give name, residence, DOB, Social Security #, title and age for all partners, or the officers and directors of a partnership or corporation. and the percent of stock held by each officer if applicable.

Name	Social Security #	Title	DOB	Percent stock or partnership interest
				0

Address	City	State
	I	

Name	Social Security #	Title	DOB	Percent stock or partnership interest
F				0

Address	City	State
	Houston	TX

Name	Social Security #	Title	DOB	Percent stock or partnership interest
				0

Address	City	State

Date of Incorporation	State of incorporation	Certificate Number	Is corporation authorized to do business in Minnesota?
			XX Yes ☐ No

Purpose of corporation	If a subsidiary of another corporation, give name
For Profit Business	Ignite Restaurant Group, Inc.

1. Describe premises to be licensed (location, facilities).
Restaurant

Floor establishment is located on	Seating capacity	Hours food will be available	Number of people restaurant employs
first floor	290	Sun-Thurs, 11am-10pm Fri-Sat 11am-11pm	From 50 -60

Number of months per year establishment will be open	Name of manager
12	Timothy Melton

2. If this restaurant is in conjunction with any other business (resort, etc.), describe the business.
3. Name the nearest municipality in which On Sale licenses are issued.
4. Has applicant, partners, officers or employees ever had any Felony Convictions or Liquor Law violations in Minnesota or elsewhere, including State Liquor Control Penalties? Yes (No) If yes, give date, charges and final outcome.
5. Is the applicant or any of the associates in this application a member of the County Board in which the license will be issued?
Yes (No) If yes, in what capacity? N/A (If the applicant for this license or any of the associates is the spouse of a member of the governing body or where a family relationship exists, the member shall not vote on this application.)
☐Yes ☐No N/A
6. Have the applicants any interest, directly or indirectly, in any other liquor establishment in the county or any city in the county issuing this license. If yes, give the name and address of the establishment. NO