

## Class "N" License Application

### LICENSES ARE NOT TRANSFERRABLE

Saint Paul, Minnesota 55101 **Phone**: 651-266-8989 Web: <u>www.stpaul.gov/dsi</u>

Payment must be received with each application. This application is subject to review by the public.

This application	requires District Council notific	ation prior to submission.	9/1 processpe	4
Types of Licens	e(s) being applied for:		Fee(s): JAFF.	
1. Auto	Repair Garage		469.00	
	<u> </u>			
			···	
-				
	· · · · · · · · · · · · · · · · · · ·			
6				
7				
	_		Total: \$ 469.00	)
<b>Business Informat</b>	ion			
Business Addre	ss: 2013 Minnehaha Ave	St Paul	MN 55119 State Zip	
	RS Transportation LLC		R's Timniportation i	-1-1,
	pe: Corporation 🙋	Partnership 🔘	Sole Proprietorship	
Date of Incorporation	m: June 8, 2021	Date of Anticipated Opening:	9-1-2023	
Mailing Addre				
Business Phone	#: 651-428-6788	Email Addres	ss:	
Applicant Inform	nation			
Applicant N	ame: First JA!	Middle	Thor Last	
Titl	e: Owner	Date of Birth:		
Drivers Licens	e:			
Home Addres	s:(			
Cell Phone	¥:			

# **Supplemental Required Information** Are you going to operate this business personally? If no, who will operate it? Thor Operator Name: Fangjai Middle Home Address: Date of Birth: Are you going to have a manager or assistant in this business? If manager is not the same as the operator, please complete the following information: Manager Name: **Home Address Email Address:** Phone #: Date of Birth: Please list all other officers of the corporation (Attach another sheet if applicable.) Officer Name: Xai Middle Email: **Home Addres** Date of Birth Officer Name: Email: \_\_\_\_\_ Title: Home Address: Street \_\_\_\_\_ Phone #: \_\_\_\_\_ Date of Birth: \_ Officer Name: Title: Home Address: Street Date of Birth: Phone #: \_\_\_\_\_ FALSIFICATION OF ANSWERS GIVEN OR MATERIAL SUBMITTED WILL RESULT IN DENIAL OF APPLICATION I hereby state that I have answered all of the preceding questions and that the information contained herein is true and correct to the best of my knowledge and belief. I also hereby state that I have provided a completed District Council Notification Form to the district council representing the planning district in which my business will operate.

Applicant Signatur

7/6/2023

#### LICENSE APPLICATION NOTIFICATION

License Number:

20230001613

Application for:

Auto Repair Garage

License at:

2013 Minnehaha Ave E

Licensee:

Rs Transportation LLC, doing business as same

Fangjai Thor, co-owner, 651-428-6288

#### **Recommended License Conditions:**

1. No customer vehicles under the control of the licensee can be parked and or stored in the public right-of-way (e.g., street, alley, sidewalk, boulevard, etc.) This includes vehicles waiting for repairs and vehicles waiting to be picked up by the customer.

Deadline for Response Date: Saturday, October 7, 2023, at 4:30 p.m.

If you have any comments on the license application, you must respond in writing by Saturday, October 7, 2023 to:

Legislative Hearing Officer 310 City Hall 15 West Kellogg Blvd. Saint Paul, MN 55102

Or email to: LH-Licensing@ci.stpaul.mn.us

If you have any questions, please contact DSI Inspectors Ross Haddow or Jeff Fischbach at 651-266-8989.

Notice Mailed: Friday, September 22, 2023

#### CITY OF SAINT PAUL

Department of Safety & Inspections

Angle Wiese, Director 376 Jackson Street, Sulle 220 Solnt Paul, MN 55101-1806

Wab Site Address; vww.slpsul.gov/dsi

Telophono: 051-260-8989 Facsimilo: 651-200-9124

I agree to the following conditions being placed on the following license(s):

License #:

20230001613

Type of Business:

Auto Repair Garage

Applied for by:

RS TRANSPORTATION LLC

Doing Business As: RS TRANSPORTATION LLC

at:

2013 MINNEHAHA AVE E

ST PAUL MN 55119

#### Conditions are as follows:

1. No customer vehicles under the control of the licensee can be parked and or stored in the public right-of-way (e.g., street, alley, sidewalk, boulevard, etc.) This includes vehicles waiting for repairs and vehicles waiting to be picked up by the customer.

Licensee Date