BAR OWNER

CITY OF SAINT PAUL, MINNESOTA CHARITABLE GAMBLING LOCATION

Directions:

This form must be filled out with a typewriter or by printing in ink by the sole owner, by <u>each</u> partner, and by <u>each</u> person who has interest in excess of 5% in the corporation and/or association in which the name of the license will be issued.

THIS APPLICATION IS SUBJECT TO REVIEW BY THE PUBLIC

1.	Application for (name of license) <u>Cambling</u> Location License
2.	Located at (address) 2201 Burns Ave St Paul MN 55/19
	Name under which business is operated Holiday Inn St Paul East
4.	True Name Won Hwae Huh Phone 6/2-490-809 First Middle Maiden Last
5.	Date of Birth Place of Birth (Month, Day, Year)
6.	Home Address Home Phone _
7.	Have you ever been convicted of any gambling violations? No
8.	List licenses which you currently hold at this location. Liquor Hotel / Motel
	Pool/Whirpool Restaurant
€.	Do you have a direct or indirect financial interest in the distribution or manufacture of gambling equipment? \\ \mathcal{O}\)
١٥.	SUBMIT A SITE PLAN SHOWING WHERE THE GAMBLING BOOTH WILL BE LOCATED AND THE DIMENSIONS OF THE LEASED SPACE.
<u>AN</u>	Y FALSIFICATION OF ANSWERS GIVEN OR MATERIAL SUBMITTED WILL

RESULT IN DENIAL OF THIS APPLICATION.