

APPLICANT INFORMATION (Continued) :

Are you going to have a manager or assistant in this business? YES NO If the manager is not the same as the Operator, please complete the following information:

First Name Middle Initial (Maiden) Last Date of Birth

Home Address: Street (#, Name, Type, Direction) City State Zip + 4 Phone Number

Licensee Work History (list name, address and phone number of all employers for the previous 5 year period)
Strip Club Meat and Fish, 378 Maria Ave St. Paul (651) 793-6247
Hedra's Minneapolis 2903 Lyndale Ave S Minneapolis
Corner Table, 4537 Nicollet Ave S Minneapolis 55419 (612) 823-0011

List all other officers of the corporation (use additional pages if necessary):

Officer Name Title Home Address Home Phone Business Phone Date of Birth

EMOTHY NEWER President

If business is a partnership, please include the following information for each partner (use additional pages if necessary):

First Name Middle Initial (Maiden) Last Date of Birth

Home Address: Street (#, Name, Type, Direction) City State Zip + 4 Phone Number

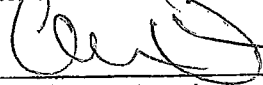
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FALSIFICATION OF ANSWERS GIVEN OR MATERIAL SUBMITTED WILL RESULT IN DENIAL OF APPLICATION
I hereby state that I have answered all of the preceding questions and that the information contained herein is true and correct to the best of my knowledge and belief.

CONSENT TO BACKGROUND CHECK

I hereby consent to and authorize the Saint Paul Police Department and the Department of Safety and Inspections (DSI) to use the information I have provided to check criminal histories, arrest and driving records, and warrant information; and for the Police Department to provide these records to DSI and its City Attorney to determine my eligibility for a Class N License. I understand that the information contained in the criminal background investigation is not public, except that it may be conveyed to other law enforcement or licensing agencies. This consent expires one year from the date below.

 Chef / Partner 9/17/15
Applicant Signature (Required) Title Date

All Class N applications must be submitted with the following documents:
1. Provide a copy of your executed (signed) rental lease and/or assignment and, if intended use not specified in lease, a letter of permission from the landlord to allow this type of business operation on the premises. Otherwise, provide a copy of your Purchase Agreement and/or Bill of Sale for the property.
2. If incorporated or a partnership, provide proof of current filing status with the Office of the Minnesota Secretary of State and documentation outlining ownership distribution and/or allocation of corporate shares.

9-10/9/15-lab

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Strip Club meet and fest 378 MARSA AVE. ST. PAUL 55106 651-793-6247

List all other officers of the corporation (use additional pages if necessary):

Officer Name Title Home Address Home Phone Business Phone Date of Birth

CHRISTOPHER WELCH

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Applicant Signature (Required)

Title

Date

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