



**SAINT PAUL**  
SAFETY & INSPECTIONS

Saint Paul, Minnesota 55101  
Phone: 651-266-8989  
Web: [www.stpaul.gov/dsi](http://www.stpaul.gov/dsi)

### Class "N" License Application

**LICENSES ARE NOT TRANSFERRABLE**

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

**This application requires District Council notification prior to submission.**

Types of License(s) being applied for:

Fee(s):

- 1. liquor on sale 101-180 seats \$,497
- 2. on sale & Sunday liquor license ~~est 200~~ ~~Dec 03~~
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_
- 6. \_\_\_\_\_
- 7. \_\_\_\_\_

Total: \$ 0.00

#### Business Information

Business Address: 36 S Dale Street St. Paul MN. 55102  
Street City State Zip

Company Name: "JED, Inc." Doing Business As: La Cucaracha

Company Type: Corporation  Partnership  Sole Proprietorship

Date of Incorporation: \_\_\_\_\_ Date of Anticipated Opening: Oct. 1st 2003

Mailing Address: 36 S Dale Street St Paul MN 55102  
Street City State Zip

Business Phone #: 651-227-3156 Email Address: lauc36dale@gmail.com

#### Applicant Information

Applicant Name: Jill A Nanna  
First Middle Last

Title: owner Date of Birth: \_\_\_\_\_

Drivers License: \_\_\_\_\_ Email: \_\_\_\_\_

Home Address: \_\_\_\_\_  
Street Zip

Cell Phone #: \_\_\_\_\_ Alternate Phone #: \_\_\_\_\_

**Supplemental Required Information**

Are you going to operate this business personally? Yes:  No:   
If no, who will operate it?

Operator Name: Edgar E Anelu  
Home Address: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Phone #: \_\_\_\_\_ Email Address: \_\_\_\_\_

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

Manager Name: Jill Ann Danna  
Home Address: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Phone #: \_\_\_\_\_ Email Address: \_\_\_\_\_

**Please list all other officers of the corporation (Attach another sheet if applicable.)**

Officer Name: Edgar Anelu  
Title: owner Email: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Phone #: \_\_\_\_\_

Officer Name: Jill Ann Danna  
Title: President/owner Email: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Phone #: \_\_\_\_\_

Officer Name: \_\_\_\_\_  
Title: \_\_\_\_\_ Email: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
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.

\_\_\_\_\_  
Title: owner Date: 5/1/2023

## LICENSE APPLICATION NOTIFICATION

License Number: 20230001446  
Application for: Liquor On Sale - 101-180 Seats and Liquor On Sale - Sunday  
License at: 36 Dale St S  
Licensee: JED Inc, doing business as La Cucaracha  
Jill Danna, owner, 651-227-3156

**Recommended License Conditions:** none

**Deadline for Response Date: Wednesday, September 20, 2023, at 4:30 p.m.**

If you have any comments on the license application, you must respond in writing by Wednesday, September 20, 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](mailto: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: Tuesday, September 5, 2023