## Received



NOV 0 3 2025

DEPARTMENT OF SAFETY & INSPECTIONS (DSI)

Director, Angle Wiese 375 Jackson Street, Suite 220 Saint Paul, MN 55101-1806 Tel: 651-266-8989 | Fax: 651-266-9124

City of Saint-Paul - DSI

## GAMBLING LOCATION LICENSE APPLICATION

A copy of this form must be completed by, whichever applicable, the sole proprietor, each partner, or each person that 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 and falsification of answers or materials submitted may result in denial of application.

1,	Company Name:	Palace Pizza	LLC		January Committee Co	
	Doing Business Ass					
		33 West 7th Place		St. Paul, MN 55102		
	Applicant Name:	Dayna			Frank	
7,		Pirst	Middle	Malden	Last	
5.	Date of Birth:			Phone: _	310-867-0911	
		Month/Day/Year				
б.	Home Address:					
7.	Have you ever been	convicted of	a gambling vio	lation?	No	
8,	Do you have a direct equipment?					cture of gambling
9,	Active licenses and	or applied for	at this location	ı <b>:</b>		
	Liquor License	, 2AM Licens	e, Retaller's l	icense		
10. Submit a site plan/floorplan showing where the gambling booth and/or pull-tab dispensing device(s) will be located and the dimensions of the leased space.						
ĺ	Droke	<b>~</b>	Owner	•		10/8/25
App	licant Signature		Title		Date	)

Return to:

Department of Safety and Inspections (DSI) Business Licensing - Lawful Gambling 375 Jackson Street, Suite #220 Saint Paul, MN 55101

Fax: 651-266-9124