

ALL APPLICANTS: Submission of a knowingly false application is grounds for denial and criminal prosecution.

Have you ever plead guilty to, or been convicted of any crime other than a minor traffic violation?

Yes No

You may submit an attachment of any explanations relevant to any of the convictions, if you desire.

Have you ever held a liquor dispenser license from the City of Richfield? Yes No

Within ten years of the date of this application, have you been convicted of a felony or any willful violation of a federal or state law or local ordinance, governing the manufacture, sale, distribution, or possession for sale or distribution of an alcoholic beverage? Yes No

If yes, provide the dates; state whether such license was ever suspended or revoked; and the reasons for the suspension or revocation.

Signature of Applicant: _____

Date: _____

APPLICATION FOR LICENSE INVOLVING
PRIVATE OR CONFIDENTIAL INFORMATION
(Tennessee Warning)

IN CONNECTION WITH YOUR REQUEST FOR A LICENSE, THE CITY HAS ASKED THAT YOU PROVIDE IT WITH INFORMATION ABOUT YOURSELF WHICH IS CLASSIFIED AS EITHER PRIVATE OR CONFIDENTIAL BY THE MINNESOTA GOVERNMENT DATA PRACTICES ACT (M.S.A 13.04). ACCORDINGLY, THE CITY IS REQUIRED TO INFORM YOU OF THE FOLLOWING:

1. The Purpose and intended use of the information requested is: To determine if you are eligible for a license from the City of Richfield.
2. You are not legally obligated to supply the requested information.
3. The known consequences of supplying the requested information is: The information, or further investigation could disclose information, which could cause your application to be denied.
4. The known consequences of refusing to supply the requested information is: Your request for a license cannot be processed.
5. The following persons and entities are authorized by law to receive the information if provided: Staff of Richfield Public Safety Department, Bureau of Criminal Apprehension, Hennepin County Warrant Office, Ramsey County Warrant Office, State of Minnesota – Driver License Section, Hennepin County Auditor, and other governmental agencies necessary to process your application.

The undersigned, by signing this notice, acknowledges that he/she has read and understood the contents of this notice.

SIGNATURE: _____ DATE: _____

