

APPLICATION FOR BUSINESS LICENSE

CITY OF NEW HOPE 4401 Xylon Avenue North New Hope, MN 55428 Phone 763-531-5118 Fax 763-531-5136

	JI BUSINI	ESS BEING LICENSED (dba):		
BUSINESS ADDRESS: CITY/STATE/ZIP:			ZIP:	
BUSINESS PHONE: BUSINESS FAX:			FAX:	
CORPO	RATION N	NAME, IF APPLICABLE:		
			ZIP:	
CORPC	RATION F	PHONE: F	FAX:	
IF COR	PORATIO	N, LIST NAMES & ADDRESSES OF ALL OFFICERS:		
PLEASI	E MAIL AL	LL CORRESPONDENCE, INCLUDING LICENSE TO:	S ADDRESS D BUS	SINESS LOCATIO
J		APPLICATION BEING MADE FOR TYPE OF LICENSE:	EACH	TOTAL
	3408	Tattoo Establishment Investigation	\$400.00	
		Tattoo Establishment	\$300.00	
	4115	Refuse Hauling - First Truck	\$100.00	
		Each Truck Thereafter	\$40.00	
	4120	Bowling Alley, Each Lane	\$15.00	
	4125	Second-hand Dealer/Thrift Store	\$300.00	
	4125	Self-Service/Coin-Operated Laundry	\$50.00	
	4125	Pinball, Games Of Skill, Video Games:		
		Location	\$15.00	
		Plus Fee Per Each Machine	\$15.00	
	4130	Cigarette, Tobacco Products	\$250.00	
	4140	Oil, Gasoline, Diesel Fuel, Liquefied Petroleum:		
		Gasoline Station	\$50.00	300 t
		- Each Hose, Same Location	\$5.00	***
	4140	Non-Commercial Pumps NOT DISPENSED TO PUBLIC		
	-	- First Hose	\$10.00	
		- Each Additional Hose, Same Location	\$1.00	
	4140	Car Wash	\$50.00	100
	4145	Storage of Trucks	\$40.00	
	1150	Must obtain conditional use permit. Maximum of three vehicles.		
	4150	3.2% Beer	\$500.00	
	-	On-Sale Off-Sale	\$100.00	
	11.00		\$100.00	
	4160	Outdoor Sales of Seasonal Farm Produce, Christmas Tree Sales	\$100.00	
	4165	Lawn Fertilizer - First Truck - Each Truck Thereafter	\$25.00	
	4170	Fireworks	\$100.00	
	41/0	FIFEWORKS	\$100.00	

Certificate of Compliance Minnesota Workers' Compensation Law

THIS FORM MUST BE COMPLETED BY THE BUSINESS LICENSE APPLICANT

PRINT IN INK or TYPE.

Minnesota Statutes, Section 176.182 requires every state and local licensing agency to withhold the issuance or renewal of a license or permit to operate a business in Minnesota until the applicant presents acceptable evidence of compliance with the workers' compensation insurance coverage requirement of Minnesota Statutes, Chapter 176. If the required information is not provided or is falsely stated, it shall result in a \$2,000 penalty assessed against the applicant by the commissioner of the Department of Labor and Industry.

A valid workers' compensation policy must be kept in effect at	all times by employers as required by	law.
LICENSE or CERTIFICATE NO (if applicable)	BUSINESS TELEPHONE NO.	FAX TELEPHONE NO.
BUSINESS NAME (Use the person(s) name if business structure is sole prothe legal name of the business entity.)	prietor or partnership (i.e., John Doe, or John [Doe and Jane Doe), otherwise it is
DBA ("doing business as" or also known as an assumed name) (if app	olicable)	
BUSINESS ADDRESS (must be physical street address, no PO boxes)	CITY	STATE ZIP CODE
COUNTY	E-MAIL ADDRESS	
YOUR LICENSE OR CERTIFICATE WILL N FOLLOWING INFORMATION. You must c	omplete number 1 or 2 be	elow.
NUMBER 1 – Workers' compensation insu	irance policy information	
INSURANCE COMPANY NAME (not the insurance agent)		NAIC Number
POLICY NO.	EFFECTIVE DATE	EXPIRATION DATE
NUMBER 2 – Reason for exemption from	workers' compensation i	nsurance
If you have questions regarding the need to obtain workers' co 651.284.5032 or 1-800-342-5354.		
☐ I have no employees. (See Minn. Stat. § 176.011, subd. 9 for I am self-insured for workers' compensation (attach a copy Department of Commerce).		the Minnesota
I have employees but they are not covered by the workers' excluded employees.) Explain why your employees are not		176.041 for a list of
Other:		
I certify that the information provided on this form is accurate and comauthorized to sign on behalf of the business.	nplete. If I am signing on behalf of a busine	ess, I certify that I am
PRINT NAME		
APPLICANT SIGNATURE (required)	TITLE	DATE

NOTE: You must notify us if there is any change to your Workers' Compensation Insurance Information or Employee Status Change by resubmitting this form. This material can be made available in different forms, such as large print, Braille or on a tape.



TAX IDENTIFICATION

NOTICE

Pursuant to laws of Minnesota, 1984, Chapter 502, Article 8, Section 2 (270.72) (Tax Clearance; Issuance of Licenses), the licensing authority is required to provide to the Minnesota Commissioner of Revenue your Minnesota business tax identification number and the social security number of each license applicant.

Under the Minnesota Government Data Practices Act and the Federal Privacy Act of 1974, we are required to advise you of the following regarding the use of this information:

- 1. This information may be used to deny the issuance or renewal of your license in the event you owe Minnesota sales, employer's withholding or motor vehicle excise taxes.
- Upon receiving this information, the licensing authority will supply it only to the Minnesota Department of Revenue. However, under the Federal Exchange of Information Agreement the Department of Revenue may supply this information to the Internal Revenue Service.
- 3. FAILURE TO SUPPLY THIS INFORMATION MAY JEOPARDIZE OR DELAY THE PROCESSING OF YOUR LICENSE ISSUANCE OR RENEWAL APPLICATION.

Please supply the following information and return			
Business Owner's Last Name	Business Owner's First Name	Middle Initial	
Address of Business Owner	City, State, Zip C	Code	
Social Security Number of Business Owner	Position (Officer, Partner, etc.)		
Business Name			
Business Address	City, State, Zip Code		
Minnesota Tax Identification Number	Federal Tax Identification Numb	er	
Signature	Date		



WEST METRO FIRE-RESCUE DISTRICT

Serving the Cities of • Crystal • New Hope

Unattended Fuel Pumping Requirements

The following requirements set forth by the Minnesota State Fire Code shall be adhered to for any gas station that has hours of unattended pump operation within the Cities of New Hope and Crystal. Licensing requirements under city ordinance requires such establishments to be inspected by city inspectors to ensure compliance with all state and local codes before a license can be issued. In recent visits to stations, it has been noticed that some stations are selling fuel after hours without meeting the minimum requirements set forth by the Minnesota State Fire Code. These establishments are in violation of not only their licensing requirements, but also Minnesota State Law. The following requirements from Chapter 22 section 2204.3.1 through 2204.3.7 of the MSFC shall be met before any after hour fueling takes place:

- 1. Owner or operator shall provide, and be accountable for, daily site visits, regular equipment inspections and maintenance.
- 2. Approved, clearly identified, and readily accessible emergency pump shut down shall be provided within 100 ft. of exterior pumps.
- 3. Dispenser operating instructions shall be conspicuously posted in an approved location on every dispenser and shall indicate the location of emergency controls.
- 4. An approved emergency procedures sign shall be posted in a conspicuous location and shall read:

IN CASE OF FIRE, SPILL OR RELEASE

- 1. USE EMERGENCY PUMP SHUTOFF
- 2. REPORT THE ACCIDENT CALL 911 FACILITY ADDRESS
- 5. A telephone not requiring a coin to operate or other approved, clearly identified means to notify the fire department shall be provided on site in a location approved by the code official.
- 6. Dispensing devices shall be programmed or set to limit uninterrupted fuel delivery to 25 gallons and require a manual action to resume delivery.

To prevent any license interruption and/or citations, please ensure that your facility meets the above minimum requirements. If you have any questions or concerns with the above referenced requirements, please call the West Metro Fire-Rescue District Prevention Bureau at (763) 537-2323 Ext. 2003 or 2004. Thank you for your cooperation in this matter.

4251 Xylon Ave N. New Hope, MN 55428 Voice 763.537.2323 Fax 763.537.5333

Sec. 8-4. Gasoline, diesel fuel and liquefied petroleum gas.

- (a) License required. No person shall, without first obtaining a license therefore in accordance with section 8-2:
 - (1) Filling station or storage plant. Engage in the business of operating, maintaining, conducting or keeping any gasoline, diesel fuel or liquefied petroleum gas filling stations, or any combination of these, or any wholesale gasoline, diesel fuel or liquefied petroleum gas storage plant in the city; or
 - (2) Pump or dispensing device. Keep, maintain or operate a gasoline, diesel fuel or liquefied petroleum gas pump or other gasoline, diesel fuel or liquefied petroleum gas dispensing device in the city.
- (b) *Inspection*. Before the license is granted, and any other time during the term of the license, inspection of the premises may be made to determine that the premises and the equipment for dispensing the products to be sold are adequate and safe for the conduct of the business.
- (c) Fees. The annual license fee for such licenses required above shall be as prescribed in chapter 14.
- (d) Safety precautions. No licensee or other person in charge of or operating any such gasoline, oil, diesel fuel or liquefied petroleum gas filling station in the city shall fill or allow to be filled with said products the tank or tanks of any motor vehicle of any kind whatever while the engine or motor of such motor vehicle is running or in motion and no owner or other person driving or in charge of any such motor vehicle shall fill or allow or cause the tank of the same to be filled with gasoline, diesel fuel or liquefied petroleum gas, while the engine or motor of such vehicle is running. (Ord. No. 73-1; Ord. No. 2000-07)