

FARGO CITY COMMISSION AGENDA
Monday, February 23, 2009 - 5:00 P.M.

CITY COMMISSION MEETINGS ARE BROADCAST LIVE ON TV FARGO (Channel 99). They are rebroadcast at 7 p.m. each Thursday and again at 8:00 a.m. each Saturday and are also included in our video archive at www.cityoffargo.com/commission.

- A. Pledge of Allegiance.
- B. Roll Call.
- C. Approve Order of Agenda.
- D. Minutes (Regular Meeting, February 9, 2009).

*** Consent Agenda - Approve the Following ***

- a. 2nd reading, waive reading and final adoption of the following Ordinances; 1st reading, 2/9/09:
 - (1) Relating to Re-Roofing Contractors.
 - (2) Rezoning Certain Parcels of Land Lying in Hector's Subdivision.
 - (3) Relating to Sidewalks.
- b. PEC recommendations.
- c. Amended contract with Garrison Enterprises, Inc. in connection with completion date of software installation for Fargo Cass Public Health.
- d. Contracts with Traill, Barnes and Steele Counties for the Women's Way recruitment program.
- e. Receive and file Summons and Complaint in the matter of Cheryl Plante vs. City of Fargo.
- f. Sixty day extension of the Class "FA" Alcoholic Beverage License held by Up the Creek until April 8, 2009.
- g. Applications for property tax exemptions for improvements made to buildings:
 - (1) Duane and Bonnie Sondeland, 2837 Maple Street North (3 year).
 - (2) Eileen Johnson, 349 Elmwood Avenue South (5 year).
 - (3) Gary and Lanette Markel, 1446 16 1/2 Street South (5 year).
 - (4) Kelly Hamilton, 1001 5th Street North (5 year).
- h. Applications for Games of Chance:
 - (1) MDA "Old Fashioned Motorcycle Run" for a raffle on 5/30/09.
 - (2) Red River Valley Figure Skating Club for a raffle on 3/15/09.
 - (3) F-M Walleyes Unlimited, Inc. for a raffle on 4/16/09.
 - (4) Susan Wedberg Benefit for a raffle on 3/13/09; Public-Spirited Resolution.
 - (5) Lincoln Elementary School for bingo and a raffle on 4/4/09.
 - (6) Metro Area Mayors Committee for People with Disabilities for a raffle on 4/30/09; Public-Spirited Resolution.

- Page 2 Purchase Agreement for permanent right-of-way/temporary construction easement from Riverview Place, Inc. (Improvement District No. 5601).
- j. Purchase Agreement for permanent right-of-way/utility/Moorhead Public Service easements from Borg Properties 45th, LLC (Improvement District No. 5803).
 - k. Bid award for Main Library signage to SDDI Sign Systems in the amount of \$83,855.37.
 - l. Xcel Energy Relocation Agreement at 32nd Avenue South west of 45th Street.
 - m. Contract time extension for Project No. 5828.
 - n. Advertise for bids for Project No. 5866.
 - o. Contract and bond for Project No. 5726.
 - p. Bills.
 - q. Create Improvement District Nos. 5858 and 5703.
 - r. Change Order for an increase of \$6,647.78 for Improvement District No. 5763.

* * * Regular Agenda * * *

- 1. Professional Services Contract for Indigent Services (Tabled to 2/23/09; Requested to be continued to 3/9/09)
- 2. Amendment to the Transit Service Agreement with First Transit for increased management services by \$2,983.16/month and GTC Dispatch Services by \$2,766.64/month.
- 3. Public Hearings - 5:15 p.m.:
 - a. Application filed by Pizza Ranch 45th Street, Inc. d/b/a Pizza Ranch for a Class "H" Alcoholic Beverage License at 4480 23rd Avenue South, Suite A.
 - b. Application filed by Kobe's Japanese Cuisine d/b/a Kobe's Japanese Cuisine for a Class "FA" Alcoholic Beverage License at 4228 15th Avenue SW.
 - c. Transfer of a Class "ABH" Alcoholic Beverage License from B&D, Inc. d/b/a Sidestreet Grille & Pub to Spirit Properties, Inc. d/b/a Sidestreet Grille & Pub at 301 3rd Avenue North.
 - d. Transfer of a Class "FA" Alcoholic Beverage License from Brent C. Olson d/b/a Norman's Prime Steaks and Seafood to Norman's Cattle and Fine Foods, LLC d/b/a Norman's Prime Steaks and Seafood, 1776 45th Street South.
 - e. Special Assessment Lists for 2008 New Construction of City Ordered Sidewalks (Improvement District No. 5801) and 2008 Reconstruction of City Ordered Sidewalks and Approaches (Improvement District No. 5802).
- 4. Legislative discussion.

MEMORANDUM

TO: BOARD OF CITY COMMISSIONERS

FROM: PLANNING DIRECTOR JIM GILMOUR 

DATE: FEBRUARY 19, 2009

SUBJECT: AMENDMENT TO CONTRACT WITH FIRST TRANSIT

We have been working with First Transit to provide additional staff support for the operation of our public transportation system. The needed staff time is for additional staff in dispatch at the Ground Transportation Center and for additional supervisory staff.

Additional staff is needed at the Ground Transportation Center because of larger numbers of phone inquiries, more passengers purchasing passes, and more questions on the service. The amendment will increase the dispatch weekly staff hours from 114 hours a week to 140 hours a week. This will provide a second staff person for over three hours in the morning and two hours in the afternoon, Monday through Friday.

Additional supervisory staff is needed to train and supervise bus drivers. The number of hours of paratransit service has increase by over 20,000 hours a year from what was estimated when the contract was agreed to in 2006. Paratransit hours are 70% higher than expected, and fixed route hours are 20% higher because of additional routes. Overall, Fargo is operating 35 percent more hours than expected under the contract. The increase in local supervisory staff will be from 2.5 staff to 3 full-time staff members.

A summary of the cost changes and the amendment is attached for your review. These cost changes were included in the 2009 Budget.

RECOMMENDED MOTION: Approve an amendment to the Transit Service Agreement with First Transit.

	<u>January</u>	<u>February</u>	<u>Change</u>	<u>Percent Change</u>
Fixed Route Management	\$ 14,616.12	\$ 15,147.33	\$ 531.21	3.6%
Paratransit Management	\$ 6,174.75	\$ 8,516.57	\$ 2,341.82	37.9%
GTC Management	\$ 2,088.67	\$ 2,198.80	\$ 110.13	5.3%
Total Mgmt. Increase	\$ 22,879.54	\$ 25,862.70	\$ 2,983.16	13.0%
GTC Dispatch Services	\$ 12,130.67	\$ 14,897.31	\$ 2,766.64	22.8%
TOTAL INCREASE	\$ 35,010.21	\$ 40,760.01	\$ 5,749.80	16.4%

**AMENDED
AGREEMENT
BETWEEN**

THE CITY OF FARGO

and

LIDLAW TRANSIT SERVICES, INC. d/b/a First Transit, Inc.

This agreement is made and entered into this 1st day of February by and between the CITY OF FARGO, NORTH DAKOTA, hereinafter referred to as "CITY" and LAIDLAW TRANSIT SERVICES INC. d/b/a First Transit, Inc., hereinafter referred to as "CONTRACTOR".

WITNESSETH

WHEREAS, the CITY has determined that it requires management, supervisory and operational services for its fixed route and paratransit system; and

WHEREAS, CONTRACTOR has represented that is has the necessary expertise and personnel and is qualified to perform such services; and,

WHEREAS the CITY and Contractor desire to amend the Services Contract pursuant to the terms of this Agreement:

NOW, THEREFORE, it is mutually understood and agreed as follows:

9.3 CITY shall pay CONTRACTOR the following for services provided during the term of this Agreement:

9.3.1 A fixed monthly rate as follows:

February 1, 2009 through December 31, 2009 – the number of dispatch staff hours will be increased from 113 hours a week to 140 hours a week and the monthly payment will increase to \$14,897.31.

9.3.4 A fixed monthly rate for management services as follows:

February 1, 2009 through December 31, 2009 – Supervisory staff will increased to 3 full-time staff located in Fargo, serving both the cities of Fargo and Moorhead and the month costs will be increase to the amounts noted below :

Fixed Route:	\$15,147.33
GTC:	\$8,516.57
Paratransit	\$2,198.80

Except as amended hereby the Services Contract shall remain in full force.

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed on the day and year first above written.

LIDLAW TRANSIT SERVICES, INC.
d/b/a First Transit, Inc.

CITY OF FARGO, NORTH DAKOTA

By: _____

By: _____

Printed Name: _____

Printed Name: _____

Date: _____

Date: _____

3a

NOTICE OF HEARING

Application For Alcoholic Beverage License

Notice is hereby given that the Board of City Commissioners of the City of Fargo, North Dakota, will conduct a Public Hearing in the City Commission Room, City Hall, on Monday, February 23, 2008 at 5:15 o'clock p.m. to consider for approval, an application of a Class "H" Alcoholic Beverage License for Pizza Ranch 45th Street, Inc. d/b/a: Pizza Ranch to be located at 4480 23rd Ave S-Suite A.

Any interested person may appear and will be heard.

City Auditor's Office
(February 2, 2009)

Instructions to Forum

Please publish as a Public Notice in the Legal Ad Section on Monday, February 2, 2009.

I will need an affidavit of publication.

Bill to: City Auditor's Office
 Attn: Michelle
 200 Third Street North
 Fargo, ND 58102

If you have any questions, please call Sharon at 241-1304.

MEMORANDUM

TO: Chief Keith Ternes

FROM: Sergeant Mathew Sanders

DATE: January 20, 2009

SUBJECT: Application for Class "H" Alcoholic Beverage License for Pizza Ranch 45th Street, Inc d/b/a Pizza Ranch to be located at 4480 23rd Ave S-Suite A.

In accordance with Section 25-1505 of the Fargo Municipal Code, I have conducted an investigation into the character, reputation and fitness of the applicant(s) listed on the supplied application.

During this investigation I questioned the applicant's criminal background, credit history, past residence history as well as any interaction they have had with law enforcement in any state.

The following information was discovered through this investigation:

Dean Larsen

Criminal History: DUI "27 to 30 Years Ago" Becker County, MN
Guilty Plea

Credit History: No areas of concern

The DUI was not on the criminal history check. It was disclosed by Mr. Larsen during his interview.

Pamela Edinger

Criminal History: No areas of concern

Credit History: No areas of concern

Troy Edinger

Criminal History: Driving Under the Influence - 3/10/1991 Fargo Police Dept.
Guilty Plea

Credit History: No areas of concern

Investigation Notes

Pamela Edinger and Troy Edinger will be the owner/operators of the establishment. Dean Larsen will be the manager.

Mr. Edinger listed "1990" as the year of his DUI arrest in Fargo. The actual year was 1991. He said he thought it was in 1990 or 1991 so he wrote down 1990.

Business Location

The application submitted is for a business located at 4480 23rd Ave S-Suite A., Fargo, ND. Within the immediate area, the following establishments currently hold a liquor license; The Fargo Wingate, Johnny Carino's, Settle Inn and Suites, Taco Shop, and Space Aliens.

Conclusion

I believe I have discovered all information related to the listed applicant(s) and all information related to the issuance of the requested liquor license. I have provided this completed background investigation to Fargo Police Chief Keith Ternes for his review and recommendation.



APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE

The following section to be completed by City Staff:

Date Received by Auditor's Office: 1-15-09
Investigations Fee Paid (\$250) [X] Yes ___ No Date paid: 1-15-09
Check # 994

Reviewed - Health Department by: ___ Date: ___
Comments (or see attached report):

Reviewed - Fire Department by: ___ Date: ___
Comments (or see attached report):

Reviewed - Inspections Division by: ___ Date: ___
Comments (or see attached report):

Reviewed - Police Department by: [Signature] Date: 1/20/09
(See attached report):

[Signature] Approval Recommendation
Chief of Police

___ Denial Recommendation
January 21, 2009
Date

Reviewed - Liquor Control Committee on (date): ___

___ Approval Recommendation
(See attached comments or minutes)

___ Denial Recommendation

Reviewed - City Commission on (date): ___

___ Approval ___ Denial
(See attached minutes)

Business/Company name: Pizza Ranch 45th Street, Inc.

Pam - Cell 701-306-3996

Doing business as: Pizza Ranch

This application is for the Class or Classes of Licenses checked:

- Class A Authorizes the licensee to sell "on-sale" only.
- Class B Authorizes the licensee to sell "off-sale" only. "Off-Sale" licensed premises must be no closer than 100 feet to any grocery store, drug store or gasoline service station or any part thereof.
- Class B "Limited" Authorizes the licensee to sell "off-sale" only. License is Non Transferable. "Off-Sale" licensed premises must be no closer than 100 feet to any grocery store, drug store or gasoline service station or any part thereof.
- Class AB Authorizes the licensee to sell "on-sale" and "off-sale". "Off-Sale" licensed premises must be no closer than 100 feet to any grocery store, drug store or gasoline service station or any part thereof.
- Class ABH Authorizes the licensee to sell "on-sale" and "off sale", at hotels & motels with 100 more guest rooms only.
- Class ABHRZ Authorizes licensee to sell "on-sale" and "off sale" at hotels in Renaissance Zone with 15 guest rooms
- Class C Authorizes the licensee to sell beer "on-sale" only.
- Class D Authorizes the licensee to sell beer "off-sale" only.
- Class F Authorizes the licensee to sell "on-sale" only served at table or booth; no bar allowed. Requires 50% or more of its annual gross receipts from the sale of prepared meals and not alcoholic beverages.
- Class FA Authorizes the licensee to sell "on-sale" only, physical bar is allowed. Requires 50% of more of its annual gross receipts from the sale of prepared meals and not alcoholic beverages.
- Class FARZ Authorizes the licensee to sell "on-sale" only; physical bar allowed. Required to be in the Renaissance Zone. No gaming and no "E" permits allowed. Requires 50% or more of its annual gross receipts from the sale of prepared meals and not alcoholic beverages. The initial fee is 1/2 of the FA license.
- Class FA-Golf On USGA Golf Course of 9 or more holes. Requires 25% receipts of food sales from April to October and 50% the rest of the year.
- Class G Authorizes the licensee to sell wine and sparkling wine "on-sale" only, served at table or booth, no bar. Requires 50% food sales.
- Class H Authorizes the licensee to sell beer "on-sale" only, served at table of booth, with no bar allowed and requires 50% food sales.
- Class I Authorizes the licensee to sell beer, wine, and other sparkling wine "on-sale" only. A physical bar is allowed and requires 50% food sales.
- Class J Authorizes the licensee to sell "on-sale" only at a non-profit organization for military purposes.
- Class L Authorizes the licensee to sell "on-sale" only on an excursion boat operating on the Red River.

- () Class M Authorizes the licensee to operate a "Microbrew Pub" and to sell "on-sale" and "off-sale" offered in conjunction with another license.
- () Class N Authorizes the licensee to sell "on-sale" only at a stadium with a minimum seating capacity of 2,500.
- () Class O Authorizes the licensee to operate a winemaker and/or vendor of winemaking supplies and related services.
- () Class P Authorizes the licensee to operate a domestic winery and to sell wine "on-sale" and "off-sale." Allows limited beer sales.
- () Class W Authorizes the licensee to operate a wine bar, serving wine and limited beer "on-sale." A physical bar is allowed and requires 20% food sales.
- () Class Z Authorizes the licensee to sell "on-sale" only issued to individuals and partnerships not currently holding another "A", "AB", "ABH", or "ABH-RZ". This license is non-transferable.

The following section to be completed by the applicant:

Initial #1 - #8 to indicate you understand and agree to these terms of the "Z", "W" or "B Limited" license. Then print your name and sign in the space provided below:

ALL APPLICANTS must initial #9 - #16 and sign in the space provided below.

1. _____ My business may sell "On Sale" only (Class Z & W).
- 1a. _____ My business may sell "Off Sale" only; **NO** "On-Sale" liquor sales are permitted. ("B Limited)
2. _____ This license shall only be issued to individuals or partnerships (natural persons only), corporations for liability purposes, except as otherwise provided hereinafter.
3. _____ I may not obtain more than one "Z", "W" or "B Limited" license.
4. _____ If I hold an "A", "B", "AB", "ABH or ABH-RZ" license, I may not obtain a "Z", "W" or "B Limited" license.
5. _____ If I voluntarily go out of business, file a bankruptcy petition, become insolvent or otherwise cease business, the license reverts to the City of Fargo. This license may be transferred to reflect a change in location of your licensed premises.
6. _____ The license may be transferred to my heirs (children only) during my lifetime. Upon my death, the license may be transferred to my heir(s), but may not be transferred to any other person, partnership, firm or corporation. If any partner in a partnership holding the license dies, the remaining partner(s) may continue to hold the license, but no partnership interest may be issued to any new partner. The ordinance will allow a partnership between the original licensee and his children which may take the form of a corporate entity under North Dakota law. Shares in the corporation may be transferred to the children, but transfer of shares to anyone else will constitute a sale that will cause the license to revert to the City of Fargo. As the ordinance indicates, the intent of this provision is to allow a transfer between a parent and children but a transfer of shares to anyone else is absolutely prohibited.
7. _____ If I sell my business as a "going concern" (i.e., a complete and operational bar), the purchaser of the business has the first preference to purchase the "Z", "W" or "B Limited" license from the City. (The purchaser must meet all other relevant conditions and requirements for such a purchase.)
- 8a. _____ If I am issued a "B Limited" license, I must pay an initial fee for the license in the amount of \$80,000 and an annual fee for the license in the amount of the \$1,400 at the beginning of each license year.
- 8b. _____ "Z" Initial \$105,000. Annual \$1,700.
- 8c. _____ "W" Initial \$25,000. Annual \$1,000.
9. ~~9~~ **9.09 TE** All Applicants must assure there is adequate off-street parking for my business (within the discretion of and as approved by the City Commission). Membership in the current City parking program (e.g., "P.O.P.") may place me in compliance with this requirement.

- 10. ~~NOTE~~ I have received a copy of the Alcoholic Beverage Ordinance (s) of the City of Fargo, read the ordinances and am familiar with the conditions and requirements of these ordinances.
- 11. ~~NOTE~~ If granted an alcoholic beverage license, I will obey, abide by and comply with the State of North Dakota Liquor Control Act, and the City of Fargo Alcoholic Beverage ordinances, as well as any amendments to either of these, which may be made from time to time.
- 12. ~~NOTE~~ I understand either, I, my manager(s), or both of us must attend a yearly meeting (date and time to be announced) with representatives from the Police and Health departments to discuss law enforcement and safety concerns as a condition of license renewal.
- 13. ~~NOTE~~ I understand that the premises described in this application, if licensed for alcoholic beverage sales, may be inspected at any time by the Chief of Police, or any officer of the Police or Health Departments as allowed by city ordinances and state law. My employees and I will cooperate with such inspections.
- 14. ~~NOTE~~ I understand that all employees, managers and owners engaged in mixing, pouring or service of alcoholic beverages MUST attend Server Training.
- 15. ~~NOTE~~ I am familiar with the questions, answers and other information as it appears in the complete application for an alcoholic beverage license, and the answers and information are, to the best of my belief and knowledge, true, complete and accurate. (Note: This application must be made under oath before a Notary Public.)
- 16. ~~NOTE~~ I recognize the City of Fargo is subject to open records laws contained in chapter 44-04 of the N.D. Century Code. Section 44-04-18.4 contains an exception for trade secrets, proprietary, commercial, and financial information. I agree in submitting the application, that I have familiarized myself with this law. If any information being forwarded to the City of Fargo is claimed as confidential or proprietary under this section, I must clearly indicate this in writing when I submit this application, pointing out, in detail, why the information submitted is claimed as an exemption under section 44-04-18.4. I further agree to respond to, as well as to aid the City, in responding to any claim under 44.04-21.1 concerning this claim of confidentiality under 44-04-18.4.

Applicant printed name: Pam Edinger Signature: Pam Edinger

Applicant printed name: Troy Edinger Signature: Troy Edinger

Applicant printed name: _____ Signature: _____

Business/Company name: Pizza Ranch 45th street, Inc.
Doing business as: Pizza Ranch

Business address (location): 4480 23rd Ave S, Suite A, Fargo ND 58104
Mailing address: P.O. Box 9415, Fargo, ND 58106-9415

Legal description of the premises to be licensed: Lot 1, Block 3, Anderson Park Addition to the City of Fargo

Does applicant wish to describe, depict, or otherwise identify various areas or spaces within the building which shall constitute the licensed premises in accordance with Section 25-1501, Subsection 8? Yes () No (X)

Is the premises now occupied by another business? Yes ___ No X

Type of business currently there: _____

Mailing address: _____
(address) (city) (state & zip)

Business e-mail address: _____

Phone number: (____) _____ Other number: (____) _____

Do you own or rent the property where the license will be used? ___ Own X Rent
If you rent, provide the following information:

Anderson Park Joint clo Cityscapes Development, 474 45th St S,
(name) Venture II, LLP (address) (city) (state & zip) Fargo ND 58102

If you are the owner of the property, are there any delinquent taxes against the premises?
___ Yes ___ No If "yes", in what amount? _____

Applicant Information:

Name: Pam K. Edinger Amundson
(first) (middle) (last) (maiden name)

Address: 2301 16 Ave S Fargo ND 58103
(address) (city) (state & zip)

How long have you lived at the address? 21 yr.

Provide your address history for the past 5 years: (Use additional page if necessary.)

From 4-88 to current Address: 2301 16 Ave S, Fargo, ND 58103
From _____ to _____ Address: _____
From _____ to _____ Address: _____

E-mail address: wade.pam@cableone.net

Home phone number: (701) 280-2890 Other number: (701) 306-3996

Date of Birth: 9-12-48 Place of Birth: Fargo, ND

List each driver's license you have ever had and the state of issue:

DL#: ED1-48-3262 State of Issue: ND Dates: 07-28-2008

DL#: _____ State of Issue: _____ Dates: _____

DL#: _____ State of Issue: _____ Dates: _____

Has your driver's license ever been suspended or revoked? _____ Yes No If "yes," where and when.

If "yes," have you ever been issued a citation for driving after your license was suspended or revoked? _____ Yes _____ No If "yes," where and when.

Have you ever been convicted, plead guilty, or plead "no contest" to any law of the U.S., or any state, or of any local ordinance (other than traffic)? (DUI **should not** be considered a "traffic offense"—and therefore must be listed) _____ Yes No If yes, provide the date of arrest, location, charge, and sentence or each conviction.

Have you been issued a citation for any alcohol-related offense? _____ Yes No If "yes," provide the date, location, and charge for each citation:

List all federal, state, and local licenses (including liquor licenses; excluding driver's licenses) you currently hold, formerly held, or may have an interest in:
Pizza Ranch Dilworth EIN # 20-3551987
Pizza Ranch Fargo EIN # 26-3959072
Food & Beverage License, State of Minnesota #1035
License to Sell Soft Drinks, City of Dilworth, 1-14-08

Have any of the above named licenses ever been suspended or revoked? Yes No

If yes, list the dates and reasons for the suspensions or revocations:

List your employment/business history for the past 7 years period: Use additional pages if necessary.)

From: 11-88 to 6-05 Business name: Great Harvest Bread
Address: 1523 S. Univ Dr, Fargo Position/Title: Owner
From: 1-23-06 to current Business name: Pizza Ranch Dilworth
Address: 1504 Center Ave W, Dilworth Position/Title: Owner
MN 56529
From: _____ to _____ Business name: _____
Address: _____ Position/Title: _____
From: _____ to _____ Business name: _____
Address: _____ Position/Title: _____

Do you currently own or have a financial interest in any other business that sells or serves alcoholic beverages? Yes No If "yes," list each business below:

Have you ever manufactured, sold, or distributed alcoholic beverages on the wholesale or retail level? Yes No If "yes, indicate where, when, and for whom below:

Do you have any current or prior management experience working for a business that sells or serves alcohol? Yes No If "yes," describe below:

Partnership/Corporation Information (ALL Partners, Corporate Shareholders and Directors holding 5% or more of the outstanding stock must be listed—make copies and use additional pages as needed)

S-Corp

Is your business a partnership? Yes No If "yes," complete the following Section: (This section may be copied and pages attached for additional partners.)

Name: Pam K. Edinger Amundson
(first) (middle) (last) (maiden name)

Address: 2301 16 Ave S Fargo ND 58103
(address) (city) (state & zip)

How long have you lived at the address? 21 yr

Provide your address history for the past 5 years: (Use additional page if necessary.)

From 4-88 to Current Address: 2301 16 Ave S, Fargo 58103

From _____ to _____ Address: _____

From _____ to _____ Address: _____

E-mail address: wade.pam@cableone.net

Home phone number: (701) 280-2890 Other number: (701) 306-3996 cell

Date of Birth: 9-12-48 Place of Birth: Fargo

List each driver's license you have ever had and the state of issue:

DL#: ED1-48-3262 State of Issue: ND Dates: 07-28-08

DL#: _____ State of Issue: _____ Dates: _____

DL#: _____ State of Issue: _____ Dates: _____

Has your driver's license ever been suspended or revoked? Yes No If "yes", where and when.

If "yes," have you ever been issued a citation for driving after you license was suspended or revoked? Yes No If "yes", where and when?

Have you ever manufactured, sold, or distributed alcoholic beverages on the wholesale or retail level? ___ Yes ___ No If "yes," indicate where, when, and for whom below:

Do you have any current or prior management experience working for a business that sells or serves alcohol? ___ Yes ___ No If "yes," describe below:

Are all officers, directors, and shareholders holding more than 5% of the outstanding stock 21 years of age or older? Yes ; No ();

Address of Home Office 2301 16 Ave S, Fargo ND 58103
Date Incorporated 10-31-08 State of Incorporation ND

If a subsidiary of any corporation, state name and address of parent corporation _____

Partnership/Corporation Information (ALL Partners, Corporate Shareholders and Directors holding 5% or more of the outstanding stock must be listed—make copies and use additional pages as needed)

S-CORP
Is your business a partnership? Yes No If "yes," complete the following Section: (This section may be copied and pages attached for additional partners.)

Name: Troy A. Edinger
(first) (middle) (last) (maiden name)

Address: 6266 14 St S Fargo ND 58104
(address) (city) (state & zip)

How long have you lived at the address? 5 yr 1 mo

Provide your address history for the past 5 years: (Use additional page if necessary.)

From 11-2003 to Present Address: 6266 14 St S, Fargo

From _____ to _____ Address: _____

From _____ to _____ Address: _____

E-mail address: troyandnova@cableone.net

Home phone number: (701) 277-9876 Other number: (701) 200-3526

Date of Birth: 4-28-72 Place of Birth: Jamestown, ND

List each driver's license you have ever had and the state of issue:

DL#: EDI-72-1693 State of Issue: ND Dates: 4-28-2008

DL#: _____ State of Issue: _____ Dates: _____

DL#: _____ State of Issue: _____ Dates: _____

Has your driver's license ever been suspended or revoked? Yes No If "yes", where and when.

Fargo, ND 1990

If "yes," have you ever been issued a citation for driving after you license was suspended or revoked? Yes No If "yes", where and when?

Have you ever been convicted, plead guilty, or plead "no contest" to any law of the U.S., or any state, or of any local ordinance (other than traffic)? (DUI should not be considered a "traffic offense"—and therefore must be listed) Yes No If yes, provide the date of arrest, location, charge, and sentence for each conviction:

OUI, Fargo, ND 1990

Have you been issued a citation for any alcohol-related offense? Yes No If "yes," provide the date, location, and charge for each citation:

OUI, Fargo, ND 1990

List all federal, state, and local licenses (including liquor licenses; excluding driver's licenses) you currently hold, formerly held, or may have an interest in:

Pizza Ranch Dilworth EIN # 20-3551987
Pizza Ranch Fargo EIN # 26-3959072
Food & Beverage License, State of MN - #1035
License To sell soft Drinks, City of Dilworth, 1-14-08

Have any of the above named licenses ever been suspended or revoked? Yes No If yes, list the dates and reasons for the suspensions or revocations:

List your employment/business history for the past 7 year's period: (Use additional pages if necessary.)

From: 4-97 to 6-05 Business name: Great Harvest Bread

Address: 1523 S. Univ Dr, Fargo, ND 58103 Position/Title: Production Mgr

From: 6-97 to 12-05 Business name: Luna Coffee

Address: 1545 Univ Dr S, Fargo, ND 58103 Position/Title: Owner

From: 1-23-06 to Present Business name: Pizza Ranch Dilworth

Address: 1504 Center Ave W, Dilworth, MN 56529 Position/Title: Owner

From: _____ to _____ Business name: _____

Address: _____ Position/Title: _____

Do you currently own or have a financial interest in any other business that sells or serves alcoholic beverages? Yes No If "yes," list each business below:

Have you ever manufactured, sold, or distributed alcoholic beverages on the wholesale or retail level? Yes No If "yes," indicate where, when, and for whom below:

Do you have any current or prior management experience working for a business that sells or serves alcohol? Yes No If "yes," describe below:

Are all officers, directors, and shareholders holding more than 5% of the outstanding stock 21 years of age or older? Yes No ;

Address of Home Office 2301 16 Ave S, Fargo ND 58103
Date Incorporated 10-31-08 State of Incorporation ND

If a subsidiary of any corporation, state name and address of parent corporation _____

Operator/Manager Information

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

Name:

(first) (middle) (last) (maiden name)

Address:

(address) (city) (state & zip)

Home phone number: (____) _____ Other number: (____) _____

Date of Birth: _____ Place of Birth: _____

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

Name:

Dean C. Larsen
(first) (middle) (city) last (maiden name)

Address:

2514 Viking Circle Fargo ND 58103
(address) (city) (state & zip)

Home phone number: (701) 799-7491 Other number: (701) 799-7491

Date of Birth: 12-21-56 Place of Birth: Detroit Lakes, MN

(Important: The name and other information about your manager must be provided before a license can be issued. If the manager changes during the course of the license period, you must provide the City Auditor's Office with updated information about the new manager immediately.)

Business Site Plan

On the following page (or on attached pages if additional space is needed), provide a detailed diagram and description of the design, location, and square footage of the premises to be licensed.

- * The scale should be state, such as 1"=20'. The direction N should be indicated towards the top.
- * The diagram should include placement of all pertinent features of the interior of the licensed premises, such as seating areas, kitchens, offices, repair areas, restrooms, etc. The exterior parking area should also be shown.

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NOTICE OF HEARING

Application For Alcoholic Beverage License

Notice is hereby given that the Board of City Commissioners of the City of Fargo, North Dakota, will conduct a Public Hearing in the City Commission Room, City Hall, on Monday, February 23, 2009 at 5:15 o'clock p.m. to consider for approval, an application of a Class "FA" Alcoholic Beverage License for Kobe's Japanese Cuisine d/b/a: Kobe's Japanese Cuisine to be located at 4228 15 Ave SW.

Any interested person may appear and will be heard.

City Auditor's Office
(February 2, 2009)

Instructions to Forum

Please publish as a Public Notice in the Legal Ad Section on Monday February 2, 2009.

I will need an affidavit of publication.

Bill to: City Auditor's Office
 Attn: Michelle
 200 Third Street North
 Fargo, ND 58102

If you have any questions, please call Sharon at 241-1304.

MEMORANDUM

TO: Chief Keith Ternes

FROM: Sergeant Mathew Sanders

DATE: January 20, 2009

SUBJECT: Application for Class "FA" Alcoholic Beverage License for Kobe's Japanese Cuisine to be located at 4228 15th Avenue South.

In accordance with Section 25-1505 of the Fargo Municipal Code, I have conducted an investigation into the character, reputation and fitness of the applicant(s) listed on the supplied application.

During this investigation I questioned the applicant's criminal background, credit history, past residence history as well as any interaction they have had with law enforcement in any state.

The following information was discovered through this investigation:

Kun Lin

Criminal History: No areas of concern

Credit History: No areas of concern

Investigation Notes

I spoke to Mr. Lin by telephone on 1/18/09. I asked for clarification of two items on his application.

Mr. Lin answered "no" for the application question "Have you ever manufactured, sold, or distributed alcoholic beverages on the wholesale or retail level?" The correct answer to that should be "yes." Mr. Lin said he misunderstood the question. He thought he was being asked if he is currently employed at a place that manufactures, sells or distributes alcohol. Mr. Lin said he has served alcohol to customers during his managerial positions at Hana Tokyo Cuisine and Samura Steak House of Japan.

In the portion of the application where Mr. Lin describes how he will address over-serving, and intoxicated or disorderly patrons he wrote "No more than certain drink with certain time." I asked him to clarify that statement. Mr. Lin said he will train his staff to anticipate a patron becoming intoxicated if they are given too much alcohol to drink. He clarified that a patron will not be given excessive amounts of alcohol while at his restaurant.

Mr. Lin said he moved from New York to Fargo on December 10th, 2008. He stayed in a hotel until he rented an apartment on 1/1/09. He is residing at 1740 40th Street South, apartment 406, Fargo, North Dakota. His home phone number is 701-232-5623. Mr. Lin said he will be the owner/manager of the business.

Business Location

The application submitted is for a business currently located at 4228 15th Ave. S. Fargo, ND. Within the immediate area the following establishments currently hold a liquor license; Valentino's, Granite City, Buffalo Wild Wings, Ramada Plaza Suites, Grizzly's Grill N' Saloon, TGI Fridays, Big Daddy's Surf Bar and Grill

Conclusion

I believe I have discovered all information related to the listed applicant(s) and all information related to the issuance of the requested liquor license. I have provided this completed background investigation to Fargo Police Chief Keith Ternes for his review and recommendation.



APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE

The following section to be completed by City Staff:

Date Received by Auditor's Office: 12-24-08
Investigations Fee Paid (\$250) Yes No Date paid: 12-24-08
Check # Council Check

Reviewed --Health Department by: _____ Date: _____
Comments (or see attached report):

Reviewed--Fire Department by: _____ Date: _____
Comments (or see attached report):

Reviewed—Inspections Division by: _____ Date: _____
Comments (or see attached report):

Reviewed--Police Department by: [Signature] Date: 1/20/09
(See attached report):

Approval Recommendation Denial Recommendation
[Signature] 01.21.09
Chief of Police Date

Reviewed—Liquor Control Committee on (date): _____

Approval Recommendation Denial Recommendation
(See attached comments or minutes)

Reviewed City Commission on (date): _____

Approval Denial
(See attached minutes)

Business/Company name: Kohé's Japanese Cuisine

Doing business as: KOBE'S JAPANESE CUISINE

This application is for the Class or Classes of Licenses checked:

- () Class A Authorizes the licensee to sell "on-sale" only.
- () Class B Authorizes the licensee to sell "off-sale" only. "Off-Sale" licensed premises must be no closer than 100 feet to any grocery store, drug store or gasoline service station or any part thereof.
- () Class B "Limited" Authorizes the licensee to sell "off-sale" only. License is Non Transferable. "Off-Sale" licensed premises must be no closer than 100 feet to any grocery store, drug store or gasoline service station or any part thereof.
- () Class AB Authorizes the licensee to sell "on-sale" and "off-sale". "Off-Sale" licensed premises must be no closer than 100 feet to any grocery store, drug store or gasoline service station or any part thereof.
- () Class ABH Authorizes the licensee to sell "on-sale" and "off sale", at hotels & motels with 100 more guest rooms only.
- () Class ABHRZ Authorizes licensee to sell "on-sale" and "off sale" at hotels in Renaissance Zone with 15 guest rooms
- () Class C Authorizes the licensee to sell beer "on-sale" only.
- () Class D Authorizes the licensee to sell beer "off-sale" only.
- () Class F Authorizes the licensee to sell "on-sale" only served at table or booth; no bar allowed. Requires 50% or more of its annual gross receipts from the sale of prepared meals and not alcoholic beverages.
- Class FA Authorizes the licensee to sell "on-sale" only, physical bar is allowed. Requires 50% of more of its annual gross receipts from the sale of prepared meals and not alcoholic beverages.
- () Class FARZ Authorizes the licensee to sell "on-sale" only; physical bar allowed. Required to be in the Renaissance Zone. No gaming and no "E" permits allowed. Requires 50% or more of its annual gross receipts from the sale of prepared meals and not alcoholic beverages. The initial fee is 1/2 of the FA license.
- () Class FA-Golf On USGA Golf Course of 9 or more holes. Requires 25% receipts of food sales from April to October and 50% the rest of the year.
- () Class G Authorizes the licensee to sell wine and sparkling wine "on-sale" only, served at table or booth, no bar. Requires 50% food sales.
- () Class H Authorizes the licensee to sell beer "on-sale" only, served at table of booth, with no bar allowed and requires 50% food sales.
- () Class I Authorizes the licensee to sell beer, wine, and other sparkling wine "on-sale" only. A physical bar is allowed and requires 50% food sales.
- () Class J Authorizes the licensee to sell "on-sale" only at a non-profit organization for military purposes.
- () Class L Authorizes the licensee to sell "on-sale" only on an excursion boat operating on the Red River.

- () Class M Authorizes the licensee to operate a "Microbrew Pub" and to sell "on-sale" and "off-sale" offered in conjunction with another license.
- () Class N Authorizes the licensee to sell "on-sale" only at a stadium with a minimum seating capacity of 2,500.
- () Class O Authorizes the licensee to operate a winemaker and/or vendor of winemaking supplies and related services.
- () Class P Authorizes the licensee to operate a domestic winery and to sell wine "on-sale" and "off-sale." Allows limited beer sales.
- () Class W Authorizes the licensee to operate a wine bar, serving wine and limited beer "on-sale." A physical bar is allowed and requires 20% food sales.
- () Class Z Authorizes the licensee to sell "on-sale" only issued to individuals and partnerships not currently holding another "A", "AB", "ABH", or "ABH-RZ". This license is non-transferable.

The following section to be completed by the applicant:

Initial #1 - #8 to indicate you understand and agree to these terms of the "Z", "W" or "B Limited" license. Then print your name and sign in the space provided below:

ALL APPLICANTS must initial #9 - #16 and sign in the space provided below.

1. _____ My business may sell "On Sale" only (Class Z & W).
- 1a. _____ My business may sell "Off Sale" only; **NO** "On-Sale" liquor sales are permitted. ("B Limited)
2. _____ This license shall only be issued to individuals or partnerships (natural persons only), corporations for liability purposes, except as otherwise provided hereinafter.
3. _____ I may not obtain more than one "Z", "W" or "B Limited" license.
4. _____ If I hold an "A", "B", "AB", "ABH or ABH-RZ" license, I may not obtain a "Z", "W" or "B Limited" license.
5. _____ If I voluntarily go out of business, file a bankruptcy petition, become insolvent or otherwise cease business, the license reverts to the City of Fargo. This license may be transferred to reflect a change in location of your licensed premises.
6. _____ The license may be transferred to my heirs (children only) during my lifetime. Upon my death, the license may be transferred to my heir(s), but may not be transferred to any other person, partnership, firm or corporation. If any partner in a partnership holding the license dies, the remaining partner(s) may continue to hold the license, but no partnership interest may be issued to any new partner. The ordinance will allow a partnership between the original licensee and his children which may take the form of a corporate entity under North Dakota law. Shares in the corporation may be transferred to the children, but transfer of shares to anyone else will constitute a sale that will cause the license to revert to the City of Fargo. As the ordinance indicates, the intent of this provision is to allow a transfer between a parent and children but a transfer of shares to anyone else is absolutely prohibited.
7. _____ If I sell my business as a "going concern" (i.e., a complete and operational bar), the purchaser of the business has the first preference to purchase the "Z", "W" or "B Limited" license from the City. (The purchaser must meet all other relevant conditions and requirements for such a purchase.)
- 8a. _____ If I am issued a "B Limited" license, I must pay an initial fee for the license in the amount of \$80,000 and an annual fee for the license in the amount of the \$1,400 at the beginning of each license year.
- 8b. _____ "Z" Initial \$105,000. Annual \$1,700.
- 8c. _____ "W" Initial \$25,000. Annual \$1,000.
9. All Applicants must assure there is adequate off-street parking for my business (within the discretion of and as approved by the City Commission). Membership in the current City parking program (e.g., "P.O.P.") may place me in compliance with this requirement.

- 10. K.V I have received a copy of the Alcoholic Beverage Ordinance (s) of the City of Fargo, read the ordinances and am familiar with the conditions and requirements of these ordinances.
- 11. K.V If granted an alcoholic beverage license, I will obey, abide by and comply with the State of North Dakota Liquor Control Act, and the City of Fargo Alcoholic Beverage ordinances, as well as any amendments to either of these, which may be made from time to time.
- 12. K.V I understand either, I, my manager(s), or both of us must attend a yearly meeting (date and time to be announced) with representatives from the Police and Health departments to discuss law enforcement and safety concerns as a condition of license renewal.
- 13. K.V I understand that the premises described in this application, if licensed for alcoholic beverage sales, may be inspected at any time by the Chief of Police, or any officer of the Police or Health Departments as allowed by city ordinances and state law. My employees and I will cooperate with such inspections.
- 14. K.V I understand that all employees, managers and owners engaged in mixing, pouring or service of alcoholic beverages MUST attend Server Training.
- 15. K.V I am familiar with the questions, answers and other information as it appears in the complete application for an alcoholic beverage license, and the answers and information are, to the best of my belief and knowledge, true, complete and accurate. (Note: This application must be made under oath before a Notary Public.)
- 16. K.V I recognize the City of Fargo is subject to open records laws contained in chapter 44-04 of the N.D. Century Code. Section 44-04-18.4 contains an exception for trade secrets, proprietary, commercial, and financial information. I agree in submitting the application, that I have familiarized myself with this law. If any information being forwarded to the City of Fargo is claimed as confidential or proprietary under this section, I must clearly indicate this in writing when I submit this application, pointing out, in detail, why the information submitted is claimed as an exemption under section 44-04-18.4. I further agree to respond to, as well as to aid the City, in responding to any claim under 44.04-21.1 concerning this claim of confidentiality under 44-04-18.4.

Applicant printed name: KUN LIN Signature: 

Applicant printed name: _____ Signature: _____

Applicant printed name: _____ Signature: _____

Business/Company name: KOBE'S JAPANESE CUISINE
Doing business as: KOBE'S JAPANESE CUISINE

Business address (location): 4228 15th AVE S.W., FARGO, ND 58103
Mailing address: Same as above

* Legal description of the premises
Additional: *11/19/94 SPL/FR 3802-04500 & 3802-05100
Block: 2
Lot: W 170 FT OF 1 & W 170 FT OF N 50 FT OF 2
Addition: West Acres 2nd

Does applicant wish to describe, depict, or otherwise identify various areas or spaces within the building which shall constitute the licensed premises in accordance with Section 25-1501, Subsection 8? Yes (); No (X) "INDIVIDUAL Building"

Is the premises now occupied by another business? Yes No (X)

Type of business currently there: N/A The Palace

Mailing address: N/A
(address) (city) (state & zip)

Business e-mail address: N/A

Phone number: () N/A Other number: () N/A

Do you own or rent the property where the license will be used? Own () Rent (X)
If you rent, provide the following information: Chang, Yockyoung + Lee, Chunwin

KUN, LIN 4228 15th AVE SW Fargo, ND 58103
(name) (address) (city) (state & zip)

If you are the owner of the property, are there any delinquent taxes against the premises? Yes () No (X) If "yes", in what amount? _____

Applicant Information:

Name: KUN LIN
(first) (middle) (last) (maiden name)

Address: 132-38 59th AVE - FLUSHING NY 11355
(address) (city) (state & zip)

How long have you lived at the address? 9 Months

Provide your address history for the past 5 years: (Use additional page if necessary.)

From 12/2003 to 2/2004 Address: 132-~~54~~ Crescent St BROOKLYN, NY 11208
From 3/2004 to 1/2007 Address: 132-54 59th AVE FLUSHING NY 11355
From 2/2007 to 12/2008 Address: 132-38 59th AVE FLUSHING NY 11355

E-mail address: _____

Home phone number: (917) 881-1333 Other number: (_____) _____

Date of Birth: 12/3/1983 Place of Birth: FUJIAN OF CHINA

List each driver's license you have ever had and the state of issue:

DL#: 950956626 State of Issue: NY Dates: 1/21/2006

DL#: _____ State of Issue: _____ Dates: _____

DL#: _____ State of Issue: _____ Dates: _____

Has your driver's license ever been suspended or revoked? _____ Yes No If "yes," where and when.

If "yes," have you ever been issued a citation for driving after your license was suspended or revoked? _____ Yes No If "yes," where and when.

Have you ever been convicted, plead guilty, or plead "no contest" to any law of the U.S., or any state, or of any local ordinance (other than traffic)? (DUI **should not** be considered a "traffic offense"—and therefore must be listed) _____ Yes No If yes, provide the date of arrest, location, charge, and sentence or each conviction.

Have you been issued a citation for any alcohol-related offense? _____ Yes No If "yes," provide the date, location, and charge for each citation:

List all federal, state, and local licenses (including liquor licenses; excluding driver's licenses) you currently hold, formerly held, or may have an interest in:

Have any of the above named licenses ever been suspended or revoked? ___ Yes No

If yes, list the dates and reasons for the suspensions or revocations:

List your employment/business history for the past 7 years period: Use additional pages if necessary.)

From: 05/2008 to 10/2008 Business name: HANA TOKYO CUISINE (TOMO SASHI)

Address: 1633 E MAIN ST SHERIDAN, NY 11789 Position/Title: MANAGER

From: 9/2006 to 04/2008 Business name: SAMURA STEAK HOUSE OF JAPAN

Address: 46A GERRARD ST HUNTINGTON, NY 11743 Position/Title: MANAGER

From: 9/03 to 8/2006 Business name: TOMO Japanese Restaurant

Address: 286 MAIN ST HUNTINGTON, NY 11743 Position/Title: CHEF

From: _____ to _____ Business name: _____

Address: _____ Position/Title: _____

Do you currently own or have a financial interest in any other business that sells or serves alcoholic beverages? ___ Yes No If "yes," list each business below:

Have you ever manufactured, sold, or distributed alcoholic beverages on the wholesale or retail level? ___ Yes No If "yes," indicate where, when, and for whom below:

Do you have any current or prior management experience working for a business that sells or serves alcohol? Yes ___ No If "yes," describe below:

Have you ever been convicted, plead guilty, or plead "no contest" to any law of the U.S., or any state, or of any local ordinance (other than traffic)? (DUI **should not** be considered a "traffic offense"--and therefore must be listed) ____ Yes No If yes, provide the date of arrest, location, charge, and sentence for each conviction:

Have you been issued a citation for any alcohol-related offense? ____ Yes No If "yes," provide the date, location, and charge for each citation:

List all federal, state, and local licenses (including liquor licenses; excluding driver's licenses) you currently hold, formerly held, or may have an interest in:

Have any of the above named licenses ever been suspended or revoked? ____ Yes No If yes, list the dates and reasons for the suspensions or revocations:

List your employment/business history for the past 7 year's period: (Use additional pages if necessary.)

From: _____ to _____ Business name: N/A

Address: _____ Position/Title: N/A

From: _____ to _____ Business name: N/A

Address: _____ Position/Title: N/A

From: _____ to _____ Business name: N/A

Address: _____ Position/Title: N/A

From: _____ to _____ Business name: N/A

Address: _____ Position/Title: N/A

Do you currently own or have a financial interest in any other business that sells or serves alcoholic beverages? ____ Yes No If "yes," list each business below:

Have you ever manufactured, sold, or distributed alcoholic beverages on the wholesale or retail level? ___ Yes No If "yes," indicate where, when, and for whom below:

Do you have any current or prior management experience working for a business that sells or serves alcohol? ___ Yes No If "yes," describe below:

Are all officers, directors, and shareholders holding more than 5% of the outstanding stock 21 years of age or older? Yes (); No ()

Address of Home Office N/A
Date Incorporated N/A State of Incorporation N/A

If a subsidiary of any corporation, state name and address of parent corporation N/A
N/A

Operator/Manager Information

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

Name: N/A
(first) (middle) (last) (maiden name)

Address: N/A
(address) (city) (state & zip)

Home phone number: () N/A Other number: () N/A

Date of Birth: _____ Place of Birth: N/A

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

Name: N/A
(first) (middle) (city) (maiden name)

Address: N/A
(address) (city) (state & zip)

Home phone number: () N/A Other number: () N/A

Date of Birth: _____ Place of Birth: N/A

(Important: The name and other information about your manager must be provided before a license can be issued. If the manager changes during the course of the license period, you must provide the City Auditor's Office with updated information about the new manager immediately.)

Business Site Plan

On the following page (or on attached pages if additional space is needed), provide a detailed diagram and description of the design, location, and square footage of the premises to be licensed.

- * The scale should be state, such as 1"=20'. The direction N should be indicated towards the top.
- * The diagram should include placement of all pertinent features of the interior of the licensed premises, such as seating areas, kitchens, offices, repair areas, restrooms, etc. The exterior parking area should also be shown.

3e

NOTICE OF HEARING

Application For Alcoholic Beverage License Transfer

Notice is hereby given that the Board of City Commissioners of the City of Fargo, North Dakota, will conduct a Public Hearing in the City Commission Room, City Hall, on Monday, February 23, 2009 at 5:15 o'clock p.m. to consider for approval an application for transfer of a Class "ABH" Alcoholic Beverage License from B&D, Inc. d/b/a Sidestreet Grille & Pub, to Spirit Properties, Inc. d/b/a Sidestreet Grille & Pub to be located at 301 3 Ave N.

Any interested person may appear and will be heard.

City Auditor's Office
(February 2, 2009)

Instructions to Forum

Please publish as a Public Notice in the Legal Ad Section on Monday, February 2, 2009.

I will need an affidavit of publication.

Bill to: City Auditor's Office
 200 Third Street North
 Fargo, ND 58102

If you have any questions, please call Sharon at 241-1304.

MEMORANDUM

TO: Chief Keith Ternes

FROM: Sergeant Mathew Sanders

DATE: January 20th, 2009

SUBJECT: Application for transfer of Class "ABH" Alcoholic Beverage License from B & D Inc., d/b/a Sidestreet Grille & Pub, to Spirit Properties, Inc. d/b/a Sidestreet Grille & Pub to be located at 301 3 Ave N.

In accordance with Section 25-1505 of the Fargo Municipal Code, I have conducted an investigation into the character, reputation and fitness of the applicant(s) listed on the supplied application.

During this investigation I questioned the applicant's criminal background, credit history, past residence history as well as any interaction they have had with law enforcement in any state.

The following information was discovered through this investigation:

Kevin Hall

Criminal History: No areas of concern

Credit History: No areas of concern

Steven Brantl

Criminal History: No areas of concern

Credit History: No areas of concern

Investigation Notes

No areas of concern were discovered while investigating this application for transfer.

Business Location

The application submitted is for a business currently located at 301 3rd Avenue North, Fargo, ND. Within the immediate area the following establishments currently hold a liquor license; Dempsey's Public House, American Legion, Steve's Package Store, Juano's Mexican Restaurant, Toscana, and Tips and Taps.

Conclusion

I believe I have discovered all information related to the listed applicant(s) and all information related to the issuance of the requested liquor license. I have provided this completed background investigation to Fargo Police Chief Keith Ternes for his review and recommendation.



APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE

The following section to be completed by City Staff:

Date Received by Auditor's Office: 1-9-09
Investigations Fee Paid (\$250) Yes No Date paid: 1-9-09
Check # 09212

Reviewed -Health Department by: _____ Date: _____
Comments (or see attached report):

Reviewed -Fire Department by: _____ Date: _____
Comments (or see attached report):

Reviewed -Inspections Division by: _____ Date: _____
Comments (or see attached report):

Reviewed -Police Department by: [Signature] Date: 1/20/09
(See attached report):

Approval Recommendation Denial Recommendation
[Signature] 01.21.09
Chief of Police Date

Reviewed -Liquor Control Committee on (date): _____

Approval Recommendation Denial Recommendation
(See attached comments or minutes)

Reviewed -City Commission on (date): _____

Approval Denial
(See attached minutes)

Business/Company name: SPIRIT PROPERTIES, INC.

Doing business as: SIODBEST GRILL & PUB

This application is for the Class or Classes of Licenses checked:

- Class A Authorizes the licensee to sell "on-sale" only.
- Class B Authorizes the licensee to sell "off-sale" only. "Off-Sale" licensed premises must be no closer than 100 feet to any grocery store, drug store or gasoline service station or any part thereof.
- Class B "Limited" Authorizes the licensee to sell "off-sale" only. License is Non Transferable. "Off-Sale" licensed premises must be no closer than 100 feet to any grocery store, drug store or gasoline service station or any part thereof.
- Class AB Authorizes the licensee to sell "on-sale" and "off-sale". "Off-Sale" licensed premises must be no closer than 100 feet to any grocery store, drug store or gasoline service station or any part thereof.
- Class ABH Authorizes the licensee to sell "on-sale" and "off sale", at hotels & motels with 100 more guest rooms only.
- Class ABHRZ Authorizes licensee to sell "on-sale" and "off sale" at hotels in Renaissance Zone with 15 guest rooms
- Class C Authorizes the licensee to sell beer "on-sale" only.
- Class D Authorizes the licensee to sell beer "off-sale" only.
- Class F Authorizes the licensee to sell "on-sale" only served at table or booth; no bar allowed. Requires 50% or more of its annual gross receipts from the sale of prepared meals and not alcoholic beverages.
- Class FA Authorizes the licensee to sell "on-sale" only, physical bar is allowed. Requires 50% of more of its annual gross receipts from the sale of prepared meals and not alcoholic beverages.
- Class FARZ Authorizes the licensee to sell "on-sale" only; physical bar allowed. Required to be in the Renaissance Zone. No gaming and no "E" permits allowed. Requires 50% or more of its annual gross receipts from the sale of prepared meals and not alcoholic beverages. The initial fee is 1/2 of the FA license.
- Class FA-Golf On USGA Golf Course of 9 or more holes. Requires 25% receipts of food sales from April to October and 50% the rest of the year.
- Class G Authorizes the licensee to sell wine and sparkling wine "on-sale" only, served at table or booth, no bar. Requires 50% food sales.
- Class H Authorizes the licensee to sell beer "on-sale" only, served at table of booth, with no bar allowed and requires 50% food sales.
- Class I Authorizes the licensee to sell beer, wine, and other sparkling wine "on-sale" only. A physical bar is allowed and requires 50% food sales.
- Class J Authorizes the licensee to sell "on-sale" only at a non-profit organization for military purposes.
- Class L Authorizes the licensee to sell "on-sale" only on an excursion boat operating on the Red River.

- () Class M Authorizes the licensee to operate a "Microbrew Pub" and to sell "on-sale" and "off-sale" offered in conjunction with another license.
- () Class N Authorizes the licensee to sell "on-sale" only at a stadium with a minimum seating capacity of 2,500.
- () Class O Authorizes the licensee to operate a winemaker and/or vendor of winemaking supplies and related services.
- () Class P Authorizes the licensee to operate a domestic winery and to sell wine "on-sale" and "off-sale." Allows limited beer sales.
- () Class W Authorizes the licensee to operate a wine bar, serving wine and limited beer "on-sale." A physical bar is allowed and requires 20% food sales.
- () Class Z Authorizes the licensee to sell "on-sale" only issued to individuals and partnerships not currently holding another "A", "AB", "ABH", or "ABH-RZ". This license is non-transferable.

The following section to be completed by the applicant:

Initial #1 - #8 to indicate you understand and agree to these terms of the "Z", "W" or "B Limited" license. Then print your name and sign in the space provided below:

ALL APPLICANTS must initial #9 - #16 and sign in the space provided below.

1. _____ My business may sell "On Sale" only (Class Z & W).
- 1a. _____ My business may sell "Off Sale" only; **NO** "On-Sale" liquor sales are permitted. ("B Limited)
2. _____ This license shall only be issued to individuals or partnerships (natural persons only), corporations for liability purposes, except as otherwise provided hereinafter.
3. _____ I may not obtain more than one "Z", "W" or "B Limited" license.
4. _____ If I hold an "A", "B", "AB", "ABH or ABH-RZ" license, I may not obtain a "Z", "W" or "B Limited" license.
5. _____ If I voluntarily go out of business, file a bankruptcy petition, become insolvent or otherwise cease business, the license reverts to the City of Fargo. This license may be transferred to reflect a change in location of your licensed premises.
6. _____ The license may be transferred to my heirs (children only) during my lifetime. Upon my death, the license may be transferred to my heir(s), but may not be transferred to any other person, partnership, firm of corporation. If any partner in a partnership holding the license dies, the remaining partner(s) may continue to hold the license, but no partnership interest may be issued to any new partner. The ordinance will allow a partnership between the original licensee and his children which may take the form of a corporate entity under North Dakota law. Shares in the corporation may be transferred to the children, but transfer of shares to anyone else will constitute a sale that will cause the license to revert to the City of Fargo. As the ordinance indicates, the intent of this provision is to allow a transfer between a parent and children but a transfer of shares to anyone else is absolutely prohibited.
7. _____ If I sell my business as a "going concern" (i.e., a complete and operational bar), the purchaser of the business has the first preference to purchase the "Z", "W" or "B Limited" license from the City. (The purchaser must meet all other relevant conditions and requirements for such a purchase.)
- 8a. _____ If I am issued a "B Limited" license, I must pay an initial fee for the license in the amount of \$80,000 and an annual fee for the license in the amount of the \$1,400 at the beginning of each license year.
- 8b. _____ "Z" Initial \$105,000. Annual \$1,700.
- 8c. _____ "W" Initial \$25,000. Annual \$1,000.
9.  All Applicants must assure there is adequate off-street parking for my business (within the discretion of-and as approved by-the City Commission). Membership in the current City parking program (e.g., "P.O.P.") may place me in compliance with this requirement.

- 10. *KJA* I have received a copy of the Alcoholic Beverage Ordinance (s) of the City of Fargo, read the ordinances and am familiar with the conditions and requirements of these ordinances.
- 11. *KJA* If granted an alcoholic beverage license, I will obey, abide by and comply with the State of North Dakota Liquor Control Act, and the City of Fargo Alcoholic Beverage ordinances, as well as any amendments to either of these, which may be made from time to time.

- 12. *KJA* I understand either, I, my manager(s), or both of us must attend a yearly meeting (date and time to be announced) with representatives from the Police and Health departments to discuss law enforcement and safety concerns as a condition of license renewal.
- 13. *KJA* I understand that the premises described in this application, if licensed for alcoholic beverage sales, may be inspected at any time by the Chief of Police, or any officer of the Police or Health Departments as allowed by city ordinances and state law. My employees and I will cooperate with such inspections.
- 14. *KJA* I understand that all employees, managers and owners engaged in mixing, pouring or service of alcoholic beverages MUST attend Server Training.
- 15. *KJA* I am familiar with the questions, answers and other information as it appears in the complete application for an alcoholic beverage license, and the answers and information are, to the best of my belief and knowledge, true, complete and accurate. (Note: This application must be made under oath before a Notary Public.)
- 16. *KJA* I recognize the City of Fargo is subject to open records laws contained in chapter 44-04 of the N.D. Century Code. Section 44-04-18.4 contains an exception for trade secrets, proprietary, commercial, and financial information. I agree in submitting the application, that I have familiarized myself with this law. If any information being forwarded to the City of Fargo is claimed as confidential or proprietary under this section, I must clearly indicate this in writing when I submit this application, pointing out, in detail, why the information submitted is claimed as an exemption under section 44-04-18.4. I further agree to respond to, as well as to aid the City, in responding to any claim under 44.04-21.1 concerning this claim of confidentiality under 44-04-18.4.

Applicant printed name: KEVIN J HALL Signature: *KJA*

Applicant printed name: _____ Signature: _____

Applicant printed name: _____ Signature: _____

**SIDESTREET
GRILLE & PUB**
301 3RD AVENUE NORTH-FARGO, ND 58102
701-271-0092----(FAX) 701-271-0286

1/12/09

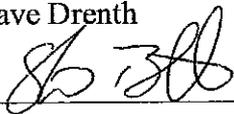
Dear Sirs:

Re: Pursuant to purchase agreement

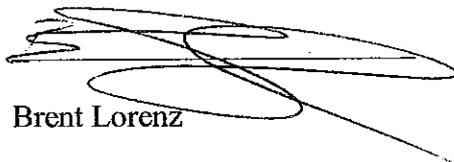
B and D Inc. has sold assets of SideStreet Grille and Pub to Spirit Properties.
The undersigned owners agree to transfer liquor license from B and D Inc. to
Spirit Properties.



Dave Drenth



Steve Brantl



Brent Lorenz

Business/Company name: SPRIT PROPERTIES, INC
Doing business as: SIDESTREET GRILLE & PUB

Business address (location): 301 3RD AVEN FARGO ND 58102
Mailing address: Same

Legal description of the premises to be licensed: _____
LOT 3, BLOCK 2, NORTH DAKOTA URBAN RENEWAL 1ST ADDITION TO THE CITY
of FARGO, CASS COUNTY, NORTH DAKOTA

Does applicant wish to describe, depict, or otherwise identify various areas or spaces within the building which shall constitute the licensed premises in accordance with Section 25-1501, Subsection 8? Yes (); No ;

Is the premises now occupied by another business? Yes ___ No

Type of business currently there: Ban & Grill (SIDESTREET GRILLE & PUB)
Mailing address: 301 3RD AVEN FARGO ND 58102
(address) (city) (state & zip)

Business e-mail address: KEVIN H@FMAACCOUNTING.COM

Phone number: (701) 271-0092 Other number: (701) 799-0392 (C)

Do you own or rent the property where the license will be used? ___ Own Rent
If you rent, provide the following information:

NORTHLAND HOSPITALITY, LLC 301 3RD AVEN FARGO ND 58102
(name) (address) (city) (state & zip)

If you are the owner of the property, are there any delinquent taxes against the premises?
___ Yes No If "yes", in what amount? _____

Applicant Information:

Name: KEVIN JOHN HALL
(first) (middle) (last) (maiden name)

Address: 7246 28th ST NE MOUNDHEAD MN 56560
(address) (city) (state & zip)

How long have you lived at the address? 2 YEARS 4 MONTH

Provide your address history for the past 5 years: (Use additional page if necessary.)

From 2003 to 9/07 Address: 603 36th AVE SW MOUNDHEAD MN 56560
From _____ to _____ Address: _____
From _____ to _____ Address: _____

E-mail address: KEVIN H @ FMI ACCOUNTING, COM

Home phone number: (701) 799-0392 Other number: (701) 799-0392 (C)

Date of Birth: 5-6-61 Place of Birth: MILWAUKEE, WI

List each driver's license you have ever had and the state of issue:

DL#: HAL -61-1705 State of Issue: NO Dates: 1981 - CURRENT

DL#: _____ State of Issue: NY Dates: 1977-1981

DL#: _____ State of Issue: _____ Dates: _____

Has your driver's license ever been suspended or revoked? _____ Yes No If "yes," where and when.

If "yes," have you ever been issued a citation for driving after your license was suspended or revoked? _____ Yes No If "yes," where and when.

Have you ever been convicted, plead guilty, or plead "no contest" to any law of the U.S., or any state, or of any local ordinance (other than traffic)? (DUI should not be considered a "traffic offense"—and therefore must be listed) _____ Yes No If yes, provide the date of arrest, location, charge, and sentence or each conviction.

Have you been issued a citation for any alcohol-related offense? _____ Yes No If "yes," provide the date, location, and charge for each citation:

List all federal, state, and local licenses (including liquor licenses; excluding driver's licenses) you currently hold, formerly held, or may have an interest in:

NO STATE SIMULCAST LICENSE

Have any of the above named licenses ever been suspended or revoked? ____ Yes No

If yes, list the dates and reasons for the suspensions or revocations:

List your employment/business history for the past 7 years period: Use additional pages if necessary.)

From: 1997 to CURRENT Business name: FMI, LLC dba KEVIN HALL ASSOCIATES
Address: 2901 S FRONTAGE ROAD Position/Title: ACCOUNTING FIRM, OWNER

From: _____ to _____ Business name: _____

Address: _____ Position/Title _____

From: _____ to _____ Business name: _____

Address: _____ Position/Title: _____

From: _____ to _____ Business name: _____

Address: _____ Position/Title: _____

Do you currently own or have a financial interest in any other business that sells or serves alcoholic beverages? ____ Yes No If "yes," list each business below:

Have you ever manufactured, sold, or distributed alcoholic beverages on the wholesale or retail level? ____ Yes No If "yes," indicate where, when, and for whom below:

Do you have any current or prior management experience working for a business that sells or serves alcohol? ____ Yes No If "yes," describe below:

Partnership/Corporation Information (ALL Partners, Corporate Shareholders and Directors holding 5% or more of the outstanding stock must be listed—make copies and use additional pages as needed)

List your business structure: CORPORATION (Partnership, Corporation, LLP, LLC)
(This section may be copied and pages attached for additional partners.)

Name: KEVIN JOHN HALL 100% owner
(first) (middle) (last) (maiden name)

Address: "SAME"
(address) (city) (state & zip)

How long have you lived at the address? _____

Provide your address history for the past 5 years: (Use additional page if necessary.)

From _____ to _____ Address: _____

From _____ to _____ Address: _____

From _____ to _____ Address: _____

E-mail address: _____

Home phone number: (____) _____ Other number: (____) _____

Date of Birth: _____ Place of Birth: _____

List each driver's license you have ever had and the state of issue:

DL#: _____ State of Issue: _____ Dates: _____

DL#: _____ State of Issue: _____ Dates: _____

DL#: _____ State of Issue: _____ Dates: _____

Has your driver's license ever been suspended or revoked? _____ Yes _____ No If "yes", where and when.

If "yes," have you ever been issued a citation for driving after you license was suspended or revoked? _____ Yes _____ No If "yes", where and when?

Have you ever been convicted, plead guilty, or plead "no contest" to any law of the U.S., or any state, or of any local ordinance (other than traffic)? (DUI **should not** be considered a "traffic offense"—and therefore must be listed) ____ Yes ____ No If yes, provide the date of arrest, location, charge, and sentence for each conviction:

Have you been issued a citation for any alcohol-related offense? ____ Yes ____ No
If "yes," provide the date, location, and charge for each citation:

List all federal, state, and local licenses (including liquor licenses; excluding driver's licenses) you currently hold, formerly held, or may have an interest in:

Have any of the above named licenses ever been suspended or revoked? ____ Yes ____ No
If yes, list the dates and reasons for the suspensions or revocations:

List your employment/business history for the past 7 year's period: (Use additional pages if necessary.)

From: _____ to _____ Business name: _____

Address: _____ Position/Title: _____

From: _____ to _____ Business name: _____

Address: _____ Position/Title: _____

From: _____ to _____ Business name: _____

Address: _____ Position/Title: _____

From: _____ to _____ Business name: _____

Address: _____ Position/Title: _____

Do you currently own or have a financial interest in any other business that sells or serves alcoholic beverages? ____ Yes ____ No If "yes," list each business below:

Have you ever manufactured, sold, or distributed alcoholic beverages on the wholesale or retail level? ____ Yes ____ No If "yes," indicate where, when, and for whom below:

Do you have any current or prior management experience working for a business that sells or serves alcohol? ____ Yes ____ No If "yes," describe below:

Are all officers, directors, and shareholders holding more than 5% of the outstanding stock 21 years of age or older? Yes (X); No ();

Address of Home Office 3518 INTERSTATE BLVD FARGO ND 58102
Date Incorporated 2001 State of Incorporation ND

If a subsidiary of any corporation, state name and address of parent corporation N/A

Operator/Manager Information

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

Name: STEVEN A BRANTL
(first) (middle) (last) (maiden name)

Address: 1445 11th AVE S FARGO ND 58102
(address) (city) (state & zip)

Home phone number: (701) 371-4827 Other number: (701) 371-4867(c)

Date of Birth: 12/27/72 Place of Birth: MINOT ND

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

Name: _____
(first) (middle) (city) (maiden name)

Address: _____
(address) (city) (state & zip)

Home phone number: (____) _____ Other number: (____) _____

Date of Birth: _____ Place of Birth: _____

(Important: The name and other information about your manager must be provided before a license can be issued. If the manager changes during the course of the license period, you must provide the City Auditor's Office with updated information about the new manager immediately.)

Business Site Plan

On the following page (or on attached pages if additional space is needed), provide a detailed diagram and description of the design, location, and square footage of the premises to be licensed.

- * The scale should be state, such as 1"=20'. The direction N should be indicated towards the top.
- * The diagram should include placement of all pertinent features of the interior of the licensed premises, such as seating areas, kitchens, offices, repair areas, restrooms, etc. The exterior parking area should also be shown.

NOTICE OF HEARING

Application For Alcoholic Beverage License Transfer

Notice is hereby given that the Board of City Commissioners of the City of Fargo, North Dakota, will conduct a Public Hearing in the City Commission Room, City Hall, on Monday, February 23 2009 at 5:15 o'clock p.m. to consider for approval an application for transfer of a Class "FA" Alcoholic Beverage License from Brent C. Olson d/b/a Norman's Prime Steaks & Seafood, to Norman's Cattle and Find Foods, LLC d/b/a Norman's Prime Steaks and Seafood to be located at 1776 45 St S.

Any interested person may appear and will be heard.

City Auditor's Office
(February 2, 2009)

Instructions to Forum

Please publish as a Public Notice in the Legal Ad Section on Monday, February 2, 2009.

I will need an affidavit of publication.

Bill to: City Auditor's Office
 200 Third Street North
 Fargo, ND 58102

If you have any questions, please call Sharon at 241-1304.

MEMORANDUM

TO: Chief Keith Ternes
FROM: Sergeant Mathew Sanders
DATE: January 20th, 2009

SUBJECT: Application for transfer of a Class "FA" Alcoholic Beverage License from Brent C. Olson d/b/a Norman's Prime Steaks & Seafood to Norman's Cattle and Fine Foods, LLC d/b/a Norman's Prime Steaks and Seafood, located at 1776 45th Street South.

In accordance with Section 25-1505 of the Fargo Municipal Code, I have conducted an investigation into the character, reputation and fitness of the applicant(s) listed on the supplied application.

During this investigation I questioned the applicant's criminal background, credit history, past residence history as well as any interaction they have had with law enforcement in any state.

The following information was discovered through this investigation:

David Lee Norman

Criminal History: No areas of concern

Credit History:

4/19/07	Federal Tax Lien/G.Forks County	\$18,288	Released (8/27/08)
12/21/06	Federal Tax Lien/Burleigh County	\$2,336	
9/6/05	Federal Tax Lien/G.Forks County	\$129,309	Released (2/27/06)
9/19/05	State Tax Lien/Burleigh County	\$23,712	Released (2/27/06)
1/14/03	State Tax Lien/G.Forks County	\$835	Released (1/23/03)
9/2/08	Div. Adjustment Collection Agency	\$57	Seriously Past Due
2/27/08	UAI Collection Agency	\$861	Seriously Past Due
9/8/04	Chrysler Financial		Repossession Paid/zero balance
3/23/07	Collection Agency for Direct TV	\$129	Seriously Past Due Paid/zero balance

I spoke to Mr. Norman by telephone on 1/19/09. Mr. Norman said he was aware of the tax liens and he was under the impression they had all been released. He said he has received loans since that time and creditors have never brought it up. That lien is a federal lien filed in Burleigh County for \$2,336. On 1/20/09 I contacted the Burleigh County Recorder and she said there are no federal or state tax liens on Mr. Norman, so it appears the \$2,336 lien is an error on the credit report.

Mr. Norman said the past due listings and the liens are the result of a lengthy divorce he went through between 2005 and 2008. He said his and his ex-wife's assets were in contention during that time and "tied up in the courts."

Mr. Norman said he was not aware of the two outstanding debts listed by the collection agencies.

I contacted United Accounts Incorporated which is the collection agency handling the \$861 seriously past due bill. A representative said the bill is for an unpaid doctor's visit in Detroit Lakes, Minnesota. I told Mr. Norman those facts and he thinks it has to do with a dentist visit in Detroit Lakes. He said he would be contacting the dentist office to pay any debts he owed them.

I contacted Diversified Adjustment which is the collection agency handling the \$57 debt, however they were unable to provide information on the debt.

Mr. Norman said the repossession of his car was for only two days and also had to do with his divorce proceedings.

I checked the dates of the liens and all except one do correspond to the time frame Mr. Norman gave me for his divorce proceedings. The one lien that does not fall within that time frame is January 14th, 2003 lien out of Grand Forks County. Mr. Norman could not remember what that lien was for.

In his application, Mr. Norman listed himself as a prior owner/operator of The Fireside which is a restaurant in Detroit Lakes. I contacted Wade Heapy, who is the current owner/operator of The Fireside. Mr. Heapy said he purchased the restaurant from Mr. Norman in November of 2005. Mr. Heapy said he is not aware of any problems in regards to the restaurant or its liquor license, during the time Mr. Norman owned the business.

On 1/20/09 I contacted the Detroit Lakes Police Department. They assisted me by going through all calls for service at the Fireside Restaurant and all dealings with Mr. Norman. They found nothing of concern for this investigation.

Eric Thronson

Criminal History:	October 30 th , 1997	3 rd Degree Damage to Property Douglas County, MN Guilty Plea – No date listed
	January 30 th , 2002	DWI Douglas County, MN Guilty Plea - 5/14/02
	March 29 th , 2003	DWI Douglas County, MN Guilty Plea – 3/22/04
	March 29 th , 2003	Obstructing the Legal Process Douglas County, MN Dismissed – 3/22/04

Credit History: No Areas of Concern

I spoke to Eric Thronson on 1/19/09 by telephone. Mr. Thronson said he got his DWIs in Douglas County, Minnesota. He said he also received his Driving Under Revocation charged in Douglas County. He said he was on probation for the offenses in 2002 and 2003. He said, other than the two DWIs and the Driving Under Revocation, he has never been arrested for anything and has not been the subject of a criminal investigation.

I then ran a criminal history check on Mr. Thronson and discovered he was convicted of Criminal Damage to Property in 1997. I called Mr. Thronson back and asked him why he failed to include that in his application. He said “I must have misunderstood the question.” I asked Mr. Thronson to describe the circumstances surrounding that charge.

Mr. Thronson said he had received permission from a real estate company to farm a couple acres of land the company owned. He did so for two years. During the third year he plowed under an existing crop to plant his own crop. He said he wasn’t aware the land had been sold to someone else. The new owner of the land filed charges and Mr. Thronson plead guilty. Mr. Thronson said he paid his fine and has since purchased the land.

I asked Mr. Thronson about an additional charge revealed through the criminal history check that was listed on the same date as his second DWI. The charge was Obstructing the Legal Process. Mr. Thronson said, “As far as I am concerned the bar set me up for both those DWIs.” I told him that was not relevant and asked him to explain the

Obstructing the Legal Process charge. Mr. Thronson said, "When I got out of the car, two cops threw me to the ground. I didn't do anything wrong and they dropped that charge." The criminal history check does show that the Obstructing charge was dismissed. I asked Mr. Thronson if he was on probation and he said he didn't know.

Mr. Thronson's driver's license is current. I contacted Douglas County Jail and they said Mr. Thronson is not on probation.

Roger Bogestad

Criminal History: Drivers License Suspensions

Credit History:

- One balance listed as past due to a collection agency for \$665 (9/7/07)
- Five accounts that list 30 or 60 day past due payments

I spoke to Mr. Bogestad on 1/19/09 by telephone. Mr. Bogestad said he has had his license suspended "a few times" for 30 days at a time because of excessive speeding tickets. He said he has never driven while his license was suspended. He said the last time his license was suspended was approximately four or five years ago.

Mr. Bogestad was not aware of the outstanding debt to the collection agency. He said had no idea what it had to do with, but he would be checking into it.

Mr. Bogestad said the past due listings are a result of cars he has leased. He said sometimes that's how the lease company would extend the lease, without payment, so that he could lease a newer vehicle that had not made it to the dealership yet. The lease would expire and he would be allowed to keep the vehicle until his new vehicle was ready. According to Mr. Bogestad, this was by design and not by default. I verified through the credit report that all "past due" listings were for vehicles and they are now listed as current or paid in full.

Mark Cooper

Criminal History: No areas of concern

Credit History: No areas of concern

Felicia Cooper

Criminal History: No areas of concern

Credit History: No areas of concern

Investigation Notes

David Norman will be part owner and manager of the business. All other parties will be part-owners.

The business is currently operating under the Alcoholic Beverage License of Brent Olson, d/b/a Norman's Prime Steaks and Seafood. Prior to that, the business was Bennigan's. I searched the Fargo Police Records system and found no calls for service or alcohol compliance failures at Norman's Prime Steaks and Seafood.

Business Location

The application submitted is for a business located at 1776 45th Street South, Fargo, ND. The immediate area around this establishment consists of a mix of commercial and apartment properties. I have found the following licensed liquor establishments in the immediate area: Space Aliens, Happy Harry's, Ramada Plaza Suites, Johnny Carino's, Qdoba Mexican Grill and the Hu-Hut Mongolian Grill.

Conclusion

I believe I have discovered all information related to the listed applicant(s) and all information related to the issuance of the requested liquor license. I have provided this completed background investigation to Fargo Police Chief Keith Ternes for his review and recommendation.

I have also attached a copy of the August 8th, 2008 investigation for this address, which was completed by Sergeant Ross Renner.

MEMORANDUM

TO: Chief Keith Ternes

FROM: Sgt. Ross Renner

DATE: August 8th, 2008

SUBJECT: Application for a Class "FA" Alcoholic Beverage License for Brent Olson d/b/a TBD to be located 1776 45th Street South, Fargo, North Dakota.

In accordance with Section 25-1505 of the Fargo Municipal Code, I have conducted an investigation into the character, reputation, and fitness of the applicant listed on the supplied application.

During this investigation, the applicant's criminal background, credit history, past residence history, as well as any interaction he may have had with law enforcement in any state were questioned.

Upon completing this interview and further follow-up investigation, I am disclosing the following information:

Brent Olson

Criminal Background: No areas of concern

Credit History: No areas of concern

Investigation Notes

Upon review of the submitted application and supporting documents, I have found the request to transfer this license from the current holder, Sterling Restaurant Management Group, to an individual, Brent Olson. Documents attached and further investigation indicate Mr. Olson will hold the requested license for a short time until a new business is opened at this location at which time the license will be transferred to the intended business and its shareholders. It is my understanding that Mr. Olson is a share holder in the property located 1776 45th Street South, Fargo, ND. This was the previous business location of Bennigans and the location assigned to the requested liquor license. It is my understanding that a new business requiring a liquor license will open in this location within 90 days and Mr. Olson will have a financial interest in this business.

Business Location

The application submitted is for a business to be located at 1776 45th Street South, Fargo, ND. The immediate area around this establishment consists of a mix of commercial and apartment properties. I have found the following licensed liquor establishments in the immediate area: Space Aliens, Happy Harry's, Ramada Plaza Suites, Johnny Carino's, Qdoba Mexican Grill and the Hu-Hut Mongolian Grill.

Conclusion

Upon completion of this investigation I believe I have discovered all information related to the listed applicants and all information related to the issuance of the requested liquor license. I have provided this completed background investigation to Fargo Police Chief Keith Ternes for his review and recommendation

Sgt. Ross Renner

montgomery goff & bullis



4650 38th Ave. S.
 Suite 110 • Fargo, ND
 PO Box 9199 • 58106-9199
 Phone (701) 281-8001
 Fax (701) 281-8007

January 8, 2009

Michael S. Montgome
 mike@bullislaw.com

City of Fargo Auditor's Office
 Attn: Steve Sprague

John T. Goff
 john@bullislaw.com

200 Third St. N.
 Fargo, ND 58102

James R. Bullis
 jim@bullislaw.com

RE: Norman's Prime Steaks & Seafood, LLC - Liquor Application
 Our File No. JRB-1498

Kyle G. Pender
 kyle@bullislaw.com

Dear Mr. Sprague:

Licensed In
 North Dakota
 and Minnesota

Please find enclosed the liquor license application for Norman's Prime Steaks & Seafood, LLC. Should you need any further information to process this application, please do not hesitate to contact me at 701-281-8001.

Sincerely,

A handwritten signature in black ink, appearing to read 'Kyle G. Pender'. The signature is fluid and cursive.

Kyle G. Pender

KGP/ljs

enc.

January 9, 2009

City of Fargo Auditor's Office
Attn: Steve Sprague
200 3rd Street North
Fargo, ND 58102

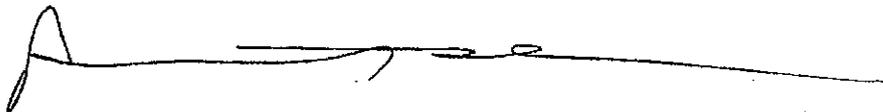
RE: Norman's Prime Steaks and Seafood's, LLC – Liquor Application
Our File No. JRB-1498

Dear Steve:

It is my intention to transfer my liquor license in which I hold in my name personally to Norman's Cattle and Fine Foods, LLC d/b/a Norman's Prime Steaks and Seafood's. Please transfer this liquor license as soon as possible.

Once my liquor license has been transferred to Norman's Cattle and Fine Foods, LLC please let Kyle Pender know. Should you have any questions regarding this correspondence or this liquor license, please direct them to my attorney, Kyle Pender at (701) 281-8001.

Sincerely,

A handwritten signature in black ink, appearing to read 'Brent C. Olson', with a long horizontal line extending to the right.

Brent C. Olson
BCO/ljs



APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE

The following section to be completed by City Staff:

Date Received by Auditor's Office: 1-9-09
Investigations Fee Paid (\$250) [X] Yes ___ No Date paid: 1-9-09
Check # PAID w/ CREDIT CARD

Reviewed -Health Department by: _____ Date: _____
Comments (or see attached report):

Reviewed -Fire Department by: _____ Date: _____
Comments (or see attached report):

Reviewed -Inspections Division by: _____ Date: _____
Comments (or see attached report):

Reviewed -Police Department by: [Signature] Date: 1/20/09
(See attached report):

[Signature] Approval Recommendation _____ Denial Recommendation
[Signature] Chief of Police 01.21.09 Date

Reviewed -Liquor Control Committee on (date): _____
_____ Approval Recommendation _____ Denial Recommendation
(See attached comments or minutes)

Reviewed -City Commission on (date): _____
_____ Approval _____ Denial
(See attached minutes)

Business/Company name: Norman's Cattle and Fine foods, LLC

Doing business as: NORMAN'S PRIME STEAKS AND SEAFOOD

This application is for the Class or Classes of Licenses checked:

- Class A Authorizes the licensee to sell "on-sale" only.
- Class B Authorizes the licensee to sell "off-sale" only. "Off-Sale" licensed premises must be no closer than 100 feet to any grocery store, drug store or gasoline service station or any part thereof.
- Class B "Limited" Authorizes the licensee to sell "off-sale" only. License is Non Transferable. "Off-Sale" licensed premises must be no closer than 100 feet to any grocery store, drug store or gasoline service station or any part thereof.
- Class AB Authorizes the licensee to sell "on-sale" and "off-sale". "Off-Sale" licensed premises must be no closer than 100 feet to any grocery store, drug store or gasoline service station or any part thereof.
- Class ABH Authorizes the licensee to sell "on-sale" and "off sale", at hotels & motels with 100 more guest rooms only.
- Class ABHRZ Authorizes licensee to sell "on-sale" and "off sale" at hotels in Renaissance Zone with 15 guest rooms
- Class C Authorizes the licensee to sell beer "on-sale" only.
- Class D Authorizes the licensee to sell beer "off-sale" only.
- Class F Authorizes the licensee to sell "on-sale" only served at table or booth; no bar allowed. Requires 50% or more of its annual gross receipts from the sale of prepared meals and not alcoholic beverages.
- Class FA Authorizes the licensee to sell "on-sale" only, physical bar is allowed. Requires 50% of more of its annual gross receipts from the sale of prepared meals and not alcoholic beverages.
- Class FARZ Authorizes the licensee to sell "on-sale" only; physical bar allowed. Required to be in the Renaissance Zone. No gaming and no "E" permits allowed. Requires 50% or more of its annual gross receipts from the sale of prepared meals and not alcoholic beverages. The initial fee is 1/2 of the FA license.
- Class FA-Golf On USGA Golf Course of 9 or more holes. Requires 25% receipts of food sales from April to October and 50% the rest of the year.
- Class G Authorizes the licensee to sell wine and sparkling wine "on-sale" only, served at table or booth, no bar. Requires 50% food sales.
- Class H Authorizes the licensee to sell beer "on-sale" only, served at table of booth, with no bar allowed and requires 50% food sales.
- Class I Authorizes the licensee to sell beer, wine, and other sparkling wine "on-sale" only. A physical bar is allowed and requires 50% food sales.
- Class J Authorizes the licensee to sell "on-sale" only at a non-profit organization for military purposes.
- Class L Authorizes the licensee to sell "on-sale" only on an excursion boat operating on the Red River.

- () Class M Authorizes the licensee to operate a "Microbrew Pub" and to sell "on-sale" and "off-sale" offered in conjunction with another license.
- () Class N Authorizes the licensee to sell "on-sale" only at a stadium with a minimum seating capacity of 2,500.
- () Class O Authorizes the licensee to operate a winemaker and/or vendor of winemaking supplies and related services.
- () Class P Authorizes the licensee to operate a domestic winery and to sell wine "on-sale" and "off-sale." Allows limited beer sales.
- () Class W Authorizes the licensee to operate a wine bar, serving wine and limited beer "on-sale." A physical bar is allowed and requires 20% food sales.
- () Class Z Authorizes the licensee to sell "on-sale" only issued to individuals and partnerships not currently holding another "A", "AB", "ABH", or "ABH-RZ". This license is non-transferable.

The following section to be completed by the applicant:

Initial #1 - #8 to indicate you understand and agree to these terms of the "Z", "W" or "B Limited" license. Then print your name and sign in the space provided below:

ALL APPLICANTS must initial #9 - #16 and sign in the space provided below.

1. _____ My business may sell "On Sale" only (Class Z & W).
- 1a. _____ My business may sell "Off Sale" only; **NO** "On-Sale" liquor sales are permitted. ("B Limited)
2. _____ This license shall only be issued to individuals or partnerships (natural persons only), corporations for liability purposes, except as otherwise provided hereinafter.
3. _____ I may not obtain more than one "Z", "W" or "B Limited" license.
4. _____ If I hold an "A", "B", "AB", "ABH or ABH-RZ" license, I may not obtain a "Z", "W" or "B Limited" license.
5. _____ If I voluntarily go out of business, file a bankruptcy petition, become insolvent or otherwise cease business, the license reverts to the City of Fargo. This license may be transferred to reflect a change in location of your licensed premises.
6. _____ The license may be transferred to my heirs (children only) during my lifetime. Upon my death, the license may be transferred to my heir(s), but may not be transferred to any other person, partnership, firm or corporation. If any partner in a partnership holding the license dies, the remaining partner(s) may continue to hold the license, but no partnership interest may be issued to any new partner. The ordinance will allow a partnership between the original licensee and his children which may take the form of a corporate entity under North Dakota law. Shares in the corporation may be transferred to the children, but transfer of shares to anyone else will constitute a sale that will cause the license to revert to the City of Fargo. As the ordinance indicates, the intent of this provision is to allow a transfer between a parent and children but a transfer of shares to anyone else is absolutely prohibited.
7. _____ If I sell my business as a "going concern" (i.e., a complete and operational bar), the purchaser of the business has the first preference to purchase the "Z", "W" or "B Limited" license from the City. (The purchaser must meet all other relevant conditions and requirements for such a purchase.)
- 8a. _____ If I am issued a "B Limited" license, I must pay an initial fee for the license in the amount of \$80,000 and an annual fee for the license in the amount of the \$1,400 at the beginning of each license year.
- 8b. _____ "Z" Initial \$105, 000. Annual \$1,700.
- 8c. _____ "W" Initial \$25,000. Annual \$1,000.
9. AB All Applicants must assure there is adequate off-street parking for my business (within the discretion of-and as approved by-the City Commission). Membership in the current City parking program (e.g., "P.O.P.") may place me in compliance with this requirement.

- 10. DLN I have received a copy of the Alcoholic Beverage Ordinance (s) of the City of Fargo, read the ordinances and am familiar with the conditions and requirements of these ordinances.
- 11. DLN If granted an alcoholic beverage license, I will obey, abide by and comply with the State of North Dakota Liquor Control Act, and the City of Fargo Alcoholic Beverage ordinances, as well as any amendments to either of these, which may be made from time to time.

- 12. DLN I understand either, I, my manager(s), or both of us must attend a yearly meeting (date and time to be announced) with representatives from the Police and Health departments to discuss law enforcement and safety concerns as a condition of license renewal.
- 13. DLN I understand that the premises described in this application, if licensed for alcoholic beverage sales, may be inspected at any time by the Chief of Police, or any officer of the Police or Health Departments as allowed by city ordinances and state law. My employees and I will cooperate with such inspections.
- 14. DLN I understand that all employees, managers and owners engaged in mixing, pouring or service of alcoholic beverages MUST attend Server Training.
- 15. DLN I am familiar with the questions, answers and other information as it appears in the complete application for an alcoholic beverage license, and the answers and information are, to the best of my belief and knowledge, true, complete and accurate. (Note: This application must be made under oath before a Notary Public.)
- 16. DLN I recognize the City of Fargo is subject to open records laws contained in chapter 44-04 of the N.D. Century Code. Section 44-04-18.4 contains an exception for trade secrets, proprietary, commercial, and financial information. I agree in submitting the application, that I have familiarized myself with this law. If any information being forwarded to the City of Fargo is claimed as confidential or proprietary under this section, I must clearly indicate this in writing when I submit this application, pointing out, in detail, why the information submitted is claimed as an exemption under section 44-04-18.4. I further agree to respond to, as well as to aid the City, in responding to any claim under 44.04-21.1 concerning this claim of confidentiality under 44-04-18.4.

Applicant printed name: DAVID LEE NOON Signature: 

Applicant printed name: _____ Signature: _____

Applicant printed name: _____ Signature: _____

Business/Company name: Norman's Cattle & fine foods, LLC
Doing business as: Norman's Prime Steaks & Seafood

Business address (location): 1776 45th Street South
Mailing address: same

Legal description of the premises to be licensed: SEE NEXT PAGE

Does applicant wish to describe, depict, or otherwise identify various areas or spaces within the building which shall constitute the licensed premises in accordance with Section 25-1501, Subsection 8? Yes (); No ;

Is the premises now occupied by another business? ___ Yes No

Type of business currently there: steakhouse

Mailing address: 1776 45th Street South, Fargo ND 58103
(address) (city) (state & zip)

Business e-mail address: dnorman@normansprime.com

Phone number: (701) 356-0025 Other number: ()

Do you own or rent the property where the license will be used? ___ Own Rent
If you rent, provide the following information:

Norman's Real Estate Holdings, LLC, 4840 Amber Valley Parkway
(name) (address) (city) (state & zip) Suite A

If you are the owner of the property, are there any delinquent taxes against the premises? ___ Yes ___ No If "yes", in what amount? N/A
FARGO, ND 58101

Applicant Information:

Name: _____
(first) (middle) (last) (maiden name)

Address: _____
(address) (city) (state & zip)

How long have you lived at the address? _____

Provide your address history for the past 5 years: (Use additional page if necessary.)

From _____ to _____ Address: _____
From _____ to _____ Address: _____
From _____ to _____ Address: _____

Legal description of the premises to be licensed:

Lot 3, Block 2, of West Acres Business Park Third Addition, to the City of Fargo, Cass County, North Dakota, and all buildings and improvements thereon.

Partnership/Corporation Information (ALL Partners, Corporate Shareholders and Directors holding 5% or more of the outstanding stock must be listed—make copies and use additional pages as needed)

List your business structure: LLC (Partnership, Corporation, LLP, LLC)
(This section may be copied and pages attached for additional partners.)

Name: David Lee Norman
(first) (middle) (last) (maiden name)

Address: 520 1ST AVE N. FARGO N.D. 58102
(address) (city) (state & zip)

How long have you lived at the address? 8-1-08

Provide your address history for the past 5 years: (Use additional page if necessary.)

From 1-1-08 to 8-1-08 Address: _____

From 7-1-06 to 1-1-08 Address: 1118 DAKOTA BEACH RD. DETROIT LAKES MN

From 10-1-98 to 6-30-06 Address: 365 WOODLAND PKWY GRAND FORK N.D.

E-mail address: DNORMAN@NORMANSPRIME.COM

Home phone number: () _____ Other number: (218) 779-8476

Date of Birth: 12-8-53 Place of Birth: GRAND FORKS

List each driver's license you have ever had and the state of issue:

DL#: NOR-53-2315 State of Issue: N.D. Dates: 12-31-2007

DL#: _____ State of Issue: _____ Dates: _____

DL#: _____ State of Issue: _____ Dates: _____

Has your driver's license ever been suspended or revoked? _____ Yes No If "yes", where and when.

If "yes," have you ever been issued a citation for driving after you license was suspended or revoked? _____ Yes No If "yes", where and when?

Have you ever been convicted, plead guilty, or plead "no contest" to any law of the U.S., or any state, or of any local ordinance (other than traffic)? (DUI should not be considered a "traffic offense"—and therefore must be listed) ___ Yes No If yes, provide the date of arrest, location, charge, and sentence for each conviction:

Have you been issued a citation for any alcohol-related offense? ___ Yes No
If "yes," provide the date, location, and charge for each citation:

List all federal, state, and local licenses (including liquor licenses; excluding driver's licenses) you currently hold, formerly held, or may have an interest in:

FIRESIDE OF DETROIT LAKES - LIQUOR LICENSES
FCC BROADCAST OWNERS LICENSES

Have any of the above named licenses ever been suspended or revoked? ___ Yes No
If yes, list the dates and reasons for the suspensions or revocations:

List your employment/business history for the past 7 year's period: (Use additional pages if necessary.)

From: 4-1-08 to Current Business name: NOAMAN CATTLE FINE FOODS
Address: 1776 45th St. S. Position/Title: MGR / PARTNER
From: 8-03 to 11-06 Business name: FIRESIDE OF DETROIT LAKE
Address: 1441 EAST SHORE DR Position/Title: OWNER / OPERATOR
From: 1985 to 8-03 Business name: KRAD INC DBA KENW/KET
Address: 667 DEMER AVE Position/Title: OWNER / OPERATOR
From: _____ to _____ Business name: _____
Address: _____ Position/Title: _____

Do you currently own or have a financial interest in any other business that sells or serves alcoholic beverages? ___ Yes No If "yes," list each business below:

Have you ever manufactured, sold, or distributed alcoholic beverages on the wholesale or retail level? Yes No If "yes," indicate where, when, and for whom below:

FIRE SIDE OF DETROIT LAKES M.U.

Do you have any current or prior management experience working for a business that sells or serves alcohol? Yes No If "yes," describe below:

FIRE SIDE OF DETROIT LAKES M.U.

Are all officers, directors, and shareholders holding more than 5% of the outstanding stock 21 years of age or older? Yes No

Address of Home Office 1776 45th St. SoWest FARGO, N.D.
Date Incorporated _____ State of Incorporation _____

If a subsidiary of any corporation, state name and address of parent corporation _____

Partnership/Corporation Information (ALL Partners, Corporate Shareholders and Directors holding 5% or more of the outstanding stock must be listed—make copies and use additional pages as needed)

List your business structure: LLC (Partnership, Corporation, LLP, LLC)
(This section may be copied and pages attached for additional partners.)

Name: ERIC Thronson
(first) (middle) (last) (maiden name)

Address: 10394 250th Street, Evansville, MN 56326
(address) (city) (state & zip)

How long have you lived at the address? 33 years

Provide your address history for the past 5 years: (Use additional page if necessary.)

From _____ to _____ Address: 10394 250th Street

From _____ to _____ Address: _____

From _____ to _____ Address: _____

E-mail address: _____

Home phone number: (320) 760-6996 Other number: (320) 760-0169

Date of Birth: 10-19-75 Place of Birth: Elbow Lake, MN

List each driver's license you have ever had and the state of issue:

DL#: C023005335805 State of Issue: MN Dates: 10-2-07-10-19-11

DL#: _____ State of Issue: _____ Dates: _____

DL#: _____ State of Issue: _____ Dates: _____

Has your driver's license ever been suspended or revoked? Yes _____ No If "yes", where and when. 02, 03

If "yes," have you ever been issued a citation for driving after you license was suspended or revoked? Yes _____ No If "yes", where and when?

03

Have you ever been convicted, plead guilty, or plead "no contest" to any law of the U.S., or any state, or of any local ordinance (other than traffic)? (DUI **should not** be considered a "traffic offense"—and therefore must be listed) Yes No If yes, provide the date of arrest, location, charge, and sentence for each conviction:

02 Alexandria - probation

Have you been issued a citation for any alcohol-related offense? Yes No
If "yes," provide the date, location, and charge for each citation:

03 Alexandria - probation

List all federal, state, and local licenses (including liquor licenses; excluding driver's licenses) you currently hold, formerly held, or may have an interest in:

Have any of the above named licenses ever been suspended or revoked? Yes No
If yes, list the dates and reasons for the suspensions or revocations:

List your employment/business history for the past 7 year's period: (Use additional pages if necessary.)

From: _____ to _____ Business name: Thronson Farms

Address: 10394 250th St. Position/Title: owner

From: _____ to _____ Business name: _____

Address: _____ Position/Title: _____

From: _____ to _____ Business name: _____

Address: _____ Position/Title: _____

From: _____ to _____ Business name: _____

Address: _____ Position/Title: _____

Do you currently own or have a financial interest in any other business that sells or serves alcoholic beverages? Yes No If "yes," list each business below:

Have you ever manufactured, sold, or distributed alcoholic beverages on the wholesale or retail level? Yes No If "yes," indicate where, when, and for whom below:

Do you have any current or prior management experience working for a business that sells or serves alcohol? Yes No If "yes," describe below:

Are all officers, directors, and shareholders holding more than 5% of the outstanding stock 21 years of age or older? Yes (); No ();

Address of Home Office _____

Date Incorporated _____ State of Incorporation _____

If a subsidiary of any corporation, state name and address of parent corporation _____

Partnership/Corporation Information (ALL Partners, Corporate Shareholders and Directors holding 5% or more of the outstanding stock must be listed—make copies and use additional pages as needed)

List your business structure: LLC (Partnership, Corporation, LLP, LLC)
(This section may be copied and pages attached for additional partners.)

Name: Roger Bogestad
(first) (middle) (last) (maiden name)

Address: P.O. Box 174 Karlstad, MN 56732
(address) (city) (state & zip)

How long have you lived at the address? 40

Provide your address history for the past 5 years: (Use additional page if necessary.)

From _____ to _____ Address: See Above
From _____ to _____ Address: _____
From _____ to _____ Address: _____

E-mail address: _____ ^{ND FPD}

Home phone number: (218) 791-4779 Other number: () _____

Date of Birth: 11/5/1945 Place of Birth: Bismarck, ND

List each driver's license you have ever had and the state of issue:

DL#: X59491574418 State of Issue: MN Dates: Expires 11/5/2011
DL#: _____ State of Issue: _____ Dates: _____
DL#: _____ State of Issue: _____ Dates: _____

Has your driver's license ever been suspended or revoked? Yes No If "yes", where and when.

If "yes," have you ever been issued a citation for driving after you license was suspended or revoked? Yes No If "yes", where and when?

Have you ever been convicted, plead guilty, or plead "no contest" to any law of the U.S., or any state, or of any local ordinance (other than traffic)? (DUI should not be considered a "traffic offense"—and therefore must be listed) ___ Yes No If yes, provide the date of arrest, location, charge, and sentence for each conviction:

Have you been issued a citation for any alcohol-related offense? ___ Yes No
If "yes," provide the date, location, and charge for each citation:

List all federal, state, and local licenses (including liquor licenses; excluding driver's licenses) you currently hold, formerly held, or may have an interest in:

Have any of the above named licenses ever been suspended or revoked? ___ Yes No
If yes, list the dates and reasons for the suspensions or revocations:

List your employment/business history for the past 7 year's period: (Use additional pages if necessary.)

From: 1932 to Current Business name: JB Farms, Inc
Address: Donaldson, MN 56720 Position/Title: Owner/Operator

From: _____ to _____ Business name: _____

Address: _____ Position/Title: _____

From: _____ to _____ Business name: _____

Address: _____ Position/Title: _____

From: _____ to _____ Business name: _____

Address: _____ Position/Title: _____

Do you currently own or have a financial interest in any other business that sells or serves alcoholic beverages? ___ Yes No If "yes," list each business below:

Have you ever manufactured, sold, or distributed alcoholic beverages on the wholesale or retail level? Yes No If "yes," indicate where, when, and for whom below:

Do you have any current or prior management experience working for a business that sells or serves alcohol? Yes No If "yes," describe below:

Are all officers, directors, and shareholders holding more than 5% of the outstanding stock 21 years of age or older? Yes ; No ()

Address of Home Office _____

Date Incorporated _____ State of Incorporation _____

If a subsidiary of any corporation, state name and address of parent corporation _____

Partnership/Corporation Information (ALL Partners, Corporate Shareholders and Directors holding 5% or more of the outstanding stock must be listed—make copies and use additional pages as needed)

List your business structure: LLC (Partnership, Corporation, LLP, LLC)
(This section may be copied and pages attached for additional partners.)

Name: MARK CARYLE COOPER
(first) (middle) (last) (maiden name)

Address: 4732 ROSE CREEK PLWY FARGO ND 58104
(address) (city) (state & zip)

How long have you lived at the address? 14

Provide your address history for the past 5 years: (Use additional page if necessary.)

From _____ to _____ Address: See Above

From _____ to _____ Address: _____

From _____ to _____ Address: _____

E-mail address: _____

Home phone number: (701) 237-3938 Other number: (701) 346-8755
MS FPD

Date of Birth: 1/15/57 Place of Birth: ME

List each driver's license you have ever had and the state of issue:

DL#: C00572884 State of Issue: ND Dates: 1/22/2007

DL#: _____ State of Issue: ME Dates: 990

DL#: _____ State of Issue: _____ Dates: _____

Has your driver's license ever been suspended or revoked? Yes No If "yes", where and when.

If "yes," have you ever been issued a citation for driving after you license was suspended or revoked? Yes No If "yes", where and when?

Have you ever been convicted, plead guilty, or plead "no contest" to any law of the U.S., or any state, or of any local ordinance (other than traffic)? (DUI should not be considered a "traffic offense"—and therefore must be listed) Yes No If yes, provide the date of arrest, location, charge, and sentence for each conviction:

Have you been issued a citation for any alcohol-related offense? Yes No
If "yes," provide the date, location, and charge for each citation:

List all federal, state, and local licenses (including liquor licenses; excluding driver's licenses) you currently hold, formerly held, or may have an interest in:

NORTH DAKOTA BOARD OF MEDICAL EXAMINERS
Minnesota Board of Medical examiners

Have any of the above named licenses ever been suspended or revoked? Yes No
If yes, list the dates and reasons for the suspensions or revocations:

List your employment/business history for the past 7 year's period: (Use additional pages if necessary.)

From: 1990 to (present) 2008 Business name: Innovis Health (formerly Dr. Kosta Clinic)

Address: 1702 S University Position/Title: Physician

From: _____ to _____ Business name: _____

Address: _____ Position/Title: _____

From: _____ to _____ Business name: _____

Address: _____ Position/Title: _____

From: _____ to _____ Business name: _____

Address: _____ Position/Title: _____

Do you currently own or have a financial interest in any other business that sells or serves alcoholic beverages? Yes No If "yes," list each business below:

Have you ever manufactured, sold, or distributed alcoholic beverages on the wholesale or retail level? Yes No If "yes," indicate where, when, and for whom below:

Do you have any current or prior management experience working for a business that sells or serves alcohol? Yes No If "yes," describe below:

Are all officers, directors, and shareholders holding more than 5% of the outstanding stock 21 years of age or older? Yes () No ();

Address of Home Office _____

Date Incorporated _____ State of Incorporation _____

If a subsidiary of any corporation, state name and address of parent corporation _____

Partnership/Corporation Information (ALL Partners, Corporate Shareholders and Directors holding 5% or more of the outstanding stock must be listed—make copies and use additional pages as needed)

List your business structure: LLC (Partnership, Corporation, LLP, LLC)
(This section may be copied and pages attached for additional partners.)

Name: FELICIA JO COOPER DAVIS
(first) (middle) (last) (maiden name)

Address: 4732 ROSE CREEK PKWY FARGO ND 58104
(address) (city) (state & zip)

How long have you lived at the address? 14

Provide your address history for the past 5 years: (Use additional page if necessary.)

From _____ to _____ Address: See Above

From _____ to _____ Address: _____

From _____ to _____ Address: _____

E-mail address: _____

Home phone number: (701) 2373938 Other number: () _____

Date of Birth: 12/04/57 Place of Birth: MI

List each driver's license you have ever had and the state of issue:

DL#: DAV-57-7690 State of Issue: ND Dates: 10-23-2007

DL#: _____ State of Issue: MI Dates: 1990

DL#: _____ State of Issue: _____ Dates: _____

Has your driver's license ever been suspended or revoked? Yes No If "yes", where and when.

If "yes," have you ever been issued a citation for driving after you license was suspended or revoked? Yes No If "yes", where and when?

Have you ever been convicted, plead guilty, or plead "no contest" to any law of the U.S., or any state, or of any local ordinance (other than traffic)? (DUI **should not** be considered a "traffic offense"—and therefore must be listed) Yes No If yes, provide the date of arrest, location, charge, and sentence for each conviction:

Have you been issued a citation for any alcohol-related offense? Yes No
If "yes," provide the date, location, and charge for each citation:

List all federal, state, and local licenses (including liquor licenses; excluding driver's licenses) you currently hold, formerly held, or may have an interest in:

NORTH DAKOTA STATE BOARD OF RESPIRATORY CARE

Have any of the above named licenses ever been suspended or revoked? Yes No
If yes, list the dates and reasons for the suspensions or revocations:

List your employment/business history for the past 7 year's period: (Use additional pages if necessary.)

From: _____ to _____ Business name: _____

Address: _____ Position/Title: _____

From: _____ to _____ Business name: _____

Address: _____ Position/Title: _____

From: _____ to _____ Business name: _____

Address: _____ Position/Title: _____

From: _____ to _____ Business name: _____

Address: _____ Position/Title: _____

Do you currently own or have a financial interest in any other business that sells or serves alcoholic beverages? Yes No If "yes," list each business below:

Have you ever manufactured, sold, or distributed alcoholic beverages on the wholesale or retail level? Yes No If "yes," indicate where, when, and for whom below:

Do you have any current or prior management experience working for a business that sells or serves alcohol? Yes No If "yes," describe below:

Are all officers, directors, and shareholders holding more than 5% of the outstanding stock 21 years of age or older? Yes ; No ;

Address of Home Office _____

Date Incorporated _____ State of Incorporation _____

If a subsidiary of any corporation, state name and address of parent corporation _____

MEMORANDUM

TO: BOARD OF CITY COMMISSIONERS

FROM: STEVE SPRAGUE, CITY AUDITOR SS

SUBJECT: 2008 SPECIAL ASSESSMENT LIST FOR NEW CONSTRUCTION AND RECONSTRUCTION OF CITY ORDERED SIDEWALKS AND APPROACHES

DATE: FEBRUARY 18, 2009

Attached is a listing of addresses that will be assessed for the expense of new construction or rebuilding of sidewalks and approaches.

The property owners have been notified by mail and publication of this hearing was printed in the Forum February 9, 2009.

Recommend Motion: That the special assessment lists for the 2008 New Construction of City Ordered Sidewalks and Approaches along with the special assessment list for the 2008 Reconstruction of City Ordered Sidewalks and Approaches be approved and ordered filed in the office of the City Auditor, that the City Auditor's Office is instructed to proceed to collect the assessments in the manner provided by law and that the interest rate be set at 1.0% per annum over the average net interest rate.

forum listing 2008 sidewalks

2008 New Construction of City Ordered Sidewalks
and Approaches

The following special Assessment List for the expense of construction, or rebuilding sidewalks ordered by the Board of City Commissioners of the City of Fargo, North Dakota, to be constructed by the person or firm employed and under contract to construct sidewalks and Approaches with the City of Fargo at the expense of lots or parcels of land adjoining such Sidewalks and Approaches is returned by the City Engineer of the City of Fargo and filed in the office of the City Auditor as follows:

Description	Amount Assessed
2579 ATLANTIC DR S	2,167.22
1025 14 AVE S	5,589.10
6075 14 ST S	4,791.22
5815 14 ST S	4,731.83
4231 15 AVE S	5,998.93
2032 57 AVE S	1,435.38
1911 57 AVE S	962.20
1917 57 AVE S	700.87
1971 57 AVE S	1,108.71
4610 WOODHAVEN DR S	1,413.61
4618 WOODHAVEN DR S	1,732.37
4390 46 AVE S UNIT A	214.62
4390 46 AVE S UNIT B	214.62
4390 46 AVE S UNIT C	214.62
4390 46 AVE S UNIT D	214.62
4394 46 AVE S UNIT A	214.62
4394 46 AVE S UNIT B	214.62
4394 46 AVE S UNIT C	214.62
4394 46 AVE S UNIT D	214.62
4398 46 AVE S UNIT A	214.62
4398 46 AVE S UNIT B	214.62
4398 46 AVE S UNIT C	214.62
4398 46 AVE S UNIT D	214.62
4971 13 AVE S	5,266.38
5125 13 AVE S	5,076.32
4291 35 AVE S	1,009.73
3797 NORMAN CT S	1,176.03
3768 NORMAN CT S	1,108.71
3796 NORMAN CT S	1,282.94
3762 DOROTHEA CT S	962.20
3770 DOROTHEA CT S	742.44
3761 DOROTHEA CT S	944.38
4164 53 ST S	938.45
4122 53 ST S	940.43
4106 53 ST S	1,251.26
4273 53 ST S	989.92
4278 54 ST S	960.22
4204 54 ST S	1,118.61
4253 54 ST S	879.05
4144 55 ST S	1,009.73
5513 FARMSTEAD CT S	1,278.97
5521 FARMSTEAD CT S	1,053.28
5525 FARMSTEAD CT S	1,045.36
5533 FARMSTEAD CT S	1,049.32
5537 FARMSTEAD CT S	1,045.36
5599 FARMSTEAD CT S	1,599.71
5571 SUNFLOWER LN S	1,172.07
5575 SUNFLOWER LN S	888.95
5530 FARMSTEAD CT S	926.57

forum listing 2008 sidewalks

5584 FARMSTEAD CT S	883.00
4425 53 ST S	431.60
4427 53 ST S	380.13
4402 53 ST S	679.09
4404 53 ST S	518.73
4416 48 ST S	787.97
4404 49 ST S	1,084.95
4462 50 ST S	782.04
4108 58 ST S	1,354.21
4154 58 ST S	431.60
4180 58 ST S	635.53
4194 58 ST S	1,340.35
4393 LEE LN S	1,179.99
4460 BEACH LN S	1,187.91
4448 BEACH LN S	3,797.35
4561 BEACH LN S	2,484.71
4493 BEACH LN S	1,514.58
4223 58 ST S	1,259.18
4300 CLUBHOUSE DR S	6,994.78
4192 OSGOOD PKWY S	1,979.84
4121 FURNBERG PL S	1,320.56
4129 FURNBERG PL S	1,168.11
4159 FURNBERG PL S	3,357.82
4171 FURNBERG PL S	1,096.84
4238 66 ST S	1,544.28
4246 66 ST S	491.00
4262 66 ST S	821.64
4372 66 ST S	633.55
4384 66 ST S	884.99
6532 CHRISTIANSON PKWY S	1,124.55
6538 CHRISTIANSON PKWY S	1,265.12
6544 CHRISTIANSON PKWY S	1,271.05
6550 CHRISTIANSON PKWY S	1,271.05
6556 CHRISTIANSON PKWY S	1,257.20
4402 66 ST S	970.13
4274 58 ST S	1,178.01
4302 58 ST S	1,207.71
4314 58 ST S	1,053.28
4328 58 ST S	1,136.44
4366 58 ST S	1,049.32
4407 58 ST S	1,140.39
4419 58 ST S	1,275.02
4435 58 ST S	1,320.56
4470 LEE LN S	1,122.57
4490 58 ST S	1,122.57
4682 44 AVE S	512.78
4684 44 AVE S	512.78
4686 44 AVE S	512.78
4688 44 AVE S	512.78
4690 44 AVE S	512.78
4692 44 AVE S	512.78
4694 44 AVE S	512.78
4696 44 AVE S	512.78
4883 13 AVE S	6,592.89
4440 RIVERWOOD DR N	1,275.02
4550 RIVERWOOD DR N	3,258.83
4541 RIVERWOOD DR N	1,510.62
4303 17 AVE S	4,147.78
4301 17 AVE S	3,563.72
1201 28 AVE N	17,625.36

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Commissioners' Room, in the City Hall to approve said assessment list, at which time any person interested in said assessment list may be heard; and if said list is approved for collection, the amounts listed will become due ten days after approval and payable at the office of the City Auditor, Collections Department. If not so paid the amounts shall bear interest at a rate not exceeding 1.0% per annum over the average net interest rate.

City Auditor's Office

2008 Reconstruction of City Ordered Sidewalks and Approaches

The following Special Assessment List for the expense of construction, or rebuilding Sidewalks ordered by the Board of City Commissioners of the City of Fargo, North Dakota, to be constructed by the person or firm employed and under contract to construct sidewalks and Approaches with the City of Fargo at the expense of lots or parcels of land adjoining such sidewalks and Approaches is returned by the City Engineer of the City of Fargo and filed in the office of the City Auditor as follows:

Description	Amount Assessed
1702 14 1/2 ST S	441.75
2824 11 AVE N	2,054.99
2801 BROADWAY N	1,168.56
314 28 AVE N	583.30
324 28 AVE N	122.03
334 28 AVE N	100.06
402 28 AVE N	109.83
408 28 AVE N	112.27
310 28 AVE N	339.24
226 28 AVE N	363.65
222 28 AVE N	812.72
218 28 AVE N	805.40
214 28 AVE N	573.54
206 28 AVE N	97.62
122 28 AVE N	322.16
110 28 AVE N	622.35
106 28 AVE N	449.07
102 28 AVE N	461.27
90 28 AVE N	4,583.45
86 28 AVE N	1,081.19
82 28 AVE N	859.70
2805 3 ST N	339.24
1204 10 ST S	3,002.28
3213 ELM ST N	109.83
907 10 ST N	349.01
1310 21 ST S	4,880.10
921 17 ST S	158.64
214 25 AVE N	724.86
220 25 AVE N	1,970.17
226 25 AVE N	848.84
302 25 AVE N	873.73
306 25 AVE N	785.87
310 25 AVE N	859.09
402 25 AVE N	258.09
406 25 AVE N	585.74

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414 25 AVE N	517.41
422 25 AVE N	1,191.62
502 25 AVE N	962.21
506 25 AVE N	229.42
2415 BROADWAY N	1,769.13
229 25 AVE N	436.87
226 26 AVE N	991.49
218 26 AVE N	109.83
210 26 AVE N	709.60
206 26 AVE N	1,547.10
2512 2 ST N	107.39
313 25 AVE N	109.83
317 25 AVE N	102.51
321 25 AVE N	439.31
409 25 AVE N	1,213.59
413 25 AVE N	1,515.92
417 25 AVE N	1,322.81
509 25 AVE N	205.01
310 26 AVE N	339.24
306 26 AVE N	1,735.57
302 26 AVE N	1,342.33
2602 2 ST N	375.85
205 26 AVE N	721.81
221 26 AVE N	1,506.46
225 26 AVE N	513.75
230 27 AVE N	488.12
218 27 AVE N	256.26
214 27 AVE N	1,100.10
305 26 AVE N	551.58
2702 2 ST N	1,205.05
205 27 AVE N	993.32
209 27 AVE N	226.98
213 27 AVE N	1,000.65
221 27 AVE N	866.41
225 27 AVE N	1,522.02
301 27 AVE N	112.27
309 27 AVE N	107.39
1307 21 ST S	421.61
69 4 ST N	2,544.55
411 2 AVE N	366.09
608 3 ST N	1,132.44
615 3 ST N	424.66
226 24 AVE N	554.02
222 24 AVE N	661.40
218 24 AVE N	1,225.18
214 24 AVE N	1,310.60
210 24 AVE N	1,051.90
514 24 AVE N	597.95
422 24 AVE N	1,254.77
418 24 AVE N	590.63
410 24 AVE N	107.39
406 24 AVE N	656.52
314 24 AVE N	551.58
310 24 AVE N	539.37
306 24 AVE N	663.84
205 24 AVE N	1,428.67
217 24 AVE N	837.13
225 24 AVE N	1,016.20
229 24 AVE N	1,474.12
301 24 AVE N	346.57
305 24 AVE N	349.62
309 24 AVE N	109.83
317 24 AVE N	637.00

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401 24 AVE N	1,482.97
405 24 AVE N	1,667.85
409 24 AVE N	1,471.07
413 24 AVE N	1,493.04
505 24 AVE N	1,211.76
509 24 AVE N	219.65
513 24 AVE N	1,001.26
118 24 AVE N	439.31
114 24 AVE N	746.52
110 24 AVE N	1,308.47
106 24 AVE N	658.96
102 24 AVE N	548.83
98 24 AVE N	1,950.95
94 24 AVE N	339.24
77 24 AVE N	871.29
81 24 AVE N	419.78
85 24 AVE N	1,133.05
89 24 AVE N	666.89
93 24 AVE N	813.64
105 24 AVE N	1,819.77
109 24 AVE N	1,181.86
121 24 AVE N	1,691.34
118 25 AVE N	1,347.21
114 25 AVE N	519.85
106 25 AVE N	905.46
98 25 AVE N	109.83
86 25 AVE N	248.33
82 25 AVE N	893.87
78 25 AVE N	1,298.40
2502 ELM ST N	903.02
89 25 AVE N	312.40
93 25 AVE N	107.39
101 25 AVE N	358.77
105 25 AVE N	1,486.02
109 25 AVE N	1,226.71
117 25 AVE N	912.78
2501 2 ST N	425.88
114 26 AVE N	1,777.37
110 26 AVE N	1,282.54
2510 ELM ST N	109.83
2602 ELM ST N	1,525.38
77 26 AVE N	1,356.97
89 26 AVE N	639.44
97 26 AVE N	838.96
105 26 AVE N	793.20
109 26 AVE N	211.42
114 27 AVE N	104.34
110 27 AVE N	561.34
106 27 AVE N	100.06
102 27 AVE N	473.48
94 27 AVE N	721.20
90 27 AVE N	122.03
86 27 AVE N	319.72
82 27 AVE N	796.86
2610 ELM ST N	856.65
2702 ELM ST N	561.34
89 27 AVE N	373.41
93 27 AVE N	664.45
109 27 AVE N	451.51
117 27 AVE N	202.57
121 27 AVE N	92.74
200 3 ST N	5,969.71
1438 3 AVE N	441.75

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26 ROBERTS ST N	1,784.57
304 10 ST N	561.34
3642 15 ST S	207.45
3646 15 ST S	207.45
2725 39 1/2 AVE S	1,586.39
2601 BROADWAY N	22,304.89
3205 CHERRY LN N	326.43
3207 CHERRY LN N	326.43
3211 CHERRY LN N	326.43
3213 CHERRY LN N	326.43
3215 CHERRY LN N	326.43
3217 CHERRY LN N	326.43
3219 CHERRY LN N	326.43
3221 CHERRY LN N	326.43
3225 CHERRY LN N	326.43
3227 CHERRY LN N	326.43
3229 CHERRY LN N	326.43
3231 CHERRY LN N	326.43
3233 CHERRY LN N	326.43
3235 CHERRY LN N	326.43
3224 2 ST N	326.43
3226 2 ST N	326.43
3228 2 ST N	326.43
3230 2 ST N	326.43
3232 2 ST N	326.43
3234 2 ST N	326.43
3210 2 ST N	326.43
3212 2 ST N	326.43
3214 2 ST N	326.43
3216 2 ST N	326.43
3218 2 ST N	326.43
3220 2 ST N	326.43
3204 2 ST N	326.43
3206 2 ST N	326.43
215 32 AVE N	326.43
217 32 AVE N	326.43

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