

CITY OF FARMINGTON LICENSE PROCESS

Gambling Premise Permit

A Gambling Premise Permit is required to regulate gambling activities at businesses such as pull tabs. Please review Title 3 Chapter 19 of the city code for complete details. All permits are effective until the gambling activity ceases to exist. Following is the process to obtain a gambling premise permit:

1. Application forms and fees should be submitted to the City of Farmington at least two weeks prior to a City Council meeting. Along with this application, Applicant must complete the proper application from the Minnesota Gambling Control Board and attach here. Visit the [Gambling Control Board](#) for more information.
2. Approval is required by the City Council. Council meetings are held the first and third Mondays of every month.
3. Upon City Council approval, the signed permit will be returned to the Applicant. The entire application process takes approximately two weeks. Upon City Council approval, the Applicant should submit the proper forms and fee to the State for approval by the Gambling Control Board. Gambling applications are due to the Gambling Control Board at least 30 days prior to the event.

If you have questions, please contact:

Shirley Buecksler, City Clerk
City of Farmington
430 Third Street
Farmington, MN 55024
Tel: 651-280-6803
E-mail: SBuecksler@FarmingtonMN.gov



Application for Gambling Premises Permit
(Form GP2009)

APPLICANT INFORMATION

Applicant Name: _____ Title: _____
(First) (Middle) (Last)

Applicant Address: _____
(Street) (City, State, ZIP)

Applicant Home Phone: _____ Date of Birth: _____

BUSINESS INFORMATION

Business Name/Organization: _____

Address: _____
(Street) (City, State, ZIP)

Business Phone: _____ FAX: _____ Email: _____

Gambling Manager: _____ Phone Number: _____

Address: _____
(Street) (City, State, ZIP)

PROPOSED GAMBLING PREMISES LOCATION INFORMATION

Address: _____

Telephone Number: _____ FAX: _____

Property Owner/Lessor: _____

Property Owner/Lessor Address: _____
(Street) (City, State, ZIP)

Property Owner/Lessor Telephone Number: _____

Rents and other charges for use of premises: _____

Description of gambling activities to be conducted on premises by organization; including days & hours:

I hereby certify that all statements made in this application are true and complete to the best of my knowledge. I understand that any misstatements or omissions of material facts may result in the disqualification or denial of the license. I authorize the City of Farmington to investigate the information and contact persons/organizations named on this application. The undersigned agrees that the use of the Premises for gambling will conform to all applicable state laws, Gambling Control Board regulations, and ordinances of the City of Farmington.

Name of Applicant (please print) _____

Signature _____ Date _____

APPROVALS

Department	Signature	Date	Comments
Police	_____	_____	_____
City Clerk/Deputy Clerk	_____	_____	_____

Applicant will need copy of permit and signed resolution to send to the State of Minnesota.

CITY OF FARMINGTON – DATA PRACTICES ACT NOTICE

Minnesota law requires that you be informed of your rights as they pertain to private information (“private data”) collected from you by the City of Farmington (“the City”). Private data is that information held by the City which is available to you, but not to the public.

You have the right to refuse to provide the information requested on this application form, however, without certain information, the City may be unable to approve the license applied for. If you feel that certain information requested is an unwarranted invasion of privacy, please contact the Human Resources Director.

The dissemination and the use of private data we collect is limited to that necessary for the administration and management of the City’s licensing program. Persons or agencies with whom this information may be shared include:

- City personnel, including law enforcement personnel, administering the license program;
- The Bureau of Criminal Apprehension;
- The City Attorney and support staff of the City Attorney’s office;
- Federal, state, local, and contracted private auditors;
- Federal and State agencies with oversight or responsibility related to the licensed business;
- Those individuals or agencies as to whom you give your express written permission for release of the information.

Unless otherwise authorized by state statute or federal law, other governmental agencies utilizing the reported private data must also treat the information as private.

You may wish to exercise your rights as contained in the Minnesota Government Data Practices Act. These rights include:

- The right to see and obtain copies of data maintained about you;
- The right to be told the contents and meaning of the data; and
- The right to contest the accuracy and completeness of the data.

To exercise these rights, contact the Farmington Human Resources Director at 430 Third Street, Farmington, MN 55024 (651) 280-6800. I have read and I understand the above information regarding my rights as a subject of government data.

Applicant

Date