

Date Received _____
Date Issued _____

License No. _____

DATE (S) 4-20-22

Uniform Alcoholic Beverage License Application

Mail this copy to: Department of Revenue, Special Tax Division 445 East Capitol Ave Pierre, SD 57501-3100.

A. Owner Name and Address City of Rapid CityMinneluzahan Senior Citizens Center
315 N. 4th St.
Rapid City, SD 57701Owner's Telephone #: 605394 4143

B. Business Name and Address

Minneluzahan Senior Citizens Center
315 N. 4th St.
Rapid City, SD 57701Business Telephone #: 605-394-1887C. Indicate the class of Special Event License(s) being applied for
On-Sale Licenses

- ☒
- Special Event Malt Beverage Retailer \$50
-
- ☐
- Special Event On-Sale Wine Retailer \$50
-
- ☐
- Special Event On-Sale Dealer \$150
-
- Off-Sale Licenses
-
- ☐
- Special Event Off-Sale Package Wine Dealer* \$50
-
- ☐
- Special Event Off-Sale Package Malt Beverage Dealer* \$50
-
- ☐
- Special Event Off-Sale Package Dealer* \$150
-
- ☐
- *Certification: All donated alcoholic beverages have been purchased by the donor from a licensed South Dakota retailer _____ (initial)

Number of other Package Liquor Licenses held: 0
Number of other On-sale Liquor Licenses held: 0
Is this License in active use? ☐ Yes ☒ No

D. Legal description of licensed premise:

Minneluzahan Senior Citizens Center
315 N. 4th St.
Rapid City, SD 57701Have you ever been convicted of a felony? ☐ Yes ☒ NoDo you own ☐ or lease ☒ this property? (Check one)

E. State Sales Tax Number: _____

F. Remember to obtain a Federal Alcohol Stamp, for help call TTB at 1-800-937-8864.

G. New license? ☐ Transfer? (\$150) ☐ Re-issuance? ☐

H. CERTIFICATE: The undersigned applicant certifies under the penalties of perjury that all statements provided herein are true and correct; that the said applicant complies with all of the statutory requirements for the class of license being applied for and in addition agrees to permit agents of the Department of Revenue access to the licensed premises and records as provided in SDCL 35-2-2.1, and agrees this application shall constitute a contract between applicant and the State of South Dakota entitling the same or any peace officers to inspect the premises, books and records at any time for the purpose of enforcing the provisions of Title 35 SDCL, as amended.

Signed this 5 day of April 2022 Signature Paul Mank

I. Any Application required to be submitted to a local governing board must be signed in the presence of the city or county auditor, the town clerk or notary public. This applies to ALL applications EXCEPT the following: distillers, manufacturers, wholesalers, municipalities, airports, solicitors, dispensers, carriers, transportation companies, and farm wineries.

Place of business is located in a municipality? ☐ Yes ☐ No County: _____

This application was subscribed and sworn to before me this _____ day of _____

Approving Officer's Telephone number _____ Signature: _____

J. APPROVAL OF LOCAL GOVERNING BODY - Notice of hearing was published on _____ Public hearing on the application was held _____, not less than SEVEN (7) days after official publication. The governing body by majority vote recommends the approval and granting of this license and certifies that requirements as to location and suitability of premises and applicant have been reviewed and conform to the requirements of local and South Dakota law.

Application approved for Sunday on-sale operation? ☐ Yes ☐ NoAre real property taxes paid to date? ☐ Yes ☐ NoIneligible for video lottery ☐

Number of video lottery terminals on licensed premise: _____

Amount of fee collected with application \$ _____

Amount of fee retained \$ _____

Forwarded with application \$ _____

For Local Government Use

(Seal) _____

Mayor or Chairman

If disapproved, endorse reason thereon and return to applicant

Transferred (State Use)

From: _____

Sales tax approval _____ Date _____

STATE LIQUOR AUTHORITY: APPROVAL _____ REVIEW _____

Please complete reverse side

Company supplement information
(For corporate/partnership/LP/LLC applicants)

Name of corporation/partnership/LP LLC Minneleuzahan Senior Citizens Center

Address of office and principal place of business of corporation/partnership/LP/LLC 315 N. 4th St. Rapid City, SD 57701

Are all managing officers of this corporation/partnership/LP/LLC of good moral character having never been convicted of a felony? ☒ Yes ☐ No

Name, title of office, occupation and address of each of the officers/owners of the corporation, partnership, LP or LLC:

Name	Office	Address	Occupation
<u>Doris Ann Werlinger</u>	<u>President</u>		
<u>Joan Sutton</u>	<u>VP</u>		
<u>Richard Moose</u>	<u>Secretary</u>		
<u>Dennis Gorton</u>	<u>Treasurer</u>		

Name of any officers, directors, partners or stockholders of applicant having a financial interest or capital stock in any other alcoholic beverage license:

Name	Type of License, License Number, Financial Interest Held, and Address of Business Location
<u>NA</u>	

Where and with whom are all company records kept, such as charter, by-laws, minutes, accounts, notes payable, and notes and accounts receivable, etc?

Director of Minneleuzahan S.C., 315 N. 4th St. Rapid City, SD 57701

With signature the applicant agrees to the following:

That the applicant company will comply with all provisions of ARSD chapter No. 64:75:02 of the Department of Revenue, relating to the transfer of stock and prior approval of the transfer of such stock by the Secretary of Revenue and violation of any of the provisions of said regulation or failure to comply therewith, whether by the undersigned corporation, partnership/LP/LLC or by any stockholder thereof, or by anyone interested in said company, shall constitute cause for revocation or suspension of any license issued pursuant to and in reliance on this application, or for refusal to renew such license upon expiration thereof.

We the undersigned officers and directors of the applicant company acknowledge that the within supplement application form is true and correct in every respect and that there exists no financial arrangement concerning this or any other alcoholic beverage license than that expressly set forth above. If company stock is to be transferred we ask for approval of such voluntary stock transfer.

Signature of Authorized Officer/Director/Partner

Date

Amel Malik

4-4-22

ADDENDUM
SPECIAL EVENT ALCOHOLIC BEVERAGE LICENSE APPLICATION
SPECIAL EVENT DATE(S) April 20th, 2022

Owner/Business Name Minneluzahan Senior Citizens Center
Owner/Business Address 315 N. 4th St.
Owner/Business City/State/ZIP Rapid City, SD 57701
Owner/Business Phone 605-344-1887

Event Location: Minneluzahan Senior Citizens Center
315 N. 4th St.
Rapid City, SD 57701

Type of License(s) applied for:

- ☒ 1. *Special event malt beverage retailer.* Special event malt beverage retailers licenses are available to any civic, charitable, educational, fraternal, or veterans organization or any licensee licensed pursuant to § 5.12.030A. subsections 1 and 6.
- ☐ 2. *Special event on-sale wine retailer.* Special on-sale wine retailers licenses are available to any civic, charitable, educational, fraternal, or veterans organization or any licensee licensed pursuant to § 5.12.030A. subsections 1, or 9, or to a person licensed by the Department of Revenue under SDCL ch. 35-12.
- ☐ 3. *Special event on-sale dealer.* Special on-sale dealer licenses are available to any civic, charitable, educational, fraternal, or veterans organization or any licensee licensed pursuant to § 5.12.030A.1.
- ☐ 4. *Special event off-sale package wine dealer.* Special off-sale package wine dealers licenses are available in the following situations:
a) Any civic, charitable, educational, fraternal, or veterans organization or any licensee licensed pursuant to § 5.12.030A. subsections 5, 8, 9, or licensed pursuant to SDCL 35-4-2(19) or SDCL ch. 35-12 that sells only wine manufactured by a farm winery that is licensed pursuant to SDCL ch. 35-12; or b) Any civic, charitable, educational, fraternal, or veterans organization in conjunction with a special event conducted pursuant to § 5.12.035.E. Subject to Certification Below
- ☐ 5. *Special Event off-sale package malt beverage dealer.* Special off-sale package malt beverage dealer licenses are available to any civic, charitable, educational, fraternal, or veterans organization in conjunction with a special event conducted pursuant to § 5.12.035.E. Subject to Certification Below
- ☐ 6. *Special Event off-sale package dealer.* Special off-sale package dealers license is available to any civic, charitable, educational, fraternal, or veterans organization in conjunction with a special event conducted pursuant to § 5.12.035.E. Subject to Certification Below

CERTIFICATION for Licenses 4(b), 5 and 6: The undersigned applicant certifies that the ☐ civic, ☐ charitable, ☐ educational, ☐ fraternal, or ☐ veterans organization has accepted donated ☐ wine, ☒ malt beverages, or ☐ alcoholic beverages, as applicable to the above identified license, from members of the public to be sold at the special event and that said donated alcoholic beverage has been purchased by the donor from a licensed South Dakota retailer.

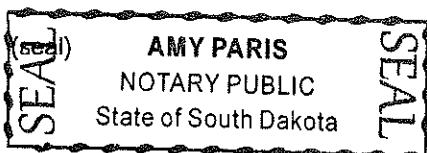
Dated this _____ day of _____, 20____ Signature _____

CERTIFICATION: The undersigned applicant certifies under the penalties of perjury that all statements provided herein are true and correct; that the said applicant complies with all of the statutory requirements for the class of license being applied for as a: ☐ Civic; ☒ Charitable; ☐ Educational; ☐ Fraternal; ☐ Veterans organization; or, ☐ A licensee licensed pursuant to SDCL.

Dated this 5th day of April, 2022 Signature Amy Paris

State of South Dakota)
County of Pennington)

Subscribed and sworn to before me this 5th day of April, 2022.



Signature - Notary Public
My Commission Expires: July 28th 2026

ROUTING SHEET FOR ALCOHOL LICENSE

Rapid City, South Dakota

City Staff: Please return completed form to the Finance Office by _____

Name of Business: Minneluzahan Senior Citizens Center
PROPERTY TAX IDENTIFICATION NUMBER: _____
Local Manager: April Malik
Local Address: 315 N. 4th St. Rapid City SD 57701
Home Telephone: 858-8424 Business Telephone: 394-1887 Date of Birth: 04-03-1976
Social Security Number: 504-13-9117 Driver's License No.: 00636688
Employer, Address, Telephone for preceding 3 years (New Applicants Only)
Minneluzahan Senior Citizens Center 315 N. 4th St. Rapid City, SD
57701 605-394-1887 Home: 3707 Country Ln RC SD 57702 605-858-8424
Previous Criminal Record: None
CONTACT E-Mail: m3ccrcdirector@gmail.com

CORPORATE INFORMATION: (If directors of corporation reside outside of Rapid City, fill out above information about local representative or manager.)

Corporate Officers:	Date of Birth	Social Security Number
Name: _____	_____	_____
Name: _____	_____	_____
Name: _____	_____	_____
Name: _____	_____	_____

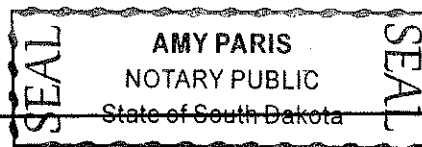
I hereby authorize the Rapid City Police Department to conduct an investigation into my complete history, including former employment together with any and all information concerning my ability, personal character, credit, arrest record, etc. I hereby release any law enforcement agency, company corporation, or individual from all liability for furnishing information concerning me in response to this investigation. I also understand and agree to submit to a polygraph examination if I am requested to do so as a part of my background investigation.

April Malik
Signature

Subscribed to before me this 5th day of April, 2022.

Amy Paris
Notary Public

Commission Expires: July 28th, 2026



FIRE DEPARTMENT:

Approval _____
Recommend Denial: _____
Date: _____

Fire Department Representative

POLICE DEPARTMENT:

Approval _____
Disapproval _____

Police Chief (or Representative)