HIBBING CITY COUNCIL
Regular Meeting
Wednesday, September 2, 2026
5:00 PM

Councilor Justin Fosso
Councilor John Schweiberger
Councilor James Bayliss
Councilor Jay Hildenbrand
Councilor Jennifer Hoffman Saccoman
Councilor Chris Whitney
Mayor Pete Hyduke

City Administrator Greg Pruszinske
City Clerk-Dep Admin Candie Seppala
Finance Dir - Treasurer Sheena Mulner
City Attorney Andy Borland
Chief of Police Steve Estey
City Engineer Jesse Story

Members may participate through remote technology

I. CALL TO ORDER:

II. PLEDGE OF ALLEGIANCE:

III. ADDS AND DELETES:

1. ADDS: Consent Agenda items #20-31, IX. CANVASSING COMMITTEE, and DEPARTMENT AND COMMITTEE REPORTS 2a

IV. APPROVAL OF THE AGENDA:

V. WELCOME NEW COMMUNITY DEVELOPMENT DIRECTOR STEPHANIE SKRABA

VI. APPROVAL OF MINUTES:

1. Approve the Minutes of the Hibbing City Council Meeting of August 19, 2026
2. Approve the Minutes of the Hibbing City Council Workshop of August 19, 2026

VII. CONSENT AGENDA:

1. Approve Accounts Payable dated August 27, 2026 checks #183518-183619 and drafts totaling $1,304,594.60
2. Approve City Payroll for the pay period ending August 21, 2026 in the amount of $676,580.95
3. Approve and place on file the Hibbing Police Department Activity Report for July 2026
4. Declare one stage trailer for surplus
5. Approve the 2026 Massage Therapy License of Yuyun Lan, New Star Massage, 2204 1st Ave., Hibbing
   Massage License #26-001481

6. Offer RESOLUTION 26-09-01 AUTHORIZING THE CITY OF HIBBING TO APPLY FOR AND, UPON APPROVAL, ACCEPT GRANT FUNDING FROM THE DEPARTMENT OF IRON RANGE RESOURCES AND REHABILITATION FOR $350,000 TO SUPPORT CONTINUATION OF THE SANITARY SEWER LINING PROJECT

7. Approve the quote from Vertosoft for OpenGov Asset Management Software for the period of 1/1/2027 to 12/31/2029 totaling $74,963.39

8. Approve the hire of Cole Hart for Casual Community Service Officer (CSO) pending pre-employment contingencies.

9. Approve the hire of Joseph Seeley for Casual Community Service Officer (CSO) pending pre-employment contingencies.

10. Approve the hire of Kolton Bajda for Casual Community Service Officer (CSO) pending pre-employment contingencies.

11. Authorize the City Council to attend Sketches of Minnesota Iron Range on Thursday, Oct. 1, 2026, from 5 to 8:30 p.m. at Minnesota Discovery Center

12. Approve the Statewide Voluntary Firefighter (SVF) Allocation Plan

13. Approve the Bingo Permit Application Request of the Hibbing Parent Band Organization to host Bingo at the Hibbing Elks Club on October 29 and November 5, 12 and 19, 2026
    Bingo Permit #26-09-01

14. Approve the Special Event Permit Application of the Hibbing Chisholm Chapter of the Minnesota Deer Hunters to hold its annual Membership Banquet on October 7, 2026, in the Memorial Building

15. Approve the Raffle Permit Application Request of Hibbing Chisholm Youth Hockey to hold its raffle on February 6, 2027, at MInnesota College North
    Raffle Permit #26-09-01

16. Offer RESOLUTION NO. 26-09-02 IN SUPPORT OF CLIMB THEATRE TO CONDUCT CHARITABLE GAMBLING AT YOU BETCHA BOWLING 1929 5TH AVE EAST

17. Approve the 2026 Transient Merchant License Application of Christina Kloos, Dirty POP Shop LLC, 3910 3rd Ave. E.
    License/Permit #2026

18. Set the next Regular Meeting of the Hibbing City Council for 5:00 p.m. Wednesday, September 16, 2026, in the Hibbing City Hall Council Chamber.

19. Set the next Hibbing City Council Workshop Meeting for Wednesday, September 16, 2026, following the Regular City Council Meeting at 5:00 p.m. in the Hibbing City Hall Council Chamber.

20. Approve the professional services agreement with Miriam Kero Consulting for the purposes of grant writing to the Greater Minnestoa Parks and Trails Commission regional designation application for Carey Lake Recreation Area.

21. Authorize the City Council to attend the Hibbing Service Center's Technical Training Day from 9 a.m. to 3:30 p.m. September 9, 2026

22. Approve the Raffle Permit Application Request of the Warlocks of Hibbing to conduct its raffle on December 11, 2026, at the Warlocks of Hibbing
Raffle #26-09-02

23. Approve the Temporary On-Sale Liquor License Application of Checco's Tavern to dispense alcohol during the Oktoberfest on September 19, 2026

24. Approve the Temporary On-Sale Liquor License Application of The Iron House to dispense alcohol during the Oktoberfest on September 19, 2026

25. Approve the Temporary On-Sale Liquor License Application of Sammy's Pizza Hibbing to dispense alcohol during the Oktoberfest on September 19, 2026

26. Approve the Temporary On-Sale Liquor License Application of Homer Bar to dispense alcohol during the Oktoberfest on September 19, 2026

27. Approve the Temporary On-Sale Liquor License Application of Mike's Pub to dispense alcohol during the Oktoberfest on September 19, 2026

28. Approve the Temporary On-Sale Liquor License Application of Sportemen'S Taverna to dispense alcohol during the Oktoberfest on September 19, 2026

29. Authorize the hire of Abby Haben for the Temporary Animal Care Attendant pending pre-employment contingencies.

30. Approve the Raffle Permit Application of Precious Paws to hold their Raffle on Saturday, September 26, 2026 at the Hibbing National Guard Armory
Raffle # 26-09-03

31. Approve the Transient Merchant License Application of Joe Provinzino, Joe Provo Racewear, Hibbing Speedway
License/Permit #2026

VIII. PUBLIC FORUM:

IX. CANVASSING COMMITTEE: CITY COUNCIL TO CANVASS THE VOTES OF THE 2026 PRIMARY ELECTION

1. Mayor:

- Marisa Allen 414
- Peter Hyduke 1,745
- Larry Siebert 335

Council Member At Large:

- Justin Fosso 733
- Tiffany Schleppegrell 628
- Angela Jivery 291
- Mark Borland 851

Offer RESOLUTION NO. 26-09-04 CANVASSING THE VOTES FOR MAYOR AND COUNCIL MEMBER AT LARGE FOR THE 2026 PRIMARY ELECTION

X. DEPARTMENT AND COMMITTEE REPORTS:

1. Building Official Pat Green

a. Offer Resolution No. 26-09-03 to make an application to and accept funds from the IRRR Residential Redevelopment Grant Program in the amount of $36,868.00.

2. City Attorney Andy Borland

a. Approve the quote from Hawk Construction for the insurance claim repairs at the Public Works warm storage building

3. City Administrator Greg Pruszinske

a. City Administrator Report

XI. BIDS AND QUOTES:

1. Building Official Pat Green

a. Approve a change order for the demolition of the old Sullivan Warehouse building in the amount of $22,830.00.

2. Fleet Manager Joe McKenney

a. Approve purchase of smooth drum roller from L&L Rental for $15,435.00

XII. ADJOURNMENT:

THE MINUTES OF THE REGULAR MEETING
OF THE HIBBING CITY COUNCIL
August 19, 2026

TIME AND PLACE: A Regular Meeting of the Hibbing City Council was held on Wednesday, August 19, 2026, in the City Hall Council Chamber.

CALL TO ORDER: Mayor Pete Hyduke called the meeting to order at 5:02 p.m.

ATTENDANCE: Present at roll call Mayor Pete Hyduke, Councilor James Bayliss, Councilor Jay Hildenbrand, Councilor Justin Fosso, Councilor John Schweiberger and Councilor Jennifer Hoffman Saccoman. Councilor Chris Whitney was absent. Also present were City Attorney Andy Borland, City Administrator Greg Pruszinske, City Clerk-Deputy Administrator Candie Seppala, Finance Director Sheena Mulner, Deputy Chief of Police Tyler Schwerzler and City Engineer Jesse Story.

PLEDGE OF ALLEGIANCE

ADDS/DELETES:
1. ADD: Consent Agenda #11-17
2. ADD: Department & Committee Reports #1 E & #4 A

APPROVAL OF THE AGENDA:
Councilor Bayliss, supported by Councilor Fosso, moved to approve the agenda.

Motion CARRIED

APPROVAL OF THE MINUTES:
1. Approve the Minutes of the Hibbing City Council Meeting of August 5, 2026

Councilor Fossso, supported by Councilor Hildenbrand, moved to approve the minutes.

Motion CARRIED

2. Approve the Minutes of the Hibbing City Council Workshop of August 5, 2026

Councilor Bayliss, supported by Councilor Fosso, moved to approve the minutes

Motion CARRIED

CONSENT AGENDA:

Councilor Hoffman Saccoman, supported by Councilor Fosso, moved to approve the Consent Agenda as read and presented.

Motion CARRIED

1. Approve Accounts Payable dated August 14, 2026, checks #183399-183517 and drafts totaling $4,419,402.23

2. Approve City Payroll for the pay period ending August 7, 2026, in the amount of$682,246.14

3. Authorize the promotion of Mitchell Anderson to Engineer/Paramedic effective August 20, 2026.

4. Declare One Stump Grinder Surplus

5. Declare 1994 Pierce Fire Engine Surplus

6. Declare list of fire department tools and equipment surplus

7. Approve the 2025 Financial Statements

8. Approve the Special Event Permit Request of Victory Christian Academy to conduct a Bikeathon on Saturday, September 26, 2026, between Bennett Park and the Mesabi Trail

9. Set the next Regular Hibbing City Council Meeting for Wednesday, September 2, 2026, at 5:00 p.m. in the Hibbing City Hall Council Chambers

10. Set the next Hibbing City Council Workshop Meeting for Wednesday, September 2, 2026, following the Regular City Council Meeting at 5:00 p.m. in the Hibbing City Hall Council Chambers

11. Approve paying the invoice from St. Croix Recreation Fun Playgrounds INC. for the new shelter at Carey Lake in the amount of $31,584

12. Authorize the hire of Kelly Grinsteinner for the Full-Time Senior Executive Assistant position effective August 20, 2026.

13. Approve the Bingo Permit Application Request of the Hibbing Drama Club to host Bingo at the Elks Club on September 4, 11, 18, & 25, 2026
    Bingo Permit # 26-08-04

14. Approve the Bingo Permit Request of the Hibbing/Chisholm High School Soccer Booster Club to host Bingo at the Elks Club on October 1,8,15, and 22, 2026
    Bingo Permit #26-08-05

15. Authorize the Mayor and City Council to attend the Minnesota Council On Latino Affairs Board Meeting from 9 a.m. to noon Saturday, September 12, 2026, at Red Rock Hotel

16. Approve the Raffle Permit Application Request of Cancer Cruise Poker Run to host a raffle on Saturday, Aug. 29, at the Hibbing Armory
    Raffle Permit #26-08-06

17. Approve the Neighborhood Block Party on 3rd Ave West between 28th and 29th Streets on Wednesday, September 2, 2026, from 4:00 pm - 8:00 pm

PUBLIC FORUM: None

DEPARTMENT & COMMITTEE REPORTS:

1. City Engineering Jesse Story

a. MnDOT Work Order - Deferred Maintenance

The work order allows the City to invoice MnDOT for 50% of the Engineering/Architectural design services for the deferred maintenance at the Central Range Public Works facility.

Councilor Fosso, supported by Councilor Hildendbrand, moved to approve the work order.

Motion CARRIED

2. Building Official Pat Green

a. Approve the Zoning Amendment request of United States Steel Corporation,1 PPG PL Suite 2810, Pittsburgh, PA 15222, in the R-R, Rural-Residential, A-R, Agriculture-Rural-Residential, A-1, Agriculture, & O-1, Open Space Districts and the Hibbing City Code of Ordinances, on the subject property, Parcel ID #'s141-0040-00830, 141-0040-00840, 141-0040-00860, 141-0040-00870, 141-0040-00880, 141-0040-00890, 141-0040-01790, 141-0040-01805, 141-0040-01810, 141-0040-01820, 141-0040-02950, 141-0040-02965, 141-0040-02975, 141-0040-02990, 141-0040-03065, 141-0050-05780, 141-0050-05820, 141-0050-05950, 141-0050-05600, 141-0050-06520, 141-0040-00800, 141-0040-00820, 141-0040-00850, 141-0040-01360, 141-0040-01450, 141-0040-01460, 141-0040-01520. 141-0040-01550, 141-0040-01560, 141-0040-01720, 141-0040-01730, 141-0040-01740, 141-0040-01750, 141-0040-01760, 141-0040-01770, 141-0040-02940, 141-0040-03070, 141-0040-03080, 141-0040-03100, 141-0040-03110, 141-0040-03150, 141-0040-03190, 141-0040-03210, 141-0040-03220, 141-0040-03230, 141-0040-03270, 141-0040-03280, 141-0040-03340, 141-0040-03390, 141-0040-03430, 141-0040-03440, 141-0040-03450, 141-0040-03490, 141-0040-03500, 141-0040-03510, 141-0040-03550, 141-0040-03560, 141-0040-03570, 141-0040-03590, 141-0040-03630, 141-0040-03650, 141-0040-03660, 141-0040-03680, 141-0040-03690, 141-0040-03700, 141-0040-03710, 141-0040-05120, 141-0040-05070, 141-0040-05110, 141-0040-05240, 141-0040-05290, 141-0040-00970, 141-0040-00990, 141-0040-01000, 141-0040-01080, 141-0040-01230, 141-0040-01310, 141-0050-05590, 141-0050-06450, 141-0050-06490, 141-0040-05140, 141-0040-05130, 141-0040-05300, 141-0040-05160, 141-0040-05170, 141-0040-05360, 141-0040-05370, 141-0040-05320, 141-0040-05350, 141-0040-05340, 141-0040-05400, 141-0040-05410, 141-0040-05440, 141-0040-05430, 141-0040-05640

A request by US Steel to rezone all of the parcels it owns south of HWY 169 to I-2 Heavy Industrial. Planning Commission heard and approved recommendation of the request.

Councilor Hoffman Saccoman, supported by Councilor Schweiberger, moved to approve the zoning amendment request.

Motion CARRIED

b. Offer RESOLUTION NO. 26-08-06 APPROVING THE PLAT EXEMPTION REQUEST OF RICHARD & LAURA RUSICH, 2101 EAST 35TH STREET, HIBBING, MN 55746 IN THE R-1, SINGLE FAMILY RESIDENCE DISTRICT, AND THE HIBBING CITY CODE OF ORDINANCES ON THE SUBJECT PROPERTY, 2101 EAST 35TH STREET, HIBBING, MN 55746 (SECTION 20 TOWNSHIP 57 RANGE 20, HIBBING).

The Rusichs plan to split one parcel into two to sell to a neighboring property. Both parcels still meet minimum requirements as zoned. The Planning Commission review and recommends approval.

Councilor Schweiberger, supported by Councilor Hoffman Saccoman, moved to adopt the resolution.

Motion CARRIED

3. City Attorney Andy Borland

a. Request for Authorization to Initiate Legal Action Regarding Blight Violation - Offer RESOLUTION NO. 26-08-08 AUTHORIZING THE CITY ATTORNEY TO COMMENCE LEGAL ACTION TO ENFORCE THE CITY'S ABANDONED PROPERTY, MAINTENANCE OF PRIVATE PROPERTY, AND ABANDONED MOTOR VEHICLE ORDINANCES AGAINST THE REAL PROPERTY LOCATED AT 4301 FIRST AVENUE, HIBBING, MINNESOTA 55746

Councilor Schweiberger, supported by Councilor Bayliss, moved to adopt the resolution.

Motion CARRIED

b. Offer RESOLUTION NO. 26-08-07 WAIVING THE PLANNING COMMISSION'S REVIEW OF THE CITY OF HIBBING'S CONVEYANCE OF REAL PROPERTY TO INGENUITY INVESTMENTS L.L.C.

This pertains to the Stuntz Garage. The city had negotiated a provision of purchase agreement to sell that real property. Closing is anticipated to be at the end of the month.

Councilor Fosso, supported by Councilor Hildenbrand, moved to adopt the resolution.

Motion CARRIED

c. First Amendment to Purchase - Offer RESOLUTION No. 26-08-06 APPROVING AND AUTHORIZING EXECUTION OF AN AMENDMENT TO THE PURCHASE AGREEMENT AND SALE OF REAL PROPERTY TO INGENUITY INVESTMENTS L.L.C.

This is a resolution authorizing the execution of an amendment to the purchase agreement and the sale of real property to Ingenuity Investments LLC. The original purchase agreement was with Ingenuity Builders; they have formed a separate entity.

Councilor Hoffman Saccoman, supported by Councilor Hildenbrand, moved to adopt the resolution

Motion CARRIED

d. Authorize the Mayor and City Clerk to sign the proposed School Resource Officers Agreement for 2026-2027

This is for a one-year term and $30,000. There were some small tweaks with the language.

Councilor Fosso, supported by Councilor Bayliss, moved to authorize the signatures

Motion CARRIED

4. **City Administrator Greg Pruszinzke**

a. Approve invoice from Liberty Tire Recycling for tire clean-up Public Works Facility in the amount of $18,141.15

This is in addition to tires previously abated and will be billed half toward the Hibbing Speedway and half to the New Haven Project.

Councilor Bayliss, supported by Councilor Fosso, moved to approve the invoice

Motion CARRIED

b. City Adminstrator's Report

Mentioned the upcoming Fall Community CleanUp Days on September 11 & 12 at a new location (Recycling Center)

BIDS & QUOTES:

1. **City Engineer Jesse Story**
   a. PW Renovation - Office furniture 50% deposit - $24,024.70

   Councilor Hoffman Saccoman, supported by Councilor Fosso, moved to approve the purchase

   Motion CARRIED

   b. 23rd Street Storm Sewer Change Order - $134,475.00

   Councilor Bayliss, supported by Councilor Schweiberger, moved to approve the change order.

   Motion CARRIED

   c. 400 Block Change Order - $215,800.00

   Councilor Bayliss, supported by Councilor Fosso, moved to approve the change order.

   Motion CARRIED

   d. PW Deferred Maintenance - Floor Drain Reconstruction - $79,698.00

   Councilor Fosso, supported by Councilor Hildenbrand, moved to approve the quote.

   Motion CARRIED

2. **Fleet Manager Joe McKenney**

   a. Approve the purchase of a broom for Toro Groundmaster

   Quote is for a 5-foot broom for Toro Groundmaster to MTI for $9,972.00

Councilor Schweiberger, supported by Councilor Hoffman Saccoman, moved to approve the purchase

Motion CARRIED

CLOSED SESSION: FOR THE PURPOSE OF REAL PROPERTY PARCELS 140-0098-02325 (323 EAST 37TH STREET, HIBBING MN 55746) PURSUANT TO MN ST SECTION 13D.05 SUB.3(C3)

Councilor Bayliss, supported by Councilor Fosso, moved to go into Closed Session

Motion CARRIED

ADJOURNMENT: There being no further business, the meeting was adjourned at 5:28 p.m. by Councilor Bayliss and supported by Councilor Schweiberger.

Motion CARRIED

CITY OF HIBBING

_____
Pete Hyduke, Mayor

ATTEST: _____
Candie Seppala, City Clerk-Deputy Administrator

THE MINUTES OF THE WORKSHOP OF THE
HIBBING CITY COUNCIL
Wednesday, August 19, 2026

TIME AND PLACE: A Workshop of the Hibbing City Council was held on Wednesday, August 19, 2026, in the City Hall Council Chamber.

CALL TO ORDER: Mayor Pete Hyduke called the workshop to order at 6:01 p.m.

ATTENDANCE: Present at roll call Mayor Pete Hyduke, Councilor James Bayliss, Councilor Jay Hildenbrand, Councilor Justin Fosso, Councilor John Schweiberger and Councilor Jennifer Hoffman Saccoman. Councilor Chris Whitney was absent. Also present were City Attorney Andy Borland, City Administrator Greg Pruszinske, City Clerk-Deputy Administrator Candie Seppala, Finance Director Sheena Mulner, Deputy Chief of Police Tyler Schwerzler and City Engineer Jesse Story.

I. DISCUSSIONS TO INCLUDE:

1. 2027 Budget Presentation

Budget Accountant Josie Sevillano presented the 2027 budget with the support of various department heads and City Administrator Pruszinske. The review included General Fund Expenditures, Year-over-year budgeted staffing, the Library and HEDA funds, Capital Requests, Debt Service, Public Works/Public Safety Center Borrowing, OPEB, Permanent Improvements, Summary Levy and Fiscal Disparities.

The projected levy is at change of $2,142,828 or 17.76 percent increase. Councilors were asked what the comfort level for adoption of preliminary and final levy is, and where they suggest additional reductions begin.

Mayor Hyduke said he'd like to see the levy remain similar to last year with a under 10% preliminary and between 5-6% final. Councilors Schweiberger, Hoffman Saccoman and Bayliss concurred. Bayliss mentioned using surplus funds from past years. Hyduke said reductions should be looked at in all categories (staffing, depts, etc.). Bayliss also pointed to a couple of capital purchases that could be combined or reduced.

Pruszinske reviewed the budgeting process, reminding the council that budgeting is a 24/7 effort. He noted the disposal of the Kelly Lake Fire Station and discussing the future of the paid-on-call program may come into play. The option of leasing was briefly discussed, to which Pruszinske stated that it was analyzed in past years and proved to be less beneficial than purchasing. Bayliss suggested that any future budget surplus should immediately go toward the purchase of the fire engine.

The council will be provided with an update on the budget at its September 2nd meeting with action to be taken on the preliminary levy at its September 16th meeting. The preliminary

levy needs to be adopted by September 30th and cannot be increased at final adoption in December.

II. ROUND TABLE:

Administrator Pruszinske inquired if there were any objections to the disposal of the Kelly Lake Fire Station. He said it would be done by some sort of competitive bid.

Deputy Schwerzler mentioned the Fall Community CleanUp set for Sept. 11-12 at a new location (Recycling Center) and that the department is currently in the process of a POST Board audit.

City Clerk Seppala said the staff at Hibbing Animal Intake have been doing well and animals are getting adopted as well as moved on to other operations such as PJs Rescues, Contended Critters and Precious Paws. They are also looking at hosting open hours for the public.

Councilor Bayliss mentioned inquiries he's received about handicapped parking spaces and passed the matter onto City Engineer Story.

III. ADJOURNMENT at 7:12 p.m.:

CITY OF HIBBING

_____

Pete Hyduke, Mayor

ATTEST: _____

Candie Seppala, City Clerk-Deputy Administrator

CITY OF HIBBING (6195543)
401 E 21ST ST
HIBBING, MN 55746-1854
United States
41-6005232

Payroll Recap & Funding
Biweekly Regular 08/28/2026

Pay Date: 08/28/2026

Payroll Overview

Payroll		Biweekly Regular 08/28/2026
Pay Date		08/28/2026
# Employees		220
# Paid Employees		220
# Regular	220	
# Pay Periods		1
Base Compensation Changes		7
New Hires		1

Employee Payments

	#	EE's	$ Amount	
Checks Paid By POD6 | UK	40	40	6,329.40 D	
Direct Deposits Debited	240	178	291,211.00 D	
Total				**297,540.40**
(D) POD6 | UKG Payroll Services Admin Debit				**-297,540.40**
Your Remaining Bank Account Liability				**0.00**
Vouchers Printed	40			
Vouchers Suppressed	0			

Taxes

	EIN	EE's	$ Amount	
FIT/EE	41-6005232	153	39,446.81	
FICA/ER	41-6005232	121	14,456.28	
FICA/EE	41-6005232	121	14,456.28	
MEDI/ER	41-6005232	180	6,175.71	
MEDI/EE	41-6005232	180	6,175.71	
SIT:MN/EE	8022766	154	18,332.00	
Total				**99,042.79**
Your Remaining Tax Liability				**99,042.79**

Vendor Liabilities

	EE's	$ Amount	
AFLAC-WWHQ	5	302.25	
AFSCME MN COUNCIL 65	52	3,344.98C	
City of Hibbing Insurance	118	159,960.19D	
City of Hibbing PFML	220	3,756.24D	
EMPOWER	65	9,612.00	
FIREFIGHTERS LOCAL #173 C/O HI	22	1,789.92C	
HIBBING POLICE ASSOCIATION	15	150.00D	
Lincoln Financial Group	17	4,133.53	
MAPE UNION ATTN: JULIE LEE	6	431.08C	
MINNESOTA TEAMSTERS NO. 320	3	381.00C	
MN CHILD SUPPORT PAYMENT CEN	2	765.56D	
MN PERA	136	91,855.01	
MN PUBLIC EMPLOYEES ASSOCIATI	24	1,296.00C	
NATIONWIDE	13	2,220.00	
Total			**279,997.76**
(D) POD6 | UKG Payroll Services Admin Debit			**-164,631.99**
(C) Vendor Checks			**-7,242.98**
Your Remaining Vendor Liability			**108,122.79**

Total

--More--

Total - Continued

Total	**676,580.95**
POD6 | UKG Payroll Services Admin Debit	**-462,172.39**
Total of Your Responsibility	**214,408.56**

Recap

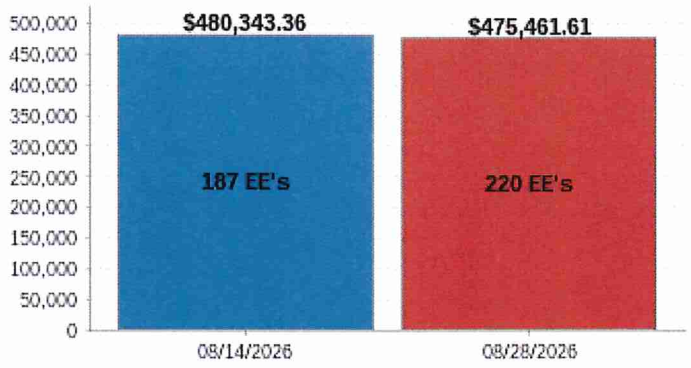
POD6 | UKG Payroll S	Date	Bank Account #	$ Amount
Vendor Payment SPA	08/27/2026	x0087	164,631.99
Empl. Checks SPA	08/27/2026	x0087	6,329.40
Empl. Dir. Dep. SPA	08/27/2026	x0087	291,211.00
		Total Debits	**462,172.39**

Cash Requirements: x0087	$ Amount
Vendor Payment SPA	164,631.99
Vendor Checks	7,242.98
Tax Payment	99,042.79
Empl. Checks SPA	6,329.40
Empl. Dir. Dep. SPA	291,211.00
Total	**568,458.16**

General Ledger Summary

	Debit/Exp.	Credit/Liab.
Earning	476,705.59	
ER Deduction	179,243.37	
ER Tax (Offset)	20,631.99	
Check		6,329.40
ER Tax		20,631.99
Tax		78,410.80
Deduction		100,754.39
ER Deduction (Offset)		179,243.37
Direct Deposit		291,211.00
	676,580.95	**676,580.95**

Comparison To Last Pay Period - Gross Wages



PR# 18-26
8/8/26-8/21/26
PAID 8/28/26

SPREADSHEET	$359,629.30	
POLICE	$104,421.42	
PAID ON CALL	$1,181.00	
Frge	$0.00	
REIM	$1,243.98	
unif	$3,874.95	
PRHC	$0.00	
SEVP	$0.00	
Elections	$6,354.50	
ROUNDING	$0.44	$0.00
	$476,705.59	

EARNINGS	$476,705.59
DEDUCTIONS	$179,243.37
TAXES	$20,631.99
3P Add On	$0.00
	$676,580.95

Earnings	$476,705.59	
1200	$23,827.83	
2400	$99,023.60	
2400EV	$1,406.26	
PFML	$1,878.12	
Coor	$16,639.03	
PFP	$36,424.68	
DC4	$43.85	
PCBP	$0.00	
Fica	$14,456.28	
Medi	$6,175.71	
3P Fica	$0.00	
3P Medi	$0.00	
3PSIT: MN	$0.00	DIFFERENCE
	$676,580.95	$0.00

HIBBING POLICE DEPARTMENT

July 2026 ACTIVITY

ASLT-DOMESTIC ASLT-MISD	3
ASLT-TERRORIST THREATS RECKLESS DISREGARD RISK	1
Assault - 4th Deg - Physician, nurse or other emerg	1
CSC-2 DEG-VICTIM UNDER 13 MALE ACTOR >36M	1
CSC-3 DEG-FEMALE-NO FORCE-F	1
Cannabis-2nd Degree-Sell cannabis flower/concentrat	1
Criminal Vehicular Operation - Bodily Harm - Under	1
DISTURB-PUBLIC NUISANCE	1
Disorderly Conduct-Brawling or Fighting- MS	7
Disorderly Conduct-Offensive/Abusive/Noisy/Obscene-	1
Domestic Abuse - Violate Order for Protection-M	2
Domestic Abuse No Contact Order - Violate No Contac	1
Domestic Abuse; Violates 2 or more OFPw/in 10 years	2
Domestic Assault-GM-Subsequent Violation-GM	1
Domestic Assault-Misdemeanor-Commits Act to Cause F	3
Drivers' Licenses-Driving restrictions-Drive/operat	1
Drugs - 5th Degree - Possess Schedule 1,2,3,4 or pa	1
FAMILY OFFENSE-CONTRIBUTE TO DELINQUENCY OF MINOR	1
HIB-Abandoned Property	3
HIB-Abandoned Vehicle	1
HIB-Cat Running at Large	1
HIB-Dog at Large	2
HIB-Maintenance Of Private Property	1
HIB-Noise Control/Loud Unnecessary Noise	1
Harassment; Restraining Order - Violate Restraining	1
Indecent Exposure in presence of minor and previous	1
LIQUOR-UNDERAGE CONSUMPTION 18-21	1
Liquor-Purchase/Sell/Barter/Furnish/Give to u/21yr-	1
Make Emergency Call-Police/Fire/Medical/Ambulance-N	1
Obstruct Legal Process-Interfere w/Peace Officer- G	1
Predatory Offender - Knowingly commits act or fails	1
SCAM REPORT ONLY	1
TRAF-DL-DAC-INIMICAL TO PUBLIC SAFETY	2
TRAF-DUI-2 DEG-ALCOHOL CONC OVER .08 OR MORE W/I 2	1
TRAF-DUI-3 DEG-ALCOHOL CONC OVER .08 OR MORE W/I 2	1
TRAFFIC-DAC	1
TRAFFIC-DAS	1
TRAFFIC-DUI OF ALCOHOL	1
TRAFFIC-DUI-Second-Degree Driving While Impaired-2	3
TRAFFIC-DWI-4 DEG DRIVE WHILE IMPAIRED	2
TRAFFIC-Fail to Yield ROW turning left	1
TRAFFIC-OPEN BOTTLE-POSSESS	1
TRAFFIC-SPEED-EXCEED LIMIT	2
Theft-Shoplifting-$500 or less - M	7
Traf - DWI - 2 Deg-Refuse to submit to chemical tes	1
Traffic Collision - Collision with Unattended Vehic	1

Traffic Regulation - Driver Must Carry Proof of Ins	1
Traffic-Drivers License-Driving After Revocation	8
Traffic-Fail To Provide Vehicle Insurance	1
Trespass-Return to Property Within One Year- MS	1
VEH-THEFT-OPERATE W/O OWNER CONSENT-FELONY	1
Violate No Contact Order - Within 10 years of the f	1
Total	**85**
Total number of calls generated in July	**1848**
Total number of administrative tickets in July	**10**
Total number of parking tickets in July	**114**

CITY OF HIBBING —
PERMIT/LICENSE ADMINISTRATIVE SUMMARY

1. Application Information

Permit/License Type: Massage

Applicant Name:
Yuyan Lan

Business/Organization Name (if applicable):
New Star Massage

Application Type:
☐ New ☑ Renewal

Location associated with Permit/License (business/event/premises location, not a private residential address):

2. Permit/License Details

Brief Description / Purpose:
Renewal of massage therapist license

Effective Date/Term:
From August 2026 through July 31, 2027

Applicable Fee: $50

Fee Paid: ☑ Yes ☐ No ☐ N/A

3. Council Action (internal use only)

Date Received by Council Office: 8/6/26 City Council Meeting Date: 9/2/26

Permit No. (if applicable): 26-001481

This summary is intended for public Council materials. The complete application and supporting documentation are maintained by the City in accordance with applicable records and data practices requirements.

At the Regular City Council meeting held September 2, 2026, at 5:00 p.m. in the Hibbing City Council Chamber, _____ offered the following Resolution and moved its adoption:

CITY OF HIBBING

RESOLUTION NO. 26-09-01

RESOLUTION AUTHORIZING THE CITY OF HIBBING TO APPLY FOR AND, UPON APPROVAL, ACCEPT GRANT FUNDING FROM THE DEPARTMENT OF IRON RANGE RESOURCES AND REHABILITATION FOR $350,000 TO SUPPORT CONTINUATION OF THE SANITARY SEWER LINING PROJECT

WHEREAS THE City of Hibbing approves making application for the continuation of the Sanitary Sewer Lining Project; and

WHEREAS THE City of Hibbing agrees to accept funding for the underlying project if approved by the Iron Range Resources and Rehabilitation

NOW BE IT RESOLVED that the authorizing authority of City of Hibbing does adopt this resolution.

Whereupon said Resolution No. 26-09-01 was declared duly passed and adopted this 2nd day of September, 2026.

The motion to adopt the foregoing Resolution was duly supported by _____ and, upon being put to a vote, carried as follows:

FOR ADOPTION:

AGAINST:

ABSTAINED:

ABSENT:

Passed and adopted this 2nd day of September, 2026.

CITY OF HIBBING

ATTEST: _____ _____

Candie Seppala, City Clerk Pete Hyduke, Mayor

Request for Council Action

City Council Action

Description of Agenda Item

The city currently uses this software for asset management, and the current subscription is ending. This would be for a 3-year renewal. We cut out the modules we aren't currently using from the renewal quote. This quote is through the OMNIA purchasing cooperative.

Strategic Initiative

Owner of Agenda Item

Sheena Mulner, Finance Director - Treasurer, 218-312-1602, sheenamulner@hibbingmn.gov

Introduction/Background/Justification/Key Issues/Legal

The city currently uses this software for asset management, and the current subscription is ending. This would be for a 3-year renewal. We cut out the modules we aren't currently using from the renewal quote. This quote is through the OMNIA purchasing cooperative.

Board/Commission/Committee Actions(s):

Budgetary/Fiscal Impact

We budget the SaaS fees under our data processing operating budget.

Action Requested

Please approve

Attachments

1. Q-27411 Vertosoft Quote for City of Hibbing, MN

1602 Village Market Blvd SE, Suite 320
Leesburg, VA20175 USA

Cage Code: 7QV38
UEI Number Y7D5MXRU2839
DUNS# 080431574
Federal Tax ID: 81-3911287
Business Size: Small Business

Date: 8/18/2026, 4:50 PM

Phone: 571 707-4130
Fax: 571-291-4119
Email: opengov@vertosoft.com

Vertosoft Contact: Madison Fusaro
Phone:
Email: madison.fusaro@vertosoft.com

Vertosoft Quote for OpenGov - City of Hibbing, MN

Contract: OMNIA Partners: 159574

Quote #: Q-27411
Expires On: 12/30/2026

Ship To
Nick Arola
City of Hibbing, MN
401 East 21st Street
Hibbing, Minnesota 55746

Quote For:
Name:
Company: City of Hibbing, MN
Email:
Phone:

PAYMENT TERMS	DELIVERY METHOD	PAYMENT METHOD	VERTOSOFT CUST ID	SUPPLIER REF
Net 30	Electronic	Check/ACH/Credit Card		

Overall POP Start Date: 1/1/2027
Overall POP End Date: 12/31/2029

Year 1 1/1/2027 - 12/31/2027

PART #	DESCRIPTION	QTY	UNIT PRICE	EXTENDED
OG-TWAS-B2040M-AR-3Y	Asset Builder - Between $20-40 Million - 3Y	1.00	$2,278.23	$2,278.23
OG-TWAQ-B2040M-AR-3Y	Asset Management - Between $20-40 Million - 3Y	1.00	$15,188.20	$15,188.20
OG-TWAW-B2040M-AR-3Y	Facilities Domain - Between $20-40 Million - 3Y	1.00	$3,787.56	$3,787.56
OG-TWAY-B2040M-AR-3Y	Parks & Recreation Domain - Between $20-40 Million - 3Y	1.00	$2,525.04	$2,525.04
			Year 1 TOTAL:	$23,779.03

Year 2 1/1/2028 - 12/31/2028

PART #	DESCRIPTION	QTY	UNIT PRICE	EXTENDED
OG-TWAS-B2040M-AR-3Y	Asset Builder - Between $20-40 Million - 3Y	1.00	$2,392.14	$2,392.14
OG-TWAQ-B2040M-AR-3Y	Asset Management - Between $20-40 Million - 3Y	1.00	$15,947.61	$15,947.61
OG-TWAW-B2040M-AR-3Y	Facilities Domain - Between $20-40 Million - 3Y	1.00	$3,976.94	$3,976.94
OG-TWAY-B2040M-AR-3Y	Parks & Recreation Domain - Between $20-40 Million - 3Y	1.00	$2,651.29	$2,651.29
			Year 2 TOTAL:	$24,967.98

Year 3 1/1/2029 - 12/31/2029

PART #	DESCRIPTION	QTY	UNIT PRICE	EXTENDED
OG-TWAS-B2040M-AR-3Y	Asset Builder - Between $20-40 Million - 3Y	1.00	$2,511.75	$2,511.75
OG-TWAQ-B2040M-AR-3Y	Asset Management - Between $20-40 Million - 3Y	1.00	$16,744.99	$16,744.99
OG-TWAW-B2040M-AR-3Y	Facilities Domain - Between $20-40 Million - 3Y	1.00	$4,175.78	$4,175.78
OG-TWAY-B2040M-AR-3Y	Parks & Recreation Domain - Between $20-40 Million - 3Y	1.00	$2,783.86	$2,783.86
			Year 3 TOTAL:	$26,216.38

TOTAL: $23,779.03

Annual invoices will be delivered by the start of each consecutive annual period. Payment of invoices shall be annually in advance. Any Professional Services shall be performed pursuant to the attached Statement of Work, if any.

Quote Terms

By purchasing the products and services described in this order form, the Customer is expressly agreeing to the End User Agreement published at https://www.vertosoft.com/terms-and-conditions-opengov

Taxes: Sales tax shall be added at the time of an invoice, unless a copy of a valid tax exemption or resale certificate is provided.
Credit Card Orders: Additional fees may apply if paying by credit card.

All Purchase Orders must include: End User Name, Phone Number, Email Address, Purchase Order Number, Government Contract Number or Our Quote Number, Bill-To and Ship-To Address (Cannot ship to a PO Box), Period of Performance (if applicable), and a Signature of a duly Authorized Representative.

Kelly Grinsteinner

From: Jennifer Hoffman <jhoffman0919@gmail.com>
Sent: Thursday, August 27, 2026 12:13 PM
To: Greg Pruszinske; Candie Seppala; Steven Estey; Nick Arola; Jesse Story; Angela Kleffman; Erik Jankila; Kelly Grinsteinner; Sheena Mulner
Subject: Sketches of Minnesota - Iron Range

Follow Up Flag: Follow up
Flag Status: Flagged

Good afternoon, everyone!

I'm excited to share the invitation below for **Sketches of Minnesota Iron Range**! This promises to be a wonderful evening filled with fun, laughter, and engaging conversations.

Please feel free to share the invitation with anyone you think would enjoy attending. The registration link is included in the invitation, and each guest will need to register individually.

I hope you'll be able to join us! I look forward to seeing you there and enjoying a memorable evening together. Thank you, Jennifer

PS. Candie, would you please share this invitation with Stephanie S., thank you!!

sketches of minnesota
Iron Range

We're excited to announce that **Hibbing and Chisholm have been selected to host a stop on the 2026 Sketches of Minnesota civic improv comedy tour!**

You're invited to join us for a **free, community-inspired evening filled with laughter, conversation, and a little bit of Iron Range magic** on:

Thursday, October 1, 2026
5:00–8:30 PM
Minnesota Discovery Center – Room

1005 Discovery Drive
Chisholm, MN

Reserve your free tickets today!

Presented by the Minnesota Humanities Center in partnership with Danger Boat Productions, **Sketches of Minnesota** uses the power of laughter and improv comedy to celebrate what makes communities unique—and to explore the stories, ideas, challenges, and possibilities that bring us together, and welcoming Chanda Smith Baker, President and CEO of Saint Paul & Minnesota Foundation (SPMF), for her first visit to the Iron Range, along with Maryse Birr, Statewide Partnership Manager- SPMF.

What happens when the Iron Range takes the stage?

The evening will begin with a meal, catered by MDC, followed by facilitated conversations with community members. We'll invite you to share:

- What makes Hibbing and Chisholm—the heart of the Iron Range—so special?
- What do people get wrong about our communities?
- What local issues matter most to you?
- What do you hope the future holds for our region?
- What could we accomplish when we work together?

And then, the fun begins!

The improv troupe will listen to the stories, ideas, and perspectives shared around the tables and transform them into **entirely unscripted comedy on stage**. Nothing is rehearsed. Nothing is scripted. The performance is created in the moment—by the community, for the community.

Beyond the laughter, this unique experience is designed to **spark dialogue, bridge divides, uncover common ground, and inspire new possibilities for working together**. It is an opportunity to celebrate our shared strengths and imagine what we can make possible when we come together.

The Chisholm Community Foundation, Hibbing Foundation, and Saint Paul & Minnesota Foundation would love to have you with us for this special evening.

Come share your stories. Bring your ideas. Laugh with your neighbors. And help us put the Iron Range in the spotlight!

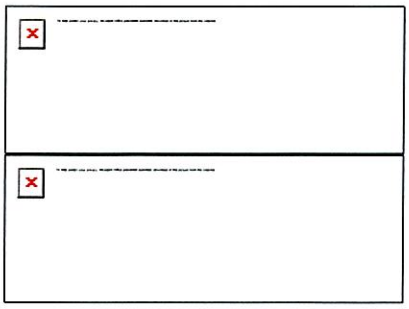
HOPE YOU CAN JOIN US ON OCTOBER 1st! Register today for Sketches of MN on October 1!

Best, Jennifer

Jennifer Hoffman Saccoman,
Executive Director
Hibbing Foundation, an affiliate of Saint Paul & Minnesota Foundation
POB 304
Hibbing, MN 55746

Telephone: 218.262.4212
Website: www.hibbingfoundation.org

Facebook: Hibbing Foundation



CONFIDENTIALITY/PRIVACY NOTICE: This message and any attachments transmitted with it, is for the designated recipient only and may contain privileged or confidential information. If you have received it in error please notify the sender, via return e-mail, immediately and permanently delete the original. Any unauthorized review, disclosure, dissemination, distribution or copying of this e-mail is strictly prohibited. Thank you.

PERA

STATEWIDE VOLUNTARY FIREFIGHTER (SVF) PLAN
ALLOCATION PLAN TEMPLATE

Your Statewide Volunteer Firefighter (SVF) Plan meets the requirements of a combined fire department as defined in Minn. Stat. 477B.041. As a result, the governing body and fire department are eligible to share fire state aid. The provision is effective for Fire State Aid estimated payable next October. To share state aid, law requires that you have an allocation plan. You may use this completed form as your allocation plan. After it is complete, return it to PERA.

1. Municipality: City of Hibbing

2. Are you a combined department: ☒ Yes ☐ No **STOP.** If you answered NO, you are NOT eligible to share state aid.

Number of Active Firefighters in Police & Fire Plan 28 and SVF Plan 10 as of December 31.

3. Distribution method of fire state aid:

- ☐ Percent of Fire State Aid paid to City _____ %
- ☐ Dollar amount paid to City $ _____
- ☒ Transfer formula selected: Specify Formula The city would like to maintain the same split between career Fire and volunteer fire. The formula is volunteer fire is allocated 100% of the supplemental aid and 15.25% of the regular fire aid. The balance should be payable to the city for career fire pensions up to the maximum amount.

4. Length of allocation plan:

Start Date 1/1/2027

End Date 12/31/2029

5. Date allocation plan approved by governing body: _____

6. Notice given to SVF Firefighters:

- ☐ Yes. Date delivered to SVF Firefighters _____
- ☐ Provide a copy of notice to PERA

7. Signature of municipal clerk or secretary:

_____
Name (please print)

_____
Signature Title

A closer look at your numbers:

Here's how we arrived at the amount of state aid you have to share. The law requires the maximum amount of state aid that may be shared is the lesser of these three calculations:

1. *Employer contributions for firefighters paid proceeding calendar year* $472,501
2. *Amount of Fire State Aid estimated due October 1* $114,035
3. *Fire State Aid plus Supplemental Aid less Financial Requirement* $96,140

See the email for the explanation of what each of these terms mean.

RETURN COMPLETED FORM TO:

Email: PERASVF@mnpera.org
Or mail to: PERA, ATTN: SVF
60 Empire Drive, Suite 200, St. Paul, MN 55103-2088

MINNESOTA LAWFUL GAMBLING

LG240B Application to Conduct Excluded Bingo — No Fee

ORGANIZATION INFORMATION

Organization Name: Hibbing Band Parent Organization
Previous Gambling Permit Number:
Minnesota Tax ID Number, if any:
Federal Employer ID Number (FEIN), if any: 41-1362217
Mailing Address: 800 East 21st Street Music Room (Berg)
City: Hibbing State: MN Zip: 55746 County: St Louis
Name of Chief Executive Officer (CEO): Julie Jones treasurer
CEO Daytime Phone: 218-969-2336 CEO Email: jugiejones@hotmail.com
(permit will be emailed to this email address unless otherwise indicated below)
Email permit to (if other than the CEO):

NONPROFIT STATUS

Type of Nonprofit Organization (check one):

☐ Fraternal ☐ Religious ☐ Veterans ☒ Other Nonprofit Organization

Attach a copy of at least one of the following showing proof of nonprofit status:

(DO NOT attach a sales tax exempt status or federal employer ID number, as they are not proof of nonprofit status.)

☐ **Current calendar year Certificate of Good Standing**
Don't have a copy? This certificate must be obtained each year from:

MN Secretary of State, Business Services Division
60 Empire Drive, Suite 100
St. Paul, MN 55103

Secretary of State website, phone numbers:
www.sos.state.mn.us
651-296-2803, or toll free 1-877-551-6767

☐ **Internal Revenue Service-IRS income tax exemption 501(c) letter in your organization's name**
Don't have a copy? Obtain a copy of your federal income tax exempt letter by having an organization officer contact the IRS at 877-829-5500.

☐ **Internal Revenue Service-Affiliate of national, statewide, or international parent nonprofit organization (charter)**
If your organization falls under a parent organization, attach copies of both of the following:
1. IRS letter showing your parent organization is a nonprofit 501(c) organization with a group ruling; and
2. the charter or letter from your parent organization recognizing your organization as a subordinate.

EXCLUDED BINGO ACTIVITY

Has your organization held a bingo event in the current calendar year? ☐ Yes ☒ No

If yes, list the dates when bingo was conducted:

The proposed bingo event will be:

☒ one of four or fewer bingo events held this year. Dates: 10/29 11/5 11/12 11/19

-OR-

☐ conducted on up to 12 consecutive days in connection with a:

☐ county fair Dates:

☐ civic celebration Dates:

☐ Minnesota State Fair Dates:

Person in charge of bingo event: Amy Sirjord Daytime Phone: 218-969-1416

Name of premises where bingo will be conducted: Elks

Premises street address:

City: Hibbing If township, township name: County: St Louis

LG240B Application to Conduct Excluded Bingo

LOCAL UNIT OF GOVERNMENT ACKNOWLEDGMENT (required before submitting application to the Minnesota Gambling Control Board)

CITY APPROVAL for a gambling premises located within city limits

On behalf of the city, I approve this application for excluded bingo activity at the premises located within the city's jurisdiction.

Print City Name: _____

Signature of City Personnel:

_____

Title: _____ Date: _____

The city or county must sign before submitting application to the Gambling Control Board.

COUNTY APPROVAL for a gambling premises located in a township

On behalf of the county, I approve this application for excluded bingo activity at the premises located within the county's jurisdiction.

Print County Name: _____

Signature of County Personnel:

_____

Title: _____ Date: _____

TOWNSHIP (if required by the county)
On behalf of the township, I acknowledge that the organization is applying for excluded bingo activity within the township limits. (A township has no statutory authority to approve or deny an application, per Minnesota Statutes, Section 349.213.)

Print Township Name: _____

Signature of Township Officer: _____

Title: _____ Date: _____

CHIEF EXECUTIVE OFFICER'S SIGNATURE (required)

The information provided in this application is complete and accurate to the best of my knowledge.

Chief Executive Officer's Signature: Julie Jones Date: 8/28/26
(Signature must be CEO's signature; designee may not sign)

Print Name: Julie Jones

MAIL OR FAX APPLICATION & ATTACHMENTS

Mail or fax application and a copy of your proof of nonprofit status to:

Minnesota Gambling Control Board
1711 West County Road B, Suite 300 South
Roseville, MN 55113
Fax: 651-639-4032

An excluded bingo permit will be mailed to your organization. Your organization must keep its bingo records for 3-1/2 years.

Questions?
Call a Licensing Specialist at 651-539-1900.

Bingo hard cards and bingo number selection devices may be borrowed from another organization authorized to conduct bingo. Otherwise, bingo hard cards, bingo paper, and bingo number selection devices must be obtained from a distributor licensed by the Minnesota Gambling Control Board. To find a licensed distributor, go to ***www.mn.gov/gcb*** and click on ***Distributors*** under the ***LIST OF LICENSEES*** tab, or call 651-539-1900.

This form will be made available in alternative format (i.e. large print, braille) upon request.

Data privacy notice: The information requested on this form (and any attachments) will be used by the Gambling Control Board (Board) to determine your organization's qualifications to be involved in lawful gambling activities in Minnesota. Your organization has the right to refuse to supply the information; however, if your organization refuses to supply this information, the Board may not be able to determine your organization's qualifications and, as a consequence, may refuse to issue a permit. If your organization supplies the information requested, the Board will be able to process the application. Your organization's name and address will be public information when received by the Board. All other information provided will be private data about your organization until the Board issues the permit. When the Board issues the permit, all information provided will become public. If the Board does not issue a permit, all information provided remains private, with the exception of your organization's name and address which will remain public. Private data about your organization are available to Board members, Board staff whose work requires access to the information; Minnesota's Department of Public Safety; Attorney General; Commissioners of Administration, Minnesota Management & Budget, and Revenue; Legislative Auditor, national and international gambling regulatory agencies; anyone pursuant to court order; other individuals and agencies specifically authorized by state or federal law to have access to the information; individuals and agencies for which law or legal order authorizes a new use or sharing of information after this notice was given; and anyone with your written consent.

An equal opportunity employer

City of Hibbing

SPECIAL EVENT Permit Application

☑ **All applications for Special Events** to be held within the City of Hibbing shall be reviewed by the City departments that will be involved during the operation of the Event. Prior to review, all application information must be completed. After Departments Review, the applications will be submitted to the City Council for final approval.

☑ **Deadlines: Applications must be submitted 60 days prior to the event.**

☑ RETURN APPLICATION to the City Hall Council Office
DATE RECEIVED BY COUNCIL OFFICE: _____

Name/Description of Event:	MN Deer Hunters
Date of Event:	Oct 7, 2026
Location of Event:	Memorial Bldg
Organizer:	Liz Muhvich
Organizer Contact Information:	Cell Phone: 218-391-3566

☑ **Department Review.** If applicable and where noted in the application form, the event organizer will also need to contact City department heads

DEPARTMENT	CHECK IN WITH CITY CONTACTS TO DISCUSS YOUR NEEDS FOR YOUR EVENT	CONTACT #
Hibbing Police Dept.	**Police Chief Steve Estey**	**218-262-0285**
Fire Department	**Fire Marshal Shawn Nickila**	**218-421-3942**
Sanitation Dept.	**John Yuretich/Bob Kobal**	**218-362-5991**
Public Works Dept.	**John Yuretich/Bob Kobal**	**218-362-5991**
City Services	**Nick Arola**	**218-362-5951**

City of Hibbing

SPECIAL EVENT PERMIT APPLICATION

☐ **Applications MUST BE FILLED OUT COMPLETELY & ALL NECESSARY REQUIREMENTS ATTACHED**

LOCATION OF EVENT: Memorial Building

TITLE, PURPOSE, AND BRIEF DESCRIPTION OF EVENT:
Hibbing Chisholm Chapter MN Deer Hunters Annual Membership Banquet
Date of Event: 10/07/26
Refer media or citizen inquires to: Liz Munvich Telephone: 218-391-3506
APPLICANT AUTHORIZATION:
Attach a written communication from the organization(s) in whose name the event will be advertised which authorizes you, the applicant, to apply for this special event permit on its or their behalf. Hibbing/Chisholm Chapter MN Deer Hunters Association
Applicants Name & Title:
Address:
Mailing Address: PO Box 12
Affiliation: MN Deer Hunters Association
Telephone: (day) 218-391-3506 (evening)
EVENT PRINCIPALS:
On the next sheet, please list names, addresses, and telephone numbers of all the principals involved in any way in the proposed special event. Include professional event organizers, event promoters, financial underwriters, commercial sponsors, charitable agencies for whose benefits the event are being produced, the organizations in whose name the event is being advertised, and all other administratively, financially, or organizationally involved as principals in the production of the proposed special event. Make additional copies of the next sheet as needed to include all the principals involved in the proposed special event.

Name: Liz Muhvich	
Organization/Business/Agency/Affiliation: President	
Mailing Address: 21004 First Ave Hibbing MN 55746	
Daytime Phone: 218-391-3506	Evening Phone: Other:
Title and Functional Responsibility with Regard to the Event: President & Banquet Coordinator	
Will this person have authority to cancel or greatly modify event plans?	☒ Yes ☐ No
Will this person be present at the event area or areas and in charge of the event at all times	☒ Yes ☐ No

Name: Greg Hoag	
Organization/Business/Agency/Affiliation:	
Mailing Address:	
Daytime Phone: 218-929-1939	Evening Phone: Other:
Title and Functional Responsibility with Regard to the Event: Vice President & Banquet Coordinator	
Will this person have authority to cancel or greatly modify event plans?	☒ Yes ☐ No
Will this person be present at the event area or areas and in charge of the event at all times	☒ Yes ☐ No

Name:	
Organization/Business/Agency/Affiliation:	
Mailing Address:	
Daytime Phone:	Evening Phone: Other:
Title and Functional Responsibility with Regard to the Event:	
Will this person have authority to cancel or greatly modify event plans?	☐ Yes ☐ No
Will this person be present at the event area or areas and in charge of the event at all times	☐ Yes ☐ No

REQUESTED EVENT COMPONENTS:

REQUESTED DAY AND DATE (*first choice*):

Alternate days and dates:

- none
- _____
- _____

REQUESTED HOURS OF OPERATION:

From: 7:00 (a.m.) / p.m. To 10:00 a.m. / (p.m.)

SET UP beginning Day and Date

****Indicate the time at which any unit of an event will begin to assemble at such area**

Day: 10/07/26 Time: 7:00 (a.m.) / p.m.

Describe the number and type of animals to be used in the Event ☒ Not Applicable

**If the event is a Circus, Carnival, Menagerie, or Like Exhibition: The license fee payable to the City of Hibbing is $60.00 for the first day and $12.00 for each additional day.

☐ If applicable, license fee to be included when submitting the application

See City Code Chapter 6, Section 6.23 for additional information.

Attach a Draft of the Entry Form for Participants / Spectators ☐ Attached

Anticipated number of Participants: Approx 350 Spectators: _____

****INSURANCE**

☒ Attach to this application either an Insurance policy or a certificate of insurance including the policy number, amount, and the provision that the City of Hibbing is included as an additional insured.

SANITATION: We have been holding our event at the memorial Building for a number of years. No changes planned.

- ☐ Attach your "Plan for Clean-Up / Material Preservation".
- ☐ Include number, type and location of trash containers to be provided for the event.
- ☐ Indicate who and how many will be responsible for emptying and cleaning up around containers during the event.
- ☐ Indicate who and how many will be responsible for cleaning up after animals if they are used in the event.
- ☐ Indicate who and how many will be responsible for cleaning up the event after the event.
- ☐ Described the number, type and location of portable toilets to be provided for the event (or permanent toilets to be used for the event).
- ☐ Include any other plan you have for ensuring post-event cleanliness and material preservation of city facilities, equipment, premises and streets.

MAP (Noting the following items):

Check off below items that apply to your event. Everything is located inside the memorial building as has been done in prior years.
Indicate these items on attached separate maps. Use, where necessary, a to-scale drawing.

- ☐ If a route is involved, the beginning area, the route (indicate directions with arrows), and the finished area;
- ☐ If a route is involved, the places where buses or trains need to be considered;
- ☐ If a route is involved, it will expedite approval of your event if you attach separate maps giving two or three alternate routes;
- ☐ **Indicate if Roads and/or Sidewalks will be Closed**
  The applicant will be required to explain how motorists and business owners and residents will be notified in advance of the event.
- ☐ Barricades, cones, safety, portable parking signs (note location - *provided by Public Works*)
- ☐ If a relay is involved, indicate hand-off points;
- ☐ Entertainment or stage locations (grandstand operators should provide you with a to-scale drawing;
- ☐ Alcoholic beverage concession areas; ***location must be specified***
- ☐ Non-alcoholic concession areas;
- ☐ Food concession areas;
- ☐ General merchandise concession areas;
- ☐ Portable toilet facilities (indicate number);
- ☐ First aid facilities;
- ☐ Event participant and/or spectator parking areas;
- ☐ Event organizers command post;
- ☐ Fireworks or pyrotechnics site; (***Must contact Fire Marshal***)
- ☐ Vehicle fuel handling site;
- ☐ Cooking areas;
- ☐ Tables, enclosures, etc.;

☐ Temporary or permanent structures constructed for the event;	
☐ Site of electrical wiring to be installed for the event;	
☐ Trash containers (indicate number): _____	
☐ Other. Please describe:	
AVAILABILITY OF FOOD, BEVERAGES AND/OR ENTERTAINMENT	
ENTERTAINMENT:	If there will be music, sound amplification or any other noise impact, please describe, including the intended hours of the music, sound or noise. Sound system installed in Arena.
	If a casino party, a dance or live entertainment is a part of your event, please describe: n/a
	Please describe all of the activities of your event for which a license is required, for example, a cabaret license, a caterer's license, a general merchandise concession license, peddler or transient merchant license, etc. (*attach to this application all required licenses)* Gambling license previously approved.
ALCOHOL:	Alcoholic Beverages to be served? ☒ Yes ☐ No Provided by third party Temporary Liquor License Applied For? BEER ☐ *Yes* ☐ *No* COMMUNITY FESTIVAL LICENSE ☐ *Yes* ☐ *No* TEMPORARY ON SALE ☐ *Yes* ☐ *No* Organization Applying for License for Alcoholic Beverages:
	Describe what system will be used to ensure that alcoholic beverages will be consumed only by those persons 21 years and older.
	Describe how, where, when and by whom the alcoholic beverages will be served.
	List of people who will be selling the alcohol: Have they attended server training? ☐ Yes ☐ No

FOOD:	Food and/or non-alcoholic beverages to be served? ☒ Yes ☐ No Provided by third party
	Describe sanitation measures, food handling procedures and the nature of the food (such as pre-packaged foods, hot dogs, pre-mixed sodas, unpeeled fruit, raw meats, vegetables, fish or peeled and cut fruits).
	A health permit may be required from either the State of MN or St. Louis County. ☐ Attach a copy of your health permit to this application.
	If you intend to cook food in the event area, describe your area layout, including fuel or If electrical sources to be used.

SECURITY AND SAFETY PROCEDURES:

The Hibbing Police Department will determine the minimum number of private security guards and police officers required to adequately staff your event. If the prescribed number of private security guards is not provided or proves inadequate, the Hibbing Police Department maintains the right to shut down any or all components of the event and/or to provide additional police services that may be billed directly to the host organization.

Describe your proposed procedures for set-up operation, internal security and crowd control.
Banquet requires pre-registration no walk ins admitted. Members are required to pick up registration packet as they enter arena.

If the event is to occur at night, describe how you are going to light the event area in order to increase the safety of participants and spectators coming to and leaving the event.
Inside Memorial Building

If your event includes vehicles or animals, describe the minimum and maximum speeds of the event and the minimum and maximum intervals of space to be maintained between units.
N/a

☐ Attach to this application a copy of your building permit (or permits) if you are installing any electrical wiring on a temporary or permanent basis and/or if you are building any temporary or permanent structures such as bleachers, scaffolding, a grandstand, reviewing stands, stages or platforms.

☐ Attach a copy of your fire department permit or permits to this application if you will use parade floats; an open flame; fireworks or pyrotechnics; vehicle fuels; cooking facilities; enclosures (and tables within those enclosures), tents, air-supported structures, canopies, or any fabric shelters.

N/a

Give names, address and phone numbers of the agency or agencies which will provide first aid staff and equipment. Attach additional sheets if necessary.

Name of Agency: N/a

Name of Representative: _____

Address: _____

Phone Numbers: _____

Indicate medical services that will provided for the event.

Medical Service	How Provided: N/a
☐ Ambulance	_____
☐ Doctors	_____
☐ Nurses	_____
☐ Paramedics	_____

HIBBING FIRE DEPARTMENT REQUIREMENTS

In accordance with Minnesota State Fire Code Section 403.1 the Fire Marshal shall evaluate the need for requiring fire personnel to be in attendance of a public assembly for the following reasons: keep diligent watch for fires, obstruction to means of egress and other hazards and shall take prompt measures for remediation of hazards. The Hibbing Fire Marshal maintains the right to require fire service personnel to staff special events that are construed as a potential hazard to the public safety. These additional services may be billed directly to the host.

In accordance with Minnesota State Fire Code Section 403.2; for an indoor special permit public assembly, the Fire Marshal shall receive a floor plan with dimensions of the floor, seating, and exit widths. A total number of participants shall be submitted in order to evaluate the occupancy load and safe egress out of the building. The Fire Marshal shall assign an occupancy load for the event which shall be adhered to. All event floor plan layouts must be approved by the Fire Marshal and all special permit public events are subject to inspection by the Fire Marshal the day of the event. The Fire Marshal and/or designee reserves the right, under MN State Fire code, to stop and/or remedy any unsafe actions up to and including the cancelling of the event.

VENDORS OR CONCESSIONAIRES:

Describe what vendors or concessionaires you will allow in conjunction with the event and the purpose or purposes of these concessions.

No concessions.

Describe how you intend to regulate, monitor and control the type, number and quality of vendors/concessionaires who you may permit to operate in conjunction with the event.

N/a

MITIGATION OF THE IMPACT ON OTHERS:

Describe how you intend to mitigate the impact of the special event on businesses, churches, neighbors, motorists, mass transit users and others. Attach additional sheets, if necessary entitled "Mitigation of the Impact of Others."

Inside Event

OTHER PERTINENT INFORMATION:

LG220 Application for Exempt Permit

An exempt permit may be issued to a nonprofit organization that:
- conducts lawful gambling on five or fewer days, and
- awards less than $50,000 in prizes during a calendar year.

If total raffle prize value for the calendar year will be $1,500 or less, contact the Licensing Specialist assigned to your county by calling 651-539-1900.

Application Fee (non-refundable)

Applications are processed in the order received. If the application is postmarked or received 30 days or more before the event, the application fee is **$100**; otherwise the fee is **$150**.

Due to the high volume of exempt applications, payment of additional fees prior to 30 days before your event will not expedite service, nor are telephone requests for expedited service accepted.

ORGANIZATION INFORMATION

Organization Name: hibbing Chisholm Youth hockey
Previous Gambling Permit Number: X-01521-26-034
Minnesota Tax ID Number, if any: _____
Federal Employer ID Number (FEIN), if any: 41-1456753
Mailing Address: Po Box 193
City: hibbing State: MN Zip: 55746 County: St. Louis
Name of Chief Executive Officer (CEO): Dara Swanson
CEO Daytime Phone: 218-248-4319 CEO Email: DFisher55746@gmail.com
(permit will be emailed to this email address unless otherwise indicated below)
Email permit to (if other than the CEO): _____

NONPROFIT STATUS

Type of Nonprofit Organization (check one):
☐ Fraternal ☐ Religious ☐ Veterans ☒ Other Nonprofit Organization

Attach a copy of one of the following showing proof of nonprofit status:

(DO NOT attach a sales tax exempt status or federal employer ID number, as they are not proof of nonprofit status.)

☐ **A current calendar year Certificate of Good Standing**
Don't have a copy? Obtain this certificate from:
MN Secretary of State, Business Services Division
60 Empire Drive, Suite 100
St. Paul, MN 55103
Secretary of State website, phone numbers:
www.sos.state.mn.us
651-296-2803, or toll free 1-877-551-6767

☐ **IRS income tax exemption (501(c)) letter in your organization's name**
Don't have a copy? To obtain a copy of your federal income tax exempt letter, have an organization officer contact the IRS toll free at 1-877-829-5500.

☐ **IRS - Affiliate of national, statewide, or international parent nonprofit organization (charter)**
If your organization falls under a parent organization, attach copies of both of the following:
1. IRS letter showing your parent organization is a nonprofit 501(c) organization with a group ruling; and
2. the charter or letter from your parent organization recognizing your organization as a subordinate.

GAMBLING PREMISES INFORMATION

Name of premises where the gambling event will be conducted (for raffles, list the site where the drawing will take place): MN North College
Physical Address (do not use P.O. box): 1515 E 25th St

Check one:
☒ City: hibbing Zip: 55746 County: St. Louis
☐ Township: _____ Zip: _____ County: _____

Date(s) of activity (for raffles, indicate the date of the drawing): Feb 6th 2027

Check each type of gambling activity that your organization will conduct:
☐ Bingo ☐ Paddlewheels ☐ Pull-Tabs ☐ Tipboards ☒ Raffle

Gambling equipment for bingo paper, bingo boards, raffle boards, paddlewheels, pull-tabs, and tipboards must be obtained from a distributor licensed by the Minnesota Gambling Control Board. EXCEPTION: Bingo hard cards and bingo ball selection devices may be borrowed from another organization authorized to conduct bingo. To find a licensed distributor, go to ***www.mn.gov/gcb*** and click on ***Distributors*** under the ***List of Licensees*** tab, or call 651-539-1900.

LG220 Application for Exempt Permit

LOCAL UNIT OF GOVERNMENT ACKNOWLEDGMENT (required before submitting application to the Minnesota Gambling Control Board)

CITY APPROVAL for a gambling premises located within city limits

☐ The application is acknowledged with no waiting period.

☐ The application is acknowledged with a 30-day waiting period, and allows the Board to issue a permit after 30 days (60 days for a 1st class city).

☐ The application is denied.

Print City Name: _____

Signature of City Personnel:

_____

Title: _____ Date: _____

The city or county must sign before submitting application to the Gambling Control Board.

COUNTY APPROVAL for a gambling premises located in a township

☐ The application is acknowledged with no waiting period.

☐ The application is acknowledged with a 30-day waiting period, and allows the Board to issue a permit after 30 days.

☐ The application is denied.

Print County Name: _____

Signature of County Personnel:

_____

Title: _____ Date: _____

TOWNSHIP (if required by the county)
On behalf of the township, I acknowledge that the organization is applying for exempted gambling activity within the township limits. (A township has no statutory authority to approve or deny an application, per Minn. Statutes, section 349.213.)

Print Township Name: _____

Signature of Township Officer: _____

Title: _____ Date: _____

CHIEF EXECUTIVE OFFICER'S SIGNATURE (required)

The information provided in this application is complete and accurate to the best of my knowledge. I acknowledge that the financial report will be completed and returned to the Board within 30 days of the event date.

Chief Executive Officer's Signature: Dara Swanson Date: 8/27/26

(Signature must be CEO's signature; designee may not sign)

Print Name: Dara Swanson

REQUIREMENTS

Complete a separate application for:

- all gambling conducted on two or more consecutive days; or
- all gambling conducted on one day.

Only one application is required if one or more raffle drawings are conducted on the same day.

Financial report to be completed within 30 days after the gambling activity is done:
A financial report form will be mailed with your permit. Complete and return the financial report form to the Gambling Control Board.

Your organization must keep all exempt records and reports for 3-1/2 years (Minn. Statutes, section 349.166, subd. 2(f)).

MAIL APPLICATION AND ATTACHMENTS

Mail application with:

____ a copy of your proof of nonprofit status; and

____ application fee (non-refundable). If the application is postmarked or received 30 days or more before the event, the application fee is **$100**; otherwise the fee is **$150**. Make check payable to **State of Minnesota**.

To: Minnesota Gambling Control Board
1711 West County Road B, Suite 300 South
Roseville, MN 55113

Questions?
Call the Licensing Section of the Gambling Control Board at 651-539-1900.

Data privacy notice: The information requested on this form (and any attachments) will be used by the Gambling Control Board (Board) to determine your organization's qualifications to be involved in lawful gambling activities in Minnesota. Your organization has the right to refuse to supply the information; however, if your organization refuses to supply this information, the Board may not be able to determine your organization's qualifications and, as a consequence, may refuse to issue a permit. If your organization supplies the information requested, the Board will be able to process the application. Your organization's name and address will be public information when received by the Board. All other information provided will be private data about your organization until the Board issues the permit. When the Board issues the permit, all information provided will become public. If the Board does not issue a permit, all information provided remains private, with the exception of your organization's name and address which will remain public. Private data about your organization are available to Board members, Board staff whose work requires access to the information; Minnesota's Department of Public Safety; Attorney General; Commissioners of Administration, Minnesota Management & Budget, and Revenue; Legislative Auditor, national and international gambling regulatory agencies; anyone pursuant to court order; other individuals and agencies specifically authorized by state or federal law to have access to the information; individuals and agencies for which law or legal order authorizes a new use or sharing of information after this notice was given; and anyone with your written consent.

This form will be made available in alternative format (i.e. large print, braille) upon request.

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MINNESOTA LAWFUL GAMBLING

LG215 Lease for Lawful Gambling Activity

LEASE INFORMATION

Organization: Climb Theatre	License/Site Number: 02002	Daytime Phone: 702/241-7594
Address: 6415 Carmen Ave, E.	City: Inver Grove Heights	State: MN Zip: 55076
Name of Leased Premises: Hibbing Bowling Center	Street Address: 1929 5th Ave. East	
City: Hibbing	State: MN Zip: 55746	Daytime Phone: 218/262-1281
Name of Legal Owner: YouBetcha Bowling LLC	Business/Street Address: 1929 5th Ave. East	
City: Hibbing	State: MN Zip: 55746	Daytime Phone: 563/580-4228
Name of Lessor **(if same as legal owner, write "SAME")**:	Address:	
City: Same	State: Zip:	Daytime Phone:

Check applicable item:

☐ **New or amended lease.** Effective date: _____. Submit changes at least ten days **before** the effective date of the change.

☐ **New owner.** Effective date: _____. Submit new lease **within** ten days after new lessor assumes ownership.

CHECK ALL ACTIVITY THAT WILL BE CONDUCTED (no lease required for raffles)

☐ Pull-Tabs (paper)

☒ Pull-Tabs (paper) with dispensing device

☐ Bar Bingo ☐ Bingo

☐ Tipboards

☐ Paddlewheel ☐ Paddlewheel with table

☒ Electronic Pull-Tabs

☒ Electronic Linked Bingo

Electronic games may only be conducted:

1. at a premises licensed for the on-sale of intoxicating liquor or the on-sale of 3.2% malt beverages; or
2. at a premises where bingo is conducted as the primary business and has a seating capacity of at least 100.

PULL-TAB, TIPBOARD, AND PADDLEWHEEL RENT (separate rent for booth and bar ops)

BOOTH OPERATION: Some or all sales of gambling equipment are conducted by an employee/volunteer of a licensed organization at the leased premises.

ALL GAMES, including electronic games: Monthly rent to be paid: ____%, not to exceed **10%** of gross profits for that month.

- Total rent paid from all organizations for only booth operations at the leased premises **may not exceed $1,750**.
- The rent cap does not include BAR OPERATION rent for electronic games conducted by the lessor.

BAR OPERATION: All sales of gambling equipment conducted by the lessor or lessor's employee.

ELECTRONIC GAMES: Monthly rent to be paid: 15 %, not to exceed **15%** of the gross profits for that month from electronic pull-tab games and electronic linked bingo games.

ALL OTHER GAMES: Monthly rent to be paid: 20 %, not to exceed **20%** of gross profits from all other forms of lawful gambling.

- If any booth sales conducted by a licensed organization at the premises, rent may not exceed **10%** of gross profits for that month and is subject to booth operation **$1,750** cap.

BINGO RENT (for leased premises where bingo is the primary business conducted, such as bingo hall)

Bingo rent is limited to one of the following:

- Rent to be paid: _____ %, not to exceed **10%** of the monthly gross profit from all lawful gambling activities held during bingo occasions, excluding bar bingo.

  - OR -

- Rate to be paid: $ _____ per square foot, not to exceed 110% of a comparable cost per square foot for leased space, as approved by the director of the Gambling Control Board. The lessor must attach documentation, verified by the organization, to confirm the comparable rate and all applicable costs to be paid by the organization to the lessor.
  - ⇒ **Rent may not be paid for bar bingo.**
  - ⇒ Bar bingo does not include bingo games linked to other permitted premises.

LEASE TERMINATION CLAUSE (must be completed)

The lease may be terminated by either party with a written 30 day notice. Other terms:

LG215 Lease for Lawful Gambling Activity

Lease Term: The term of this agreement will be concurrent with the premises permit issued by the Gambling Control Board (Board).

Management: The owner of the premises or the lessor will not manage the conduct of lawful gambling at the premises. The organization may not conduct any activity on behalf of the lessor on the leased premises.

Participation as Players Prohibited: The lessor will not participate directly or indirectly as a player in any lawful gambling conducted on the premises. The lessor's immediate family and any agents or gambling employees of the lessor will not participate as players in the conduct of lawful gambling on the premises, except as authorized by Minnesota Statutes, Section 349.181.

Illegal Gambling: The lessor is aware of the prohibition against illegal gambling in Minnesota Statutes 609.75, and the penalties for illegal gambling violations in Minnesota Rules 7865.0220, Subpart 3. In addition, the Board may authorize the organization to withhold rent for a period of up to 90 days if the Board determines that illegal gambling occurred on the premises or that the lessor or its employees participated in the illegal gambling or knew of the gambling and did not take prompt action to stop the gambling. Continued tenancy of the organization is authorized without payment of rent during the time period determined by the Board for violations of this provision, as authorized by Minnesota Statutes, Section 349.18, Subd. 1(a).

To the best of the lessor's knowledge, the lessor affirms that any and all games or devices located on the premises are not being used, and are not capable of being used, in a manner that violates the prohibitions against illegal gambling in Minnesota Statutes, Section 609.75.

Notwithstanding Minnesota Rules 7865.0220, Subpart 3, an organization must continue making rent payments under the terms of this lease, if the organization or its agents are found to be solely responsible for any illegal gambling, conducted at this site, that is prohibited by Minnesota Rules 7861.0260, Subpart 1, item H, or Minnesota Statutes, Section 609.75, unless the organization's agents responsible for the illegal gambling activity are also agents or employees of the lessor.

The lessor must not modify or terminate the lease in whole or in part because the organization reported, to a state or local law enforcement authority or to the Board, the conduct of illegal gambling activity at this site in which the organization did not participate.

Other Prohibitions: The lessor will not impose restrictions on the organization with respect to providers (distributor or linked bingo game provider) of gambling-related equipment and services or in the use of net profits for lawful purposes.

The lessor, the lessor's immediate family, any person residing in the same residence as the lessor, and any agents or employees of the lessor will not require the organization to perform any action that would violate statute or rule. The lessor must not modify or terminate this lease in whole or in part due to the lessor's violation of this provision. If there is a dispute as to whether a violation occurred, the lease will remain in effect pending a final determination by the Compliance Review Group (CRG) of the Board. The lessor agrees to arbitration when a violation of this provision is alleged. The arbitrator shall be the CRG.

Access to Permitted Premises: Consent is given to the Board and its agents, the commissioners of revenue and public safety and their agents, and law enforcement personnel to enter and inspect the permitted premises at any reasonable time during the business hours of the lessor. The organization has access to the premises during any time reasonable and when necessary for the conduct of lawful gambling.

Lessor Records: The lessor must maintain a record of all money received from the organization, and make the record available to the Board and its agents, and the commissioners of revenue and public safety and their agents upon demand. The record must be maintained for 3-1/2 years.

Rent All-Inclusive: Amounts paid as rent by the organization to the lessor are all-inclusive. No other services or expenses provided or contracted by the lessor may be paid by the organization, including but not limited to:

- trash removal
- electricity, heat
- snow removal
- storage
- janitorial and cleaning services
- other utilities or services
- lawn services
- security, security monitoring
- cost of any communication network or service required to conduct electronic pull-tabs games or electronic bingo
- in the case of bar operations, cash shortages.

Any other expenditures made by an organization that is related to a leased premises must be approved by the director of the Board. Rent payments may not be made to an individual.

ACKNOWLEDGMENT OF LEASE TERMS

I affirm that this lease is the total and only agreement between the lessor and the organization, and that all obligations and agreements are contained in or attached to this lease and are subject to the approval of the director of the Gambling Control Board.

Other terms of the lease:

Signature of Lessor: Date: 8/20/26	Signature of Organization Official (Lessee): Greg Violette Date: 8/20/26
Print Name and Title of Lessor: Jesse Keller - Owner	Print Name and Title of Lessee: Greg Violette Gambling Mgr. 8/20/26

Questions? Contact the Licensing Section, Gambling Control Board, at 651-539-1900. This publication will be made available in alternative format (i.e. large print, braille) upon request. **Data privacy notice:** The information requested on this form and any attachments will become public information when received by the Board, and will be used to determine your compliance with Minnesota statutes and rules governing lawful gambling activities.

Mail or fax lease to:
Minnesota Gambling Control Board
1711 W. County Road B, Suite 300 South
Roseville, MN 55113
Fax: 651-639-4032

LG214 Premises Permit Application

Annual Fee $150 (NON-REFUNDABLE)

REQUIRED ATTACHMENTS TO LG214

1. If the premises is leased, attach a copy of your lease. Use **LG215 Lease for Lawful Gambling Activity.**
2. $150 annual premises permit fee, for each permit (non-refundable). Make check payable to "**State of Minnesota.**"

Mail the application and required attachments to:
Minnesota Gambling Control Board
1711 West County Road B, Suite 300 South
Roseville, MN 55113

Questions? Call 651-539-1900 and ask for Licensing.

ORGANIZATION INFORMATION

Organization Name: Climb Theatre License Number: 02002

Chief Executive Officer (CEO) Afton Benson Daytime Phone: 763/957-0591

Gambling Manager: Greg Violette Daytime Phone: 702/241-7594

GAMBLING PREMISES INFORMATION

Current name of site where gambling will be conducted: Checco's Tavern

List any previous names for this location:

Street address where premises is located: 1929 5th Avenue East
(Do not use a P.O. box number or mailing address.)

City: **OR** Township:	County:	Zip Code:
Hibbing	St. Louis	55746

Does your organization own the building where the gambling will be conducted?

☐ **Yes** ☒ **No** **If no,** attach LG215 Lease for Lawful Gambling Activity.

A lease is not required if only a raffle will be conducted.

Is any other organization conducting gambling at this site? ☐ Yes ☒ No ☐ Don't know

Note: Bar bingo can only be conducted at a site where another form of lawful gambling is being conducted by the applying organization or another permitted organization. Electronic games can only be conducted at a site where paper pull-tabs are played.

Has your organization previously conducted gambling at this site? ☐ Yes ☒ No ☐ Don't know

GAMBLING BANK ACCOUNT INFORMATION; MUST BE IN MINNESOTA

Bank Name: Miners National Bank Bank Account Number: 021303 3

Bank Street Address: 401 Grant Ave. City: Eveleth State: **MN** Zip Code: 55734

ALL TEMPORARY AND PERMANENT OFF-SITE STORAGE SPACES

Address (Do not use a P.O. box number):	City:	State:	Zip Code:
		MN	
		MN	
		MN	

ACKNOWLEDGMENT BY LOCAL UNIT OF GOVERNMENT: APPROVAL BY RESOLUTION

CITY APPROVAL for a gambling premises located within city limits

City Name: _____

Date Approved by City Council: _____

Resolution Number: _____
(If none, attach meeting minutes.)

Signature of City Personnel:

_____

Title: _____ Date Signed: _____

Local unit of government must sign.

COUNTY APPROVAL for a gambling premises located in a township

County Name: _____

Date Approved by County Board: _____

Resolution Number: _____
(If none, attach meeting minutes.)

Signature of County Personnel:

_____

Title: _____ Date Signed: _____

TOWNSHIP NAME: _____

Complete below only if required by the county.
On behalf of the township, I acknowledge that the organization is applying to conduct gambling activity within the township limits. (A township has no statutory authority to approve or deny an application, per Minnesota Statutes 349.213, Subd. 2.)

Print Township Name: _____

Signature of Township Officer: _____

Title: _____ Date Signed: _____

ACKNOWLEDGMENT AND OATH

1. I hereby consent that local law enforcement officers, the Board or its agents, and the commissioners of revenue or public safety and their agents may enter and inspect the premises.
2. The Board and its agents, and the commissioners of revenue and public safety and their agents, are authorized to inspect the bank records of the gambling account whenever necessary to fulfill requirements of current gambling rules and law.
3. I have read this application and all information submitted to the Board is true, accurate, and complete.
4. All required information has been fully disclosed.
5. I am the chief executive officer of the organization.
6. I assume full responsibility for the fair and lawful operation of all activities to be conducted.
7. I will familiarize myself with the laws of Minnesota governing lawful gambling and rules of the Board and agree, if licensed, to abide by those laws and rules, including amendments to them.
8. Any changes in application information will be submitted to the Board no later than ten days after the change has taken effect.
9. I understand that failure to provide required information or providing false or misleading information may result in the denial or revocation of the license.
10. I understand the fee is non-refundable regardless of license approval/denial.

_____ **08/21/2026**

Signature of Chief Executive Officer (designee may not sign) Date

Data privacy notice: The information requested on this form (and any attachments) will be used by the Gambling Control Board (Board) to determine your organization's qualifications to be involved in lawful gambling activities in Minnesota. Your organization has the right to refuse to supply the information; however, if your organization refuses to supply this information, the Board may not be able to determine your organization's qualifications and, as a consequence, may refuse to issue a permit. If your organization supplies the information requested, the Board will be able to process your organization's application. Your organization's name and address will be public information when received by the Board. All other information provided will be private data about your organization until the Board issues the permit. When the Board issues the permit, all information provided will become public. If the Board does not issue a permit, all information provided remains private, with the exception of your organization's name and address which will remain public. Private data about your organization are available to: Board members, Board staff whose work requires access to the information; Minnesota's Department of Public Safety, Attorney General, Commissioners of Administration, Minnesota Management & Budget, and Revenue; Legislative Auditor, national and international gambling regulatory agencies; anyone pursuant to court order; other individuals and agencies specifically authorized by state or federal law to have access to the information; individuals and agencies for which law or legal order authorizes a new use or sharing of information after this notice was given; and anyone with your written consent.

This form will be made available in alternative format, i.e. large print, braille, upon request.

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CITY OF HIBBING —
PERMIT/LICENSE ADMINISTRATIVE SUMMARY

1. Application Information

Permit/License Type: Peddler/Transient Merchant

Applicant Name:
Christina Kloos

Business/Organization Name (if applicable):
Dirty POP Shop LLC

Application Type:
☑ New ☐ Renewal

Location associated with Permit/License (business/event/premises location, not a private residential address):
3910 3rd Ave E, Hibbing

2. Permit/License Details

Brief Description / Purpose:
New mobile food truck that sells dirty soda

Effective Date/Term:
From August 2026 through August 2027

Applicable Fee: $250.00

Fee Paid: ☐ Yes ☑ No ☐ N/A

3. Council Action (internal use only)

Date Received by Council Office: 8.25.26 City Council Meeting Date: 9.2.26

Permit No. (if applicable): _____

This summary is intended for public Council materials. The complete application and supporting documentation are maintained by the City in accordance with applicable records and data practices requirements.

MIRIAM KERO
CONSULTING

Consulting Services Agreement

This services agreement (the agreement) is made effective January 28, 2026, by and between Miriam Kero and the City of Hibbing.

THE PARTIES AGREE AS FOLLOWS:

Scope of Services

1.1 Miriam Kero will provide the CITY OF HIBBING with consulting services as mutually agreed upon and described in the proposal(s). All consulting services to be provided hereunder will be referred to as services. The parties may use this agreement for multiple proposals.

1.2 Proposals will be written documents setting forth at a minimum:
a. A complete, sufficiently detailed description of the types of services to be rendered.
b. The applicable billing rates for the services to be rendered (service fees).
c. Any additional terms and conditions to which the parties may agree.

1.3 The parties recognize that it may be desirable to make changes to the proposal(s). Before performing any work associated with any such change, a written change order shall set forth the necessary revisions to the proposal(s), and the parties shall agree in writing that such work constitutes a change from the original proposal, as amended, and that they further agree to the change provisions set forth in the change order. Each change order shall be numbered serially and executed by Miriam Kero and the CITY OF HIBBING.

1.4 Executive staff of the CITY OF HIBBING and Miriam Kero will review the status of the services, proposal(s), and change orders, invoices and estimates as may be required. A written status report will be produced regarding the review. Miriam Kero and the CITY OF HIBBING agree to execute and maintain copies of these status reports.

Obligations

2.1 The CITY OF HIBBING will provide other support services as both the CITY OF HIBBING and Miriam Kero subsequently agree.

Services and Fees and Expenses

3.1 The CITY OF HIBBING shall be responsible for all service fees as identified in the applicable proposal(s) (and change orders, as applicable) as those services are provided.

3.2 Miriam Kero will invoice the CITY OF HIBBING for the service fees once per calendar month (on or about the 31st of each month). The CITY OF HIBBING agrees to remit full payment to accounts payable within 30 days of receipt of the invoice. An 18% interest fee applies to all invoice amounts not paid within 60 days.

Term and Termination

4.1 This agreement shall commence as of the agreement date above and shall remain in force through December 30, 2026.

Proprietary Rights

5.1 Miriam Kero agrees that the work products from the services provided to the CITY OF HIBBING shall be owned by the CITY OF HIBBING. Nothing contained in this section 5.1 shall be construed as prohibiting Miriam Kero from utilizing in any manner, knowledge and experience of a general nature acquired in the performance of services for the CITY OF HIBBING.

Warranties

6.1 Miriam Kero warrants that the services to be provided under this agreement shall be performed in a professional manner conforming to generally accepted industry standards and practices. The CITY OF HIBBING agrees that Miriam Kero's sole and exclusive obligation with respect to the services covered by this limited warranty shall be, at Miriam Kero's sole discretion, to correct the nonconformity or to refund the service fees paid for the affected executive consulting services.

General Provisions

7.1 The relationship of the CITY OF HIBBING and Miriam Kero is that of independent contractors. Personnel of both parties are neither agents nor employees of the other party for federal tax purposes or any other purpose whatsoever and are not entitled to any employee benefits of the other party.

7.2 No delay, failure or default in performance of any obligation by either party, excepting all obligations to make payments hereunder, shall constitute a breach of this agreement to the extent caused by force majeure.

7.3 Any assignment in violation of these terms is void.

7.4 Any controversy or claim arising out of or relating to this agreement, or the breach thereof, shall be conclusively resolved through binding arbitration. Judgment on the award rendered by the arbitrator(s) may be entered in any court having jurisdiction thereof under. Each party shall bear its own costs and attorney fees unless the arbitration award specifically provides otherwise.

7.5 All communications between the parties with respect to any of the provisions of this agreement shall be in writing, and shall be sent by personal delivery, mail or e-mail to the CITY OF HIBBING or to Miriam Kero as set forth in the preamble of this agreement, until such time as either party provided the other not less than ten (10) days prior written notice of a change of address in accordance with these provisions.

7.6 The validity of this agreement and the rights, obligations and relations of the parties hereunder shall be construed and determined under and in accordance with the laws of the state of Minnesota; provided, however, that if any provision of the agreement is determined by a court of competent jurisdiction to be in violation of any applicable law or otherwise invalid or unenforceable, such provision shall to such extent as it shall be determined to be illegal, invalid or unenforceable under such law be deemed null and void, but this agreement shall otherwise remain in full force. After arbitration, as specified in Section 7.4, any suit to enforce any provision of this agreement, or any right, remedy or other matter arising from the arbitration, will be brought exclusively in the state or federal courts located in Minnesota. Miriam Kero and the CITY OF HIBBING agree and consent to the venue in and to the in-person jurisdiction of the aforementioned courts.

7.7 Any modification or amendment of any provision of this agreement must be in writing and bear the signature of the duly authorized representatives of both parties. The failure of any party to enforce any right it is granted herein, or to require the performance by the other party hereto of any provision of this agreement, or the waiver by any party of any breach of this agreement, shall not prevent a subsequent exercise or enforcement of such provisions or be deemed a waiver of any subsequent breach of this agreement. All provisions of this agreement which by their own terms take effect upon the termination of this agreement or by their nature survive termination (including without limitation the provisions of Sections 3, 5, 6, 7) shall survive such termination.

7.8 This agreement, all attached schedules and all other agreements referred to herein or to be delivered by the parties pursuant hereto, represents the entire understanding and agreement between the parties with respect to the subject matter hereof, and merges all prior discussions between them and supersedes and replaces any and every other agreement or understanding which may have existed between the parties to the extent that any such agreement or understanding relates to providing services to the CITY OF HIBBING. The CITY OF HIBBING hereby acknowledges that it has not reasonably relied on any other representation or statement that is not contained in this agreement or made by a person or entity other than Miriam Kero. To the extent, if any, that the terms and conditions of the CITY OF HIBBING's orders or other correspondence are inconsistent with this agreement, this agreement shall control.

Amendment: This agreement is voluntarily entered into and is at-will. That is, either party is free to terminate the consulting agreement at will, at any time, with or without cause. Nothing contained in any committee documents shall in any way modify this at-will policy, and the at-will policy cannot be modified in any way by oral or written representation made by any one individual of the CITY OF HIBBING. Upon termination of this agreement, Miriam Kero must return all documentation, equipment or other materials provided by the CITY OF HIBBING during the term of this agreement.

MIRIAM KERO
CONSULTING

Miriam Kero
208 East Park Drive
Hibbing, MN 55746

August 10, 2026

Nick Arola
City Services Director
City of Hibbing
401 East 21st St
Hibbing, MN 55746

Re: Proposal for Greater MN Regional Parks and Trails Commission Designation Application

Dear Nick:

Thank you for the opportunity to submit a proposal to the City of Hibbing for assistance in completing the Greater MN Regional Parks and Trails Commission Designation Application. This application is the first stage in regional designation, allowing future funding from the GMRPTC. Please note: the application, if/when rated "high" by the GMRPTC, will require a Master Plan for Carey Lake Park to be submitted.

This document outlines the proposed scope of work and exclusions for assistance in writing the designation application.

SCOPE OF WORK

- Task 1: Miriam Kero will draft application text.
- Task 2: Miriam Kero will review the text with the City Services Director and revise as needed.
- Task 3: Miriam Kero will submit the final application/notify the City Services Director to submit the final application.

EXCLUSIONS

- The City Services Director will facilitate obtaining necessary resolutions and signatures.
- The City Services Director will coordinate the development of a Carey Lake Master Plan if warranted.

SCOPE OF WORK	Subtotal	HOURS $132/hr
Task 1: Miriam Kero will draft application text.	1980	15
Task 2: Miriam Kero will review the text with the City Services Director and revise as needed.	396	3
Task 3: Miriam Kero will submit the final application/notify the City Services Director to submit the final application.	264	2
Total NOT TO EXCEED	**2640**	**20**

As with previous contracts, I only bill for time spent on the project.
Thank you for the opportunity to assist with this application. Please let me know if you have any questions or comments with respect to this proposal.

Sincerely,

Miriam Kero, Owner, Miriam Kero Consulting
Enclosure: Consulting Services Agreement

ACCEPTED: Miriam Kero is authorized to perform the scope of work in accordance with attached Consulting Services Agreement and proposed fees.

BY: _____ DATE: _____
Name, Title

Exclusive invitation

Hibbing Service Center technical training day - Built for the range

Join us for an exclusive open day at the newly opened Hibbing Service Center. Tour our facilities, see projects in progress, and get hands-on with live equipment demos. Attend technical seminars on pumps, valves, and cyclone optimization, delivered on-site by our specialists. Cap the day with a BBQ lunch and connect with the team supporting your operations across the Iron Range.

Sessions run in the morning and afternoon; register for whichever works best for you.

Morning tour

9:00 - 09:20 AM	Hibbing welcome - Introducing Service Center portfolio & capabilities
9:20 - 10:00 AM	Pump fundamentals: reliability from the ground up
10:00 - 10:15 AM	Coffee break
10:15 - 11:00 AM	Separation matters: cyclone optimisation for mine operations
11:00 - 11:15 AM	Knife cape valves in the Iron Range
11:15 – 11:30 AM	Morning Service Center tour
11:30 – 01:00 PM	**BBQ lunch & networking**

Afternoon tour

1:00 – 01:20 PM	Hibbing welcome - Introducing Service Center portfolio & capabilities
1:20 – 2:00 PM	Pump fundamentals: reliability from the ground up
2:00 – 2:45 PM	Separation matters: cyclone optimization for mine operations
2:45 – 3:00 PM	Knife cape valves in the Iron Range
3:00 – 3:20 PM	Afternoon Service Center tour

When: September 9th 2026, 9:00 - 15:20

Where: 1205 7th Ave East, Hibbing, MN 55746, USA

RSVP: Giancarlo Salazar
giancarlo.salazar@flsmidth.com

Please RSVP by way of accepting our Invitation and **register here**

CITY OF HIBBING

RAFFLE REQUEST

Excluded raffle = Total Prizes awarded $1,500 per year or less
Exempt raffle = Total Annual prizes over $1,500 and under $50,000 requires Minnesota form LG220

RAFFLE REGISTRATION FEE

$15.00 ***Payable to the City of Hibbing***

ORGANIZATION INFORMATION			
Name of Organization:	WARLOCKS OF HIBBING		
Type of Organization:	501.c3		
Mailing Address:	207 3RD AVE N		
City, State, Zip	HIBBING MN 55746		
Contact Person:	DON WOOD	**Daytime Phone Number:**	763-238-4958
Have you conducted other raffles this year	YES	If YES, What is the total amount of prizes this year, including this Raffle	$1,450

GAMBLING PREMISES INFORMATION
Name of premises where gambling activity will be conducted: WARLOCKS OF HIBBING
Dates of Activity: 12-11-26
Check Box or Boxes that Indicate the Type of Gambling Activity: [X] Raffle [ ] Other _____
Price Per Ticket: $20.00
Total value of prizes to be awarded: $1500.00
Types of Prizes: GUNS

In signing this request, I attest that I represent the above named Non-Profit organization and it meets all requirements of the State of Minnesota to qualify to conduct lawful gambling and proof of non-profit status is available upon request.

Don Wood — Organization Representative

9-1-26 — Date

[ ] **Registered as Excluded Raffle**

[✓] **Send to Council for Approval**

LG220 Application for Exempt Permit

An exempt permit may be issued to a nonprofit organization that:
- conducts lawful gambling on five or fewer days, and
- awards less than $50,000 in prizes during a calendar year.

If total raffle prize value for the calendar year will be $1,500 or less, contact the Licensing Specialist assigned to your county by calling 651-539-1900.

Application Fee (non-refundable)

Applications are processed in the order received. If the application is postmarked or received 30 days or more before the event, the application fee is **$100**; otherwise the fee is **$150**.

Due to the high volume of exempt applications, payment of additional fees prior to 30 days before your event will not expedite service, nor are telephone requests for expedited service accepted.

ORGANIZATION INFORMATION

Organization Name: WARLOCKS OF HIBBING

Previous Gambling Permit Number: X- 96125-26-001

Minnesota Tax ID Number, if any:

Federal Employer ID Number (FEIN), if any: 831541836

Mailing Address: 418Z KERR LOCATION

City: HIBBING State: MN Zip: 55746 County: ST. LOUIS

Name of Chief Executive Officer (CEO): DONALD A. WOOD

CEO Daytime Phone: 763-238-4458 CEO Email: MINNEAPOLISORIGWAC@YAHOO.COM
(permit will be emailed to this email address unless otherwise indicated below)

Email permit to (if other than the CEO): MINNEAPOLISORIGINAL@YAHOO.COM

NONPROFIT STATUS

Type of Nonprofit Organization (check one):

☐ Fraternal ☐ Religious ☐ Veterans ☒ Other Nonprofit Organization

Attach a copy of one of the following showing proof of nonprofit status:

(DO NOT attach a sales tax exempt status or federal employer ID number, as they are not proof of nonprofit status.)

☒ **A current calendar year Certificate of Good Standing**
Don't have a copy? Obtain this certificate from:
MN Secretary of State, Business Services Division
60 Empire Drive, Suite 100
St. Paul, MN 55103

Secretary of State website, phone numbers:
www.sos.state.mn.us
651-296-2803, or toll free 1-877-551-6767

☐ **IRS income tax exemption (501(c)) letter in your organization's name**
Don't have a copy? To obtain a copy of your federal income tax exempt letter, have an organization officer contact the IRS toll free at 1-877-829-5500.

☐ **IRS - Affiliate of national, statewide, or international parent nonprofit organization (charter)**
If your organization falls under a parent organization, attach copies of both of the following:
1. IRS letter showing your parent organization is a nonprofit 501(c) organization with a group ruling; and
2. the charter or letter from your parent organization recognizing your organization as a subordinate.

GAMBLING PREMISES INFORMATION

Name of premises where the gambling event will be conducted (for raffles, list the site where the drawing will take place): WARLOCKS OF HIBBING

Physical Address (do not use P.O. box): 207 3rd AVE N

Check one:

☒ City: HIBBING Zip: 55746 County: ST. LOUIS

☐ Township: Zip: County:

Date(s) of activity (for raffles, indicate the date of the drawing): 12-11-26

Check each type of gambling activity that your organization will conduct:

☐ Bingo ☐ Paddlewheels ☐ Pull-Tabs ☐ Tipboards ☒ Raffle

Gambling equipment for bingo paper, bingo boards, raffle boards, paddlewheels, pull-tabs, and tipboards must be obtained from a distributor licensed by the Minnesota Gambling Control Board. EXCEPTION: Bingo hard cards and bingo ball selection devices may be borrowed from another organization authorized to conduct bingo. To find a licensed distributor, go to ***www.mn.gov/gcb*** and click on ***Distributors*** under the ***List of Licensees*** tab, or call 651-539-1900.

LG220 Application for Exempt Permit

LOCAL UNIT OF GOVERNMENT ACKNOWLEDGMENT (required before submitting application to the Minnesota Gambling Control Board)

CITY APPROVAL for a gambling premises located within city limits

☐ The application is acknowledged with no waiting period.

☐ The application is acknowledged with a 30-day waiting period, and allows the Board to issue a permit after 30 days (60 days for a 1st class city).

☐ The application is denied.

Print City Name: _____

Signature of City Personnel:

_____

Title: _____ Date: _____

The city or county must sign before submitting application to the Gambling Control Board.

COUNTY APPROVAL for a gambling premises located in a township

☐ The application is acknowledged with no waiting period.

☐ The application is acknowledged with a 30-day waiting period, and allows the Board to issue a permit after 30 days.

☐ The application is denied.

Print County Name: _____

Signature of County Personnel:

_____

Title: _____ Date: _____

TOWNSHIP (if required by the county)
On behalf of the township, I acknowledge that the organization is applying for exempted gambling activity within the township limits. (A township has no statutory authority to approve or deny an application, per Minn. Statutes, section 349.213.)

Print Township Name: _____

Signature of Township Officer: _____

Title: _____ Date: _____

CHIEF EXECUTIVE OFFICER'S SIGNATURE (required)

The information provided in this application is complete and accurate to the best of my knowledge. I acknowledge that the financial report will be completed and returned to the Board within 30 days of the event date.

Chief Executive Officer's Signature: Don Wood Date: 9-1-26

(Signature must be CEO's signature; designee may not sign)

Print Name: DON WOOD

REQUIREMENTS

Complete a separate application for:

- all gambling conducted on two or more consecutive days; or
- all gambling conducted on one day.

Only one application is required if one or more raffle drawings are conducted on the same day.

Financial report to be completed within 30 days after the gambling activity is done:
A financial report form will be mailed with your permit. Complete and return the financial report form to the Gambling Control Board.

Your organization must keep all exempt records and reports for 3-1/2 years (Minn. Statutes, section 349.166, subd. 2(f)).

MAIL APPLICATION AND ATTACHMENTS

Mail application with:

____ a copy of your proof of nonprofit status; and

____ application fee (non-refundable). If the application is postmarked or received 30 days or more before the event, the application fee is **$100**; otherwise the fee is **$150**. Make check payable to **State of Minnesota**.

To: Minnesota Gambling Control Board
1711 West County Road B, Suite 300 South
Roseville, MN 55113

Questions?
Call the Licensing Section of the Gambling Control Board at 651-539-1900.

Data privacy notice: The information requested on this form (and any attachments) will be used by the Gambling Control Board (Board) to determine your organization's qualifications to be involved in lawful gambling activities in Minnesota. Your organization has the right to refuse to supply the information; however, if your organization refuses to supply this information, the Board may not be able to determine your organization's qualifications and, as a consequence, may refuse to issue a permit. If your organization supplies the information requested, the Board will be able to process the application. Your organization's name and address will be public information when received by the Board. All other information provided will be private data about your organization until the Board issues the permit. When the Board issues the permit, all information provided will become public. If the Board does not issue a permit, all information provided remains private, with the exception of your organization's name and address which will remain public. Private data about your organization are available to Board members, Board staff whose work requires access to the information; Minnesota's Department of Public Safety; Attorney General; Commissioners of Administration, Minnesota Management & Budget, and Revenue; Legislative Auditor, national and international gambling regulatory agencies; anyone pursuant to court order; other individuals and agencies specifically authorized by state or federal law to have access to the information; individuals and agencies for which law or legal order authorizes a new use or sharing of information after this notice was given; and anyone with your written consent.

This form will be made available in alternative format (i.e. large print, braille) upon request.

An equal opportunity employer

Office of the Minnesota Secretary of State
Certificate of Good Standing

I, Steve Simon, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name:	Warlocks of Hibbing
Date Filed:	09/06/2018
File Number:	1030695400031
Minnesota Statutes, Chapter:	317A
Home Jurisdiction:	Minnesota

This certificate has been issued on: 03/27/2026

Steve Simon
Secretary of State
State of Minnesota

Minnesota Department of Public Safety
Alcohol and Gambling Enforcement Division
445 Minnesota Street, Suite 1600, St. Paul, MN 55101
651-201-7507 TTY 651-282-6555

APPLICATION AND PERMIT FOR A 1 DAY TO 4 DAY TEMPORARY ON-SALE LIQUOR LICENSE

Name of organization: Checco's Tavern LLC
Date of organization: 7/2/26
Tax exempt number: 184 0568 MN; 42-2045682 EIN
Organization Address (No PO Boxes): 1803 3rd Ave E
City: Hibbing
State: MN
Zip Code: 55746
Name of person making application: Kaylee Fosso
Business phone: 218 263 9845
Home phone: 218 966 0565
Date(s) of event: 9/19/26
Type of organization: ☐ Microdistillery ☐ Small Brewer ☐ Club ☐ Charitable ☐ Religious ☐ Other non-profit

Organization officer's name	City	State	Zip Code
Kaylee Fosso	Hibbing	MN	55746
		MN	
		MN	

Location where permit will be used. If an outdoor area, describe.
outside Checcos
1803 3rd Ave E

If the applicant will contract for intoxicating liquor service give the name and address of the liquor license providing the service.
No - using On-sale Liquor License

If the applicant will carry liquor liability insurance please provide the carrier's name and amount of coverage.

APPROVAL

APPLICATION MUST BE APPROVED BY CITY OR COUNTY BEFORE SUBMITTING TO ALCOHOL AND GAMBLING ENFORCEMENT

Hibbing — City or County approving the license
9/2/26 — Date Approved
$135.00 — Fee Amount
9/19/26 — Permit Date
Event in conjunction with a community festival ☑ Yes ☐ No
Hibbing — City or County E-mail Address
16,214 — Current population of city
Candie Seppala — Please Print Name of City Clerk or County Official
Candie Seppala — Signature City Clerk or County Official

CLERKS NOTICE: Submit this form to Alcohol and Gambling Enforcement Division 30 days prior to event
No Temp Applications faxed or mailed. Only emailed.
ONE SUBMISSION PER EMAIL, APPLICATION ONLY.
PLEASE PROVIDE A VALID E-MAIL ADDRESS FOR THE CITY/COUNTY AS ALL TEMPORARY PERMIT APPROVALS WILL BE SENT BACK VIA EMAIL. *E-MAIL THE APPLICATION SIGNED BY CITY/COUNTY TO AGE.TEMPORARYAPPLICATION@STATE.MN.US*

✓ # 2051

PJ

Minnesota Department of Public Safety
Alcohol and Gambling Enforcement Division
445 Minnesota Street, Suite 1600, St. Paul, MN 55101
651-201-7507 TTY 651-282-6555

APPLICATION AND PERMIT FOR A 1 DAY TO 4 DAY TEMPORARY ON-SALE LIQUOR LICENSE

Name of organization	Date of organization	Tax exempt number
The Iron House	~~9/19/26~~	

Organization Address (No PO Boxes)	City	State	Zip Code
112 E Howard Street	Hibbing	MN	55746

Name of person making application	Business phone	Home phone
Rena Freeman	218 403 7067	218 969 3561

Date(s) of event: 9/19/26

Type of organization ☐ Microdistillery ☐ Small Brewer ☐ Club ☐ Charitable ☐ Religious ☐ Other non-profit

Organization officer's name	City	State	Zip Code
Rena Freeman	Hibbing	MN	55746
		MN	
		MN	

Location where permit will be used. If an outdoor area, describe.

Outside the Iron House

If the applicant will contract for intoxicating liquor service give the name and address of the liquor license providing the service.

112 E Howard St. Hibbing, The Iron House

If the applicant will carry liquor liability insurance please provide the carrier's name and amount of coverage.

APPROVAL

APPLICATION MUST BE APPROVED BY CITY OR COUNTY BEFORE SUBMITTING TO ALCOHOL AND GAMBLING ENFORCEMENT

City or County approving the license

Date Approved

Fee Amount

Permit Date

Event in conjunction with a community festival ☐ Yes ☐ No

City or County E-mail Address

Current population of city

Please Print Name of City Clerk or County Official

Signature City Clerk or County Official

CLERKS NOTICE: Submit this form to Alcohol and Gambling Enforcement Division 30 days prior to event

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Minnesota Department of Public Safety
Alcohol and Gambling Enforcement Division
445 Minnesota Street, Suite 1600, St. Paul, MN 55101
651-201-7507 TTY 651-282-6555

APPLICATION AND PERMIT FOR A 1 DAY TO 4 DAY TEMPORARY ON-SALE LIQUOR LICENSE

Name of organization	Date of organization	Tax exempt number
Sammy's Pizza Hibbing Location		75-2980098

Organization Address (No PO Boxes)	City	State	Zip Code
106 E Howard Street	Hibbing	MN	55746

Name of person making application	Business phone	Home phone
Brita Baratto	218 263 7574	

Date(s) of event: 9/19/26

Type of organization ☐ Microdistillery ☐ Small Brewer ☐ Club ☐ Charitable ☐ Religious ☐ Other non-profit

Organization officer's name	City	State	Zip Code
		MN	
		MN	
		MN	

Location where permit will be used. If an outdoor area, describe.
Outside Sammy's Howard Street

If the applicant will contract for intoxicating liquor service give the name and address of the liquor license providing the service.

If the applicant will carry liquor liability insurance please provide the carrier's name and amount of coverage.

APPROVAL

APPLICATION MUST BE APPROVED BY CITY OR COUNTY BEFORE SUBMITTING TO ALCOHOL AND GAMBLING ENFORCEMENT

City or County approving the license

Date Approved

Fee Amount

Permit Date

Event in conjunction with a community festival ☐ Yes ☐ No

City or County E-mail Address

Current population of city

Please Print Name of City Clerk or County Official

Signature City Clerk or County Official

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Alcohol and Gambling Enforcement Division
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651-201-7507 TTY 651-282-6555

APPLICATION AND PERMIT FOR A 1 DAY TO 4 DAY TEMPORARY ON-SALE LIQUOR LICENSE

Name of organization	Date of organization	Tax exempt number
Homer Bar	9-14-2026	

Organization Address (No PO Boxes)	City	State	Zip Code
2213 1st Ave	Hibbing	MN	55746

Name of person making application	Business phone	Home phone
Dillen Hooper	218-262-2978	

Date(s) of event: 9-14-2026

Type of organization ☐ Microdistillery ☐ Small Brewer ☐ Club ☐ Charitable ☐ Religious ☐ Other non-profit

Organization officer's name	City	State	Zip Code
Dillen Hooper	Hibbing	MN	55746
		MN	
		MN	

Location where permit will be used. If an outdoor area, describe.

All In Side

If the applicant will contract for intoxicating liquor service give the name and address of the liquor license providing the service.

If the applicant will carry liquor liability insurance please provide the carrier's name and amount of coverage.

APPROVAL

APPLICATION MUST BE APPROVED BY CITY OR COUNTY BEFORE SUBMITTING TO ALCOHOL AND GAMBLING ENFORCEMENT

City or County approving the license

Date Approved

Fee Amount

Permit Date

Event in conjunction with a community festival ☐ Yes ☐ No

City or County E-mail Address

Current population of city

Please Print Name of City Clerk or County Official

Signature City Clerk or County Official

CLERKS NOTICE: Submit this form to Alcohol and Gambling Enforcement Division 30 days prior to event

No Temp Applications faxed or mailed. Only emailed.

ONE SUBMISSION PER EMAIL, APPLICATION ONLY.

PLEASE PROVIDE A VALID E-MAIL ADDRESS FOR THE CITY/COUNTY AS ALL TEMPORARY PERMIT APPROVALS WILL BE SENT BACK VIA EMAIL. *E-MAIL THE APPLICATION SIGNED BY CITY/COUNTY TO AGE.TEMPORARYAPPLICATION@STATE.MN.US*

Minnesota Department of Public Safety
Alcohol and Gambling Enforcement Division
445 Minnesota Street, Suite 1600, St. Paul, MN 55101
651-201-7507 TTY 651-282-6555

APPLICATION AND PERMIT FOR A 1 DAY TO 4 DAY TEMPORARY ON-SALE LIQUOR LICENSE

Name of organization	Date of organization	Tax exempt number
BTL INC dba mike's pubs		

Organization Address (No PO Boxes)	City	State	Zip Code
413 E. Howard St	hibbing	MN	55746

Name of person making application	Business phone	Home phone
Brianna Clemens	218-440-1213	218-403-0838

Date(s) of event: 9-16-20

Type of organization ☐ Microdistillery ☐ Small Brewer ☐ Club ☐ Charitable ☐ Religious ☐ Other non-profit

Organization officer's name	City	State	Zip Code
Brianna Clemens	hibbing	MN	55746
		MN	
		MN	

Location where permit will be used. If an outdoor area, describe.
howard st (Oktoberfest)

If the applicant will contract for intoxicating liquor service give the name and address of the liquor license providing the service.

If the applicant will carry liquor liability insurance please provide the carrier's name and amount of coverage.
on file - amerisure

APPROVAL

APPLICATION MUST BE APPROVED BY CITY OR COUNTY BEFORE SUBMITTING TO ALCOHOL AND GAMBLING ENFORCEMENT

City or County approving the license

Date Approved

Fee Amount

Permit Date

Event in conjunction with a community festival ☐ Yes ☐ No

City or County E-mail Address

Current population of city

Please Print Name of City Clerk or County Official

Signature City Clerk or County Official

CLERKS NOTICE: Submit this form to Alcohol and Gambling Enforcement Division 30 days prior to event
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Minnesota Department of Public Safety
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651-201-7507 TTY 651-282-6555

APPLICATION AND PERMIT FOR A 1 DAY TO 4 DAY TEMPORARY ON-SALE LIQUOR LICENSE

Name of organization: Sportsmen's Taverna
Date of organization:
Tax exempt number: 0010214691
Organization Address (No PO Boxes): 509 E Howard St.
City: Hibbing
State: MN
Zip Code: 55746
Name of person making application: ANDY KARAHALIOS
Business phone: 2182621848
Home phone: —
Date(s) of event: Sept. 19. 2026
Type of organization ☐ Microdistillery ☐ Small Brewer ☐ Club ☐ Charitable ☐ Religious ☐ Other non-profit
Organization officer's name: ANDY KARAHALIOS
City: Hibbing
State: MN
Zip Code: 55746
Organization officer's name: —
City: —
State: MN
Zip Code: —
Organization officer's name: —
City: —
State: MN
Zip Code:

Location where permit will be used. If an outdoor area, describe.
out front of 509 E Howard St. Hibbing, Mn 55746
In the bar.

If the applicant will contract for intoxicating liquor service give the name and address of the liquor license providing the service.

NO

If the applicant will carry liquor liability insurance please provide the carrier's name and amount of coverage.
Badger Mutual - 00726-01967 - policy number
PO Box 2985
Milwaukee, WI 53201

APPROVAL

APPLICATION MUST BE APPROVED BY CITY OR COUNTY BEFORE SUBMITTING TO ALCOHOL AND GAMBLING ENFORCEMENT

City or County approving the license

Date Approved

Fee Amount

Permit Date

Event in conjunction with a community festival ☐ Yes ☐ No

City or County E-mail Address

Current population of city

Please Print Name of City Clerk or County Official

Signature City Clerk or County Official

CLERKS NOTICE: Submit this form to Alcohol and Gambling Enforcement Division 30 days prior to event
No Temp Applications faxed or mailed. Only emailed.
ONE SUBMISSION PER EMAIL, APPLICATION ONLY.
PLEASE PROVIDE A VALID E-MAIL ADDRESS FOR THE CITY/COUNTY AS ALL TEMPORARY PERMIT APPROVALS WILL BE SENT BACK VIA EMAIL. *E-MAIL THE APPLICATION SIGNED BY CITY/COUNTY TO AGE.TEMPORARYAPPLICATION@STATE.MN.US*

CITY OF HIBBING

RAFFLE REQUEST

Excluded raffle = Total Prizes awarded $1,500 per year or less
Exempt raffle = Total Annual prizes over $1,500 and under $50,000 requires Minnesota form LG220

RAFFLE REGISTRATION FEE

$15.00 ***Payable to the City of Hibbing***

ORGANIZATION INFORMATION			
Name of Organization:	Precious Paws		
Type of Organization:	5013C non-profit		
Mailing Address:	101 SW 1st Ave		
City, State, Zip	Chisholm, MN 55719		
Contact Person:	Carrie Nelson	**Daytime Phone Number:** 218-254-3300	
Have you conducted other raffles this year	Yes	If YES, What is the total amount of prizes this year, including this Raffle: $300	

GAMBLING PREMISES INFORMATION
Name of premises where gambling activity will be conducted: Hibbing National Guard Armory
Dates of Activity: Sept.26,2026
Check Box or Boxes that Indicate the Type of Gambling Activity: ☑ Raffle ☐ Other _____
Price Per Ticket: 1.00
Total value of prizes to be awarded: 400
Types of Prizes: craft items, candles, toys, few gift cards

In signing this request, I attest that I represent the above named Non-Profit organization and it meets all requirements of the State of Minnesota to qualify to conduct lawful gambling and proof of non-profit status is available upon request.

Carrie Nelson
Organization Representative

9/2/26
Date

☐ **Registered as Excluded Raffle**

☐ **Send to Council for Approval**

CITY OF HIBBING —
PERMIT/LICENSE ADMINISTRATIVE SUMMARY

1. Application Information

Permit/License Type: Transient Merchant

Applicant Name:
Joe Provinzino

Business/Organization Name (if applicable):
Joe Provo Racewear

Application Type:
☒ New ☐ Renewal

Location associated with Permit/License (business/event/premises location, not a private residential address):
2 North Jonathan Blvd, Chaska, MN 55318 Suite 260

2. Permit/License Details

Brief Description / Purpose:
Plans to sell at the Hibbing Speedway during Labor Day Shootout

Effective Date/Term:
From September 2026 through August 2027

Applicable Fee: $_____

Fee Paid: ☐ Yes ☐ No ☐ N/A

3. Council Action (internal use only)

Date Received by Council Office: 9/1/26 City Council Meeting Date: 9/2/26

Permit No. (if applicable): _____

This summary is intended for public Council materials. The complete application and supporting documentation are maintained by the City in accordance with applicable records and data practices requirements.

Request for Council Action

City Council Action

Description of Agenda Item

Offer Resolution No. 26-09-XX to make an application to and accept funds from the IRRR Residential Redevelopment Grant Program in the amount of $36,868.00.

Strategic Initiative

Owner of Agenda Item

Pat Green, Building Official, 218.969.0165, patgreen@hibbingmn.gov

Introduction/Background/Justification/Key Issues/Legal

Board/Commission/Committee Actions(s):

Budgetary/Fiscal Impact

Action Requested

Approve Resolution.

Attachments

1. 2026 IRRR Grant 2 Letter to City Council to go with resolution
2. 2026 IRRR Grant 2 Resolution

City Council
August 31, 2026

Honorable Mayor Hyduke and Members of the Hibbing City Council
Hibbing, MN 55746

Re: IRRR Demolition and Redevelopment Grant Application from Building and Housing

One Grant Application is prepared and ready to be submitted to the IRRR for $36,868.00 for the demolition of 7 structures.

A Resolution by the City is required before the Application can be submitted for approval, and the Grant can be awarded to the City.

Pat Green
Building Official

DATE: _____ REF. #: DG-2026-02

BY MEMBER: _____

RESOLUTION

Resolution #: _____ City of Hibbing, MN

Resolution authorizing the City of Hibbing to make application to and accept funds in the amount of $36,868.00 from the IRRR Residential Redevelopment Grant Program.

Resolved by the City Council of the City of Hibbing, that

WHEREAS, the City of Hibbing approves the demolition of seven structures on the properties located at the following:

- 2618 4th Ave. West (140-0105-01780) (house)
- 10839 Yuretich Rd. (141-0030-00730) (house)
- 128 4th St. (140-0120-00980) (house and garage)
- 2828 3rd Ave. East (140-0240-00890) (garage apartment)
- 3705 2nd Ave. East (140-0110-00140) (garage and shed)

WHEREAS, the City of Hibbing hereby agrees to accept funding from the IRRR Residential Redevelopment Grant Program for the project, if approved by the IRRR,

NOW, THERFORE, BE IT RESOLVED THAT THE City Council of the City of Hibbing does hereby adopt this resolution to submit an application to and accept funds from the IRRR Residential Grant Program for the demolition projects at 2618 4th Ave. West, 10839 Yuretich Rd., 128 4th St., 2828 3rd Ave. East, and 3705 2nd Ave. East.

BE IT FURTHER RESOLVED THAT THE Mayor and City Administrator are authorized to execute any documents necessary to obtain the funding through the IRRR Residential Redevelopment Grant Program.

Moved by Councilor_____, supported by Councilor_____, that the above resolution be adopted.

Ayes: _____

Nays: _____

Request for Council Action

City Council Action

Description of Agenda Item

Strategic Initiative

Owner of Agenda Item

Introduction/Background/Justification/Key Issues/Legal

Board/Commission/Committee Actions(s):

Budgetary/Fiscal Impact

Action Requested

Attachments

1. Hawk Const. Quote 1
2. Max Gray Const. Quote 2

HAWK CONSTRUCTION INC.

Commercial Building Contractor

August 26, 2026
Proposal for Construction Services at
City Of Hibbing Outbuilding
Hibbing, MN

HAWK Construction, Inc. hereby proposes to provide construction services for the amount of:
Two Hundred Thirty-Four Thousand One Hundred Sixty Dollars and 00/100 ($234,160.00)

Work to include the following scope:

- All work is included per the Investigation Report provide by ESi dated 8/7/2026.

Excluded from proposal

- Flooring or floor coating
- Concrete work
- Bituminous
- Attached lean to work
- Moving of owner equipment or owner items
- Building permit is included in base bid

Thank you for considering HAWK Construction, Inc

Sincerely,

Hawk Construction Inc

(218) 327-0069

Accepted by: _____

MAX GRAY CONSTRUCTION
GENERAL BUILDING CONTRACTORS / HIBBING / DULUTH

8/27/2026

Hibbing Recycling Center
1425 East 23rd Street
Hibbing, MN 55746

Attn: Nick Arola

Dear Nick,

We appreciate the opportunity to provide you with the following proposal for the repair work at the Hibbing Recycling Center in Hibbing, Minnesota. Based on our site visit and evaluation of the existing conditions and the Investigative report prepared by Engineering Systems, Inc., Max Gray Construction, Inc. is pleased to provide you with all necessary labor, materials, sales tax, and equipment for the lump-sum price of **$335,027.00** (Three Hundred Thirty Five Thousand Twenty Seven Dollars and No Cents).

Our proposal includes:

- Removal and Disposal of existing roofing system to the extent suggested in Esi's report
- Removal and Disposal of existing interior liner panel, vapor barrier, insulation as required to replace damaged roof trusses
- Replacement of (9) roof trusses, Metal Roof Panels, Soffits, Fascia, Purlins, Sub-Fascia per Esi's report
- Replacement of interior ceiling liner panel per Esi's report
- Removal and disposal of interior office/bathroom spaces
- Reconstruction of interior office/bathroom spaces to match original design to include taping/painting of drywall and installation of new ACT ceilings
- Removal and reinstallation of Plumbing/HVAC as required for repairs
- Removal and reinstallation of Electrical fixtures/equipment as required for repairs
- Removal and reinstallation of (1) 16x16 Overhead door as required for repairs
- Removal and reinstallation of existing Fire Suppression system as required for repairs
- Removal and Reinstallation of (4) existing HM doors and frames as required for repairs
- Proposal includes new vapor barrier to the extents required for our repairs and new blown insulation in the attic space up to R-49 rating
- Building Permit

- Business insurance
- Supervision
- Mobilization/Demobilization
- General Construction Cleanup
- Dumpsters

A breakdown of the labor and materials included in this proposal is attached for your review.

This proposal is based on a visual inspection of accessible areas and information available at the time of review. Actual field conditions may vary from those observed during the inspection. Any conditions requiring materials or work beyond the proposed scope, as well as any design changes or scope modifications, will be addressed through a written change order and may result in additional costs. Pricing is based on current material costs and availability and is subject to adjustment should significant market changes occur prior to material procurement.

Exclusions

This proposal excludes Builders Risk, Hazardous Material Abatement, Utility Service work outside of building, Any Bituminous or Concrete Work, Any work not specifically listed in the above proposal.

Any additional materials, services, or scope items requested beyond those specifically included herein will be subject to a separate proposal or change order. This proposal is good for 30 days.

Please feel free to contact us if you require additional details. We appreciate the opportunity to assist with your building restoration project.

Sincerely,

Garrett Erickson
Vice President
Max Gray Construction, Inc.

					Labor	Material	Subcontract	Equipment	Other	Total			
Description			**Quantity**		**Amount**	**Amount**	**Amount**	**Amount**	**Amount**	**Amount**			
	01 - General Conditi								44,058	44,058			
	02 - Demolition				38,102	550			5,385	44,037			
	07 - blown insulatio				8,132	3,200				11,332			
	08 - doors/frames				1,243	18				1,261			
	08 - OH Doors						3,931			3,931			
	09 - ACT Ceilings						4,594			4,594			
	09 - Gyp Systems				8,038	4,198				12,236			
	09 - Painting/Taping						11,639			11,639			
	13 - PEB				54,982	53,005		12,048		120,034			
	15 - Fire Suppressio						12,711			12,711			
	15 - Mechanical						14,641			14,641			
	16 - Electrical						13,171			13,171			

Estimate Totals

Description	**Amount**	**Totals**		**Hours**		**Rate**			**Cost Bas**	**per Unit**		**Percent of Total**	
Labor	110,496											32.98%	
Material	60,970											18.20%	
Subcontract	60,687											18.11%	
Equipment	12,048											3.60%	
Other	49,443											14.76%	
Misc Extra Expense	**293,644**	**293,644**										**87.65%**	**87.65%**
Building Permit by % of Cost									T				
Building Permit by LS	3,900								L			1.16%	
Business Insurance	3,350					1.000	%		T			1.00%	
Builders Risk Insurance	by owner								T				
CMIC Software Management Fee	630					0.188	%		T			0.19%	
Net Margin on Current Total	33,503					10.000	%		T			10.00%	
Markup & Bond	**41,383**	**335,027**										**12.35%**	**100.00%**
Total		***335,027***											

Request for Council Action

City Council Action

Description of Agenda Item

Strategic Initiative

Owner of Agenda Item

Introduction/Background/Justification/Key Issues/Legal

Board/Commission/Committee Actions(s):

Budgetary/Fiscal Impact

Action Requested

Attachments
None

Request for Council Action

City Council Action

Description of Agenda Item

Strategic Initiative

Owner of Agenda Item

Introduction/Background/Justification/Key Issues/Legal

Board/Commission/Committee Actions(s):

Budgetary/Fiscal Impact

Action Requested

Attachments
None

Request for Council Action

City Council Action

Approve the change order for $22,830.00.

Description of Agenda Item

Approve a change order for the demolition of the old Sullivan Warehouse building in the amount of $22,830.00. On October 22, 2025, the Council approved the quote for $62,400.00 to Bougalis & Sons for demolition of the warehouse; the environmental inspection and asbestos removal were separate from that quote. Due to asbestos, the MPCA required the roof to be removed by hand; the quote that we received from MAVO Systems to complete that was $54,860.00. I have now received approval from the MPCA to have the building demolished as hazardous material and the change order for that is $22,830.00 from Bougalis & Sons. I am looking for approval of the change order for $22,830.00 to complete this demolition.

Strategic Initiative

Owner of Agenda Item

Pat Green, Building Official, 218.969.0165, patgreen@hibbingmn.gov

Introduction/Background/Justification/Key Issues/Legal

Board/Commission/Committee Actions(s):

Budgetary/Fiscal Impact

Action Requested

Approve the change order for $22,830.00.

Attachments

1. DOC082726

George Bougalis and Sons Co.

3402 15th Ave E
Hibbing, MN 55746 US
basinfo7@bougalisandsons.com
www.bougalisandsons.com

Estimate

ADDRESS	SHIP TO		
Hibbing, City of 401 East 21st Street Hibbing, MN 55746 US	Former Sullivan Warehouse 620 E. 16th Street Hibbing MN 55746	ESTIMATE DATE EXPIRATION DATE	1963 08/25/2026 09/24/2026

DATE		DESCRIPTION	QTY	RATE	AMOUNT
08/25/2026	20.2050 Demolition	Remove Asbestos Roof & Tile with lined dumpsters and a Asbestos Supervisor on site.	1	22,830.00	22,830.00

Indemnification and Hold Harmless Agreement - To the extent permitted by law, the above owner, agrees to defend, indemnify, and hold harmless George Bougalis and Sons, Co. (Bougalis Construction) and its officers, directors, agents and employees from and against any and all claims, injuries, suits, liens, judgments, settlements, fines, damages, losses and expenses, including reasonable legal fees and costs, arising in whole or in part and in any manner from the alleged omission, breach, or default of contract in connection with the performance of any work for Owner by General Contractor, its officers, directors, agents, employees and subcontractors, except for injuries and damages caused by the sole negligence of General Contractor. This agreement shall survive the termination of any agreement between Owner and General Contractor.

SUBTOTAL	22,830.00
TAX	0.00
TOTAL	**$22,830.00**

Accepted By

Accepted Date

MAVO SYSTEMS

Environmental/Specialty Contracting Services

PROPOSAL

DATE: **September 18, 2025**

PROPOSAL SUBMITTED TO:	**City of Hibbing**	DESCRIPTION OF WORK	**Asbestos Abatement**
ADDRESS:	**401 E 21st St**		
CITY, STATE, ZIP:	**Hibbing, MN 55746**	SITE LOCATION:	**Sullivan Building**
ATTENTION:	**Tina Glad**	ADDRESS:	**620 E 16th St**
PHONE NO:	**218-312-1575**	CITY, STATE, ZIP:	**Hibbing, MN 55746**

Mavo Systems, Inc. proposes the following scope of work including labor, materials, equipment, OSHA air sampling, disposal and insurance to perform the following scope of work:

Scope of Work:

Provide services to remove and dispose of asbestos containing materials listed in the July 22, 2025 survey.
Removals include approx. 5600 sq ft roofing, 30 sq ft linoleum, and 1000 sq ft floor tile and mastic.
All the work will be performed in compliance of all federal, state and local regulation.

Lump Sum Price: $54,860.00

Notes:

Terms of Payment: Net 30 days

Payment(s) to be made as follows:

In the event payment(s) are not made as outlined herein, the undersigned agrees to pay all costs of collection and attorney's fees incurred by Mavo Systems, Inc. Any alteration or deviation from above specifications involving extra costs will be executed only upon written orders, and will become an extra charge over and above the estimate. All material is guaranteed to be specified. The Work will be performed with due professional care, in a workmanlike, professional, timely and diligent manner and in accordance with standards of care, skill and diligence consistent with recognized and sound industry practices, procedures and techniques. This warranty excludes all implied warranties. All agreements contingent upon strikes, accidents or delays beyond our control.

Owner to carry fire, tornado and other necessary insurance. Our workers are fully covered by Workman's Compensation. Owner agrees to supply Mavo Systems, Inc. with 110 volt power and potable water to complete the cleaning process. Mavo Systems adheres to all state tax laws. If applicable, sales tax will be added/charged.

Authorized Signature *Melverd Nelson* Note: This proposal may be withdrawn by us if not accepted within 60 days

Melverd Nelson - Project Mgr.

Acceptance of Proposal:

The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined.

Signature required prior to work performance

Date of Acceptance: Signature

MAVO SYSTEMS, INC.
2385 Becks Road
Duluth, MN 55810

OFFICE NO.: (218) 626-1586
CELL (612)386-1950

EMAIL ADDRESS: MNELSON@MAVO.COM

Request for Council Action

City Council Action

Approve purchase of Wacker Neuson smooth drum roller from L&L Rental for $15,435.00

Description of Agenda Item

Wacker Neuson smooth drum roller RD12 38.8 inch wide.

Strategic Initiative

We are currently renting this unit and patching our alleys. We are able to buy it out with rental rate going towards the purchase. This is a key piece of equipment for many tasks within the Public Works department.

Owner of Agenda Item

Joe McKenney, Fleet Manager, 218.966.1826, joemcKenney@hibbingmn.gov

Introduction/Background/Justification/Key Issues/Legal

Board/Commission/Committee Actions(s):

Budgetary/Fiscal Impact

We will use surplus funds from sale of old assets to purchase this. Fund 400-43-3100-540

Action Requested

Approve attached quote to L&L Rental for $15,435.00

Attachments

1. 2026 Dual Drum Roller Quote 7-23-26

L & L Rentals, Inc.
11461 Spudville Road
Hibbing, MN 55746
(218) 262-5232
(218) 263-9734 FAX

220079	
Quote	
Rent Date:	7/23/2026 10:34 AM
Due Date:	7/24/2026 10:34 AM
Return Date:	
Order Terms:	Net 30
PO #:	
Job #:	roller

Customer Information

City of Hibbing
401 East 21st Street
Hibbing, MN 55746

Ship VIA	Customer Email	Work Phone #	Fax Phone #
	accountspayable@hibbingmn.gov	(218) 969-2816	(218) 312-9712

Customer #	Authorized Contact Name	Contact Phone #	Sales Person Name	Employee Name
274				KL

Description	Qty Out	Qty. In	Daily	Weekly	Monthly	Per Unit	Taxable	Extended
SOLD ROLLER RD12 DBL DRUM (DEL	1					$15435.00	✓	$15435.00
compaction force I/II - 3400/- only front drum compacts max travel speed- 5mph Item ID: 3222 Serial: WNCRD12ACPUM06903								

Order Terms:

All quotes valid for 30 days from quote date, unless noted otherwise.
Returns only allowed by Seller authorization and subject to a 20% restocking fee.
Delivery date subject to Buyer supplying information, specifications, and locations to Seller in a prompt and correct manner.
Delivery dates subject to manufacturer's schedule and shipping methods. Seller is not responsible for missed delivery dates.

X

Customer Signature

Customer Name (Printed) Date

HOURS:
Monday - Friday 7:00am - 5:00pm
Saturdays 8:00am-Noon
Closed Sundays

Rental Item Sales:	$15,435.00
Sub Total:	$15,435.00
Tax:	$0.00
Order Total:	$15,435.00
Amount Paid:	$0.00
Amount Due:	$15,435.00

Tax Exempt ID:	8022766

Thank You For Your Business

Revision: 1 Revised By: KL

Created: Thursday, July 23, 2026 10:34 AM
Printed: Thursday, July 23, 2026 10:36 AM