POST CONSPICUOUSLY MINNESOTA DEPARTMENT of HEALTH
625 Robert Street North, P.O. Box 64975
Environmental Health Division
St. Paul, Minnesota 55164-0975
(651) 201-4500

NOT TRANSFERABLE AS TO PERSON OR PLACE

Fee Paid: \$700.00

416

LICENSE NO. FBL-24221-30832 FOR THE OPERATION OF:

License Categories: Additional Inspection Fee, Base Fee - FBL, Category 2 Establishment,

Hospitality Fee, School, 3-School Concession Stand

LICENSE PERIOD: January 1, 2024 THRU December 31, 2024

ISSUED TO:

Red Wing Public School District 2451 Eagle Ridge Drive Red Wing, Minnesota 55066 **ESTABLISHMENT NAME:**

Red Wing High School 2451 Eagle Ridge Drive Red Wing, Minnesota 55066

License Type(s): Restaurant

County: Goodhue