



JIM STRICKLAND
MAYOR

CITY ATTORNEY

PERMITS & LICENSES

APPLICATION FOR DANCE HALL PERMIT

AUBREY J. HOWARD
PERMITS - LICENSES ADMINISTRATOR
MEMPHIS ALCOHOL COMMISSION/PERMITS OFFICE
2714 UNION AVENUE, EXTENDED, SUITE 100
MEMPHIS, TN 38112
(O) 901 636 6711 (FAX) 901 323 9913 (EMAIL)permits@memphistn.gov
WEB: <http://www.memphistn.gov/>

(City of Memphis Ordinance 4352)

APPLICANT IS SEEKING A PERMIT WHICH WOULD ALLOW PUBLIC DANCE AS FOLLOWS (PLEASE INDICATE TYPE):

- LIMITED DANCE (SEVEN (7) DAY) - \$10 PUBLIC DANCE HALL - \$100 COMPENSATED DANCE - \$500

1. Is the applicant/operator a: proprietorship firm corporation co-partnership other
2. List the name, age, address and telephone number of each person or operator, co-partnership, firm, corporation, or other association or organization (attach list if needed):

Name Age Address Telephone # Email

- a. _____
b. _____
c. _____
d. _____
e. _____

3. Business name: _____

4. Business address: _____ Number of floors for dance: _____ Square footage: _____

4a. Mailing address (if different from 4): _____ Telephone Number: _____

5. If the applicant is an individual, please provide a background check based upon the Fair Credit Reporting Act standards that show that he or she has not been convicted of a felony, or of a misdemeanor involving moral turpitude, within five years prior to the date of making the application.
6. If the applicant is a firm, association or partnership, please submit all of the information described in number 5 as to each individual composing the firm, association, or partnership.
7. If the applicant is a corporation, please provide a statement that the applicant is organized and chartered under the corporation laws of the state applicable to such corporation, or, if a foreign corporation, if such a corporation has complied with the laws of the state applicable to such corporation, and the same information with reference to the operator or person in charge of the operation of the public dance hall desired to be conducted as is prescribed in number 5, and, in

addition thereto, a statement as to the names of stockholders in the corporation, and the percentage of the corporation's outstanding stock owned by each.

8. List the occupation or employment of the person signing this application for a period of two years next preceding the filing of this application: _____

9. **AFFIRMATION:** APPLICANT HEREBY SOLEMNLY SWEARS OR AFFIRMS THAT EACH AND EVERY STATEMENT IN THE FOREGOING APPLICATION IS TRUE AND CORRECT; THAT THE APPLICANT WILL NOTIFY THE CITY OF MEMPHIS PERMITS OFFICE IF THERE IS A CHANGE THAT AFFECTS THE RESPONSES PROVIDED IN THIS APPLICATION. THAT THE APPLICANT IS FAMILIAR WITH THE "ADULT-ORIENTED ESTABLISHMENT REGISTRATION ACT OF 1988 (THE ACT) ADOPTED LOCALLY VIA SHLEBY COUNTY GOVERNMENT ORDINANCE 344"; (2) CHAPTER FOUR OF THE CODE OF ORDINANCES OF THE CITY OF MEMPHIS"; AND, (3) "TCA 57-5-105(d)" THE LATTER TWO DEALING WITH BEER SALES.

NOTARY

Before me appeared, _____ this _____ day of _____, 20____ known to me to be
(PRINT/TYPE APPLICANT'S NAME)

the same individual who affixed their signature below.

(APPLICANT'S SIGNATURE)

(DATE)

NOTARY

(DATE)

(My Commission Expires)