



TOWN OF SOUTH PRAIRIE

121 NW WASHINGTON STREET - PO BOX 870 - SOUTH PRAIRIE, WA 98385

CABARET, CELEBRATION, PUBLIC DANCE LICENSE APPLICATION

****CABARET LICENSE FEE IS \$500.00 PER YEAR AND NON-REFUNDABLE****
(For full disclosure of regulations, reference Ordinance No.'s 37B, 104 and 362).

This application may be used for the procurement of any of the following: A *Public Dance License* whereby a Public Dance shall include any dance to which the general public is admitted for which an attendance charge or donation is imposed as a condition of attendance; a *Celebration License* for a one-time event; a *Cabaret License* permitting music only, or permitting both music and dancing, in a place of business in which food or liquor is sold and consumed on the premises.

This license may be issued to the manager of the place of business or in the name of a sole-proprietor, corporation or partnership. Full information must be supplied with references to all of the partners, officers, and director of the corporation, as required by Town Ordinances. Upon report by the Chief of Police, this application will be referred to the Town Council for final determination.

PLEASE PRINT OR TYPE:

Name of Applicant: _____ Applicant's Phone #: _____

Applicant's Address: _____

Applicant's Social Security #: _____

Business Name: _____ Business Phone #: _____

Business Address: _____

Department of Revenue or UBI #: _____

Name and address of event location (if different from Business Address): _____

Manager: _____ Manager's Phone #: _____

Manager's Address: _____

Name of person(s) or corporation to whom or which license is to be issued: _____

Qualifications of Person Signing this Application:

A) How long have you resided in Pierce County? _____

B) How long have you resided in the State of Washington? _____

C) Previous Address: _____

Dates at that Address: _____

D) Have you ever been convicted of committing a felony? _____

If so, give details: _____

I SWEAR THE PRECEDING INFORMATION IS TRUE AND ACCURATE:

SIGNATURE: _____ DATE: _____