

LICENSE APPLICATION TO OPERATE A DANCE HALL



The undersigned hereby applies for a license to operate a dance hall in the Village of Yorkville, pursuant to the Village of Yorkville Code of Ordinances. The undersigned submits the following in support of their application:

APPLICANT			
NAME		Date of Birth	
ADDRESS			
PHONE		EMAIL	
OCCUPATION			
UNITED STATES CITIZEN? <input type="checkbox"/> Yes <input type="checkbox"/> No		STATE OF WISCONSIN RESIDENT? <input type="checkbox"/> Yes <input type="checkbox"/> No	

SITE INFORMATION:	
Establishment Name	
Address	

DESCRIBE THE FOLLOWING:			
Dancing Area		Square Footage	
Parking Facilities		Maximum Attendance #	
Events Planned			
Noise Control			
Security			
All Uses Conducted on the Premises			

INDICATE TYPE OF DANCE HALL LICENSE FOR WHICH YOU ARE APPLYING AND SUBMIT APPLICABLE FEE:

Questions to answer:	Class A	Class B	Class C	Special
Are you charging for admission?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> No	<input type="checkbox"/> Yes / <input type="checkbox"/> No
Is live music being performed?	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes / <input type="checkbox"/> No
Will you host dancing less than 3 nights per year?	<input type="checkbox"/> No	<input type="checkbox"/> No	<input type="checkbox"/> No	<input type="checkbox"/> Yes

Please check one:

- CLASS A (\$50.00) CLASS B (\$25.00) CLASS C (\$25.00) SPECIAL (\$5.00)

PRINCIPAL OFFICERS | OWNER | MANAGER

Please complete the following information

- For all principal officers if the applicant is a member of partnership, association, non-profit entity or a corporation (Please use a separate sheet if necessary)
- For the owner if the applicant is not the owner
- For the manager if the applicant is not the manager

NAME		Date of Birth	
ADDRESS			
PHONE		EMAIL	
OCCUPATION	ROLE <input type="checkbox"/> Principal Officer <input type="checkbox"/> Owner <input type="checkbox"/> Manager		
UNITED STATES CITIZEN?	<input type="checkbox"/> Yes <input type="checkbox"/> No	STATE OF WISCONSIN RESIDENT?	<input type="checkbox"/> Yes <input type="checkbox"/> No

NAME		Date of Birth	
ADDRESS			
PHONE		EMAIL	
OCCUPATION	ROLE <input type="checkbox"/> Principal Officer <input type="checkbox"/> Owner <input type="checkbox"/> Manager		
UNITED STATES CITIZEN?	<input type="checkbox"/> Yes <input type="checkbox"/> No	STATE OF WISCONSIN RESIDENT?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Has the applicant, owner, manager or any principal officer ever operated or conducted a public dance hall?

Yes No (If yes, provide details below. Use a separate sheet if necessary.)

Year: _____ Location: _____
 Year: _____ Location: _____

Has the applicant, owner, manager or any principal officer ever been ticketed, arrested, convicted, fined or have any charges pending against them for any violation of any law or ordinance regulating the conduct of public dance halls or public dances? Yes No (If yes, provide details below. Use a separate sheet if necessary.)

Date: _____ Jurisdiction: _____ Violation: _____
 Date: _____ Jurisdiction: _____ Violation: _____

Applicant Signature _____ **Date:** _____

TO BE COMPLETED BY VILLAGE			
Received On:	_____	Fee Received: \$	_____
Village Board Action:	<input type="checkbox"/> Approve <input type="checkbox"/> Deny	Action Date:	_____ Expires On: _____
Conditions Imposed:	_____		

Supplemental Pages

NAME			Date of Birth	
ADDRESS				
PHONE		EMAIL		
OCCUPATION	ROLE <input type="checkbox"/> Principal Officer <input type="checkbox"/> Owner <input type="checkbox"/> Manager			
UNITED STATES CITIZEN?		<input type="checkbox"/> Yes <input type="checkbox"/> No	STATE OF WISCONSIN RESIDENT?	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	

NAME			Date of Birth	
ADDRESS				
PHONE		EMAIL		
OCCUPATION	ROLE <input type="checkbox"/> Principal Officer <input type="checkbox"/> Owner <input type="checkbox"/> Manager			
UNITED STATES CITIZEN?		<input type="checkbox"/> Yes <input type="checkbox"/> No	STATE OF WISCONSIN RESIDENT?	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	

NAME			Date of Birth	
ADDRESS				
PHONE		EMAIL		
OCCUPATION	ROLE <input type="checkbox"/> Principal Officer <input type="checkbox"/> Owner <input type="checkbox"/> Manager			
UNITED STATES CITIZEN?		<input type="checkbox"/> Yes <input type="checkbox"/> No	STATE OF WISCONSIN RESIDENT?	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	

NAME			Date of Birth	
ADDRESS				
PHONE		EMAIL		
OCCUPATION	ROLE <input type="checkbox"/> Principal Officer <input type="checkbox"/> Owner <input type="checkbox"/> Manager			
UNITED STATES CITIZEN?		<input type="checkbox"/> Yes <input type="checkbox"/> No	STATE OF WISCONSIN RESIDENT?	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	