

OFFICE USE ONLY			
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ADVERSE: Yes No			
LP: CC:			
LETTER:			

THEATRE CLK120/121 (rev. 11/17) CITY ORDINANCE 12.04

	Fee: \$50.00	Term:	(MUST BE CONSECUTIVE DAYS AND CANNOT EXCEED 30 DAYS)
□ Yearly (CLK121)	Fee: \$500.00	Expires: May 31,	
□ Application for Fee promoting art and cult	• Waiver (Not for profit ure may apply to the co	t corporations operating as a common council for a waiver of	community theatre for the purpose of the license fee.)
□ New □ Rene	ewal		
icensee:		I, PARTNERSHIP, OR INDIVIDUAL	District #:
rade/Event Address: _	STR	EET	ZIP
Phone:		Email:	ondence Will Be Via Email If Address Is Given)
		(Corresp	ondence Will Be Via Email If Address Is Given)
. Is Applicant:			
a)	□ A partnership		
,		ess in the State of WI.	
b) □ A corporationc) □ A not for profit	licensed to do busing t corporation operation oply to the Common C	ng as a community theatre f	or the purpose of promoting art and cense fee for the year covered by the
b) A corporation c) A not for profit culture and ap license application	licensed to do busine t corporation operation oply to the Common Cation.	ng as a community theatre f	cense fee for the year covered by the
b) A corporation c) A not for profit culture and ap license applicate. List for individual, al	licensed to do busine t corporation operatir pply to the Common C ation. Il partner, or each cor	ng as a community theatre for a waiver of the lider porate officer (MUST BE 18 YEAR)	cense fee for the year covered by the
b) A corporation c) A not for profit culture and ap license applicate. List for individual, al Full Name:	licensed to do busine t corporation operatir oply to the Common Cation. Il partner, or each co	ng as a community theatre for a waiver of the lider of th	cense fee for the year covered by the ARS OF AGE OR OLDER): DOB: / /
b) A corporation c) A not for profit culture and ap license applica List for individual, al Full Name: Address:	licensed to do busine t corporation operation oply to the Common Cation.	ng as a community theatre for a waiver of the lice. The properties of the lice. The state	cense fee for the year covered by the

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Full Name:					DOB:	/	1
Address:	CUTY	STATE	ZIP	Phone	:		
. If Applicant is a Corpo		STATE	ZIP				
Full Name:					DOB.	1	1
Address:	CITY	STATE	ZIP	Phone	:		
(THE AGENT, PERSON TO A GOOD MORAL CHARACTER	SSUME CHARGE OF SUPE			SES, MUST BE 18	YEARS OF A	GE OR OLI	DER AND OF
. Each individual, sole Police Record." □ A		nd corporate a	gent must fill	out and attac	ch "Applica	ant's Re	port of
. Do you understand the City Ordinance 12.04			erk or online	at www.kend	sha.org a	current o	copy of
. If you previously held explain:	the license applied	for, was it ever	suspended o	or revoked? [Yes 🗆 N	lo If ye	s, please
NOTICE: If this application respects, this license may					correct and	complete i	in all materia
Individual/Partner/Me	mber Signature	Da	te	-			
Partner/Member Sign	nature	Da	ite	-			



APPLICANT'S REPORT - POLICE RECORD CLK001 (rev. 08/17)

Last Name:(NOTI		First Name:			_ MI:
		r Exactly As It Appears On	Driver's License Or Sta	te ID)	
Home Address:					
			TY	STATE	ZIP
Date of Birth:	Driver's	License #:	_		
				NUMBER	
License Applied For:					
PLEASE NOTE: You may purch Safety Building, 1000-55th St. A Note: You must write your tickets 1. Have you ever received any If yes, provide: Charge, Sta	dditionally, check s, charges, citation y tickets or bee	the WI Circuit Court A ons, or offenses on the en charged with any	access website to o application. Do not crimes or felonie	btain your circuit c t attach copies of r	court records. records.
(Examples: Speeding, \	NI, 5/8/2012, Gui	Ity Theft, FL, 5/22/20	14, Dismissed DU	I, WI, 6/30/2017, F	ending)
CHARGE		STATE	DATE	RESI	JLT
Have you <u>ever</u> had your dr If yes, provide: Charge, Sta			ed in any state?		
CHARGE		STATE		DATE	

3.	Have you <u>ever</u> served or been sentenced to serve time in jail or prison <u>in any state</u> ? □ Yes □ No If yes, provide: Charge, State, Date					
	CHARGE	STATE		DATE		
4.	Have you <u>ever</u> , while operating a busines involving unfair trade practices, unethical If yes, provide: Charge, State, Date, Resu	conduct, or discrimina	ation in any state?			
	OTIANGE	OTATE	DATE	KLOOLI		
5.	List the name and address of all employe in the past five (5) years :	rs for which you have	worked and/or bu	usinesses you have operated		
6.	6. Have you lived at your current home address for the past (5) five years? □ Yes □ No If no, please list all addresses which you have resided at in the past (5) five years: 7. Do you, the applicant, understand that if any of the information provided is false, and/or incomplete, you may be subjected to the penalties specified in 1.22 of the Code of General Ordinances, which is printed on the bottom of this application. □ Yes					
7.						
8.	Do you, the applicant, understand that if any of the information provided is false, and/or incomplete, the license may be denied? INITIAL					
	Applicant Signature	D	ate			
1.2	2 LICENSE/PERMIT APPLICATIONS – CODE OF GEI	NERAL ORDINANCES				
It s to a wh	Prohibition thall be unlawful for any person, acting as an individual, authorize any person to do so on their behalf, a license ich was known by said person to be untrue, incorrect ar ich, if known to the granting authority, would be a basis	or permit application which is nd/or incomplete. The term "	s not true, correct and/o in all material respects'	or complete in all material respects and		
1) plu has 2) from app	Penalty Any person violating Subsection A. above, shall, upon is the payment of the costs of prosecution, and, in defause been paid, but not to exceed a period of thirty (30) day. The license or permit granting authority may grant, but im the date of granting under circumstances wherein an olicant was provided with an opportunity to appear befor plicant which shall be made part of their license/permit rede and imposed by other than the Common Council, ap	ult of the timely payment ther ys. It withhold the issuance of, an application is found by the g re the granting authority. The ecord for two (2) consecutive	eof, shall be committed y license or permit for a ranting authority to have granting authority ma e license/permit years.	to the County Jail until such forfeiture a period not to exceed thirty (30) days e violated Section A. above, and the y also issue a written warning to the Where such finding and penalty is		

by the Common Council.

1.225 ADMINISTRATIVE CHARGE FOR PROCESSING LICENSE/PERMIT APPLICATIONS

The first Twenty-five (\$25) Dollars of the application fee for any License/Permit shall be retained by the City in the event of a License/Permit denial or the withdrawal of the application by applicant for administrative and processing costs, and the balance, if any, refunded to the applicant. Where the application fee is less than Twenty-five (\$25) Dollars, the entire application fee shall be retained by the City for administrative and processing costs.

such penalty, whichever is first, if both oral and written notice is provided, file a Notice of Appeal with the City Clerk and have such matter reviewed

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