

CITY OF CLEVELAND, TENNESSEE
APPLICATION FOR ADULT ENTERTAINMENT PERMIT

***** WARNING *****

It is unlawful for any person to make a false statement on this application. Discovery of a false statement shall constitute grounds for denial of application or revocation of a permit. This permit is not transferable to any other person.

INSTRUCTIONS

All information must be printed or typed. The information contained in this application **MUST** be legible and complete in order for it to be processed. Only those applications that have been obtained through the City Business License Office will be processed.

FULL NAME: _____

SOCIAL SECURITY NUMBER: _____

CURRENT ADDRESS: _____

NAME OF BUSINESS WHERE YOU WILL BE EMPLOYED: _____

WORK PHONE # _____ **HOME PHONE #** _____

1. List all names and aliases, including stage names, by which you have within the past ten (10) years, been known by: _____

2. I have attached to this form a copy of my birth certificate or other proof that I am at least (18) eighteen years of age: Yes No My date of birth is: _____

3. List all residential addresses where you have lived during the past three (3) years: _____

4. Designate your height _____, weight _____, color of eyes _____, and color of hair _____.

5. List all businesses, employment or other occupation which you have had for the five (5) years immediately preceding the date of this application:

6. List whether you, while previously operating in this or any other city or state under an adult-oriented establishment permit or similar business for which you were employed or associated at the time, have ever had such a permit revoked or trade name for which you were employed or associated with at the time of such suspension or revocation:

7. State all convictions of federal and/or criminal statutes, or any city ordinances or misdemeanor violation convictions, and pleadings of nolo contendere on all charges, except minor traffic violations, which you have received within the past five (5) years.

8. Attach two (2) recent photographs of yourself which are at least 2 inches by 2 inches.

9. Attach your fingerprints as they were obtained at the Cleveland Police Department.

10. Have you received a copy of the City of Cleveland Ordinances No. 9-501 through 9-516, are you familiar with the provisions of such and do you agree to comply with all the terms and provisions therein? _____

11. By applying for this permit I am aware that the Cleveland Police Department will conduct an investigation into my background for which the City Clerk's office shall notify me whether my application is granted, denied, or held for further investigation. My failure or refusal to give any information relevant to the investigation of this application or my refusal or failure to appear at any reasonable time and place or examination under oath regarding this application or refusal to submit to or cooperate with any investigation required by Ordinance 9-507, shall constitute an admission by me that I am ineligible for this permit and can be grounds for denial thereof by the Cleveland City Council. I further understand that the giving of any false information on this application may also constitute grounds for the denial of any adult entertainer permit by the Cleveland City Council.

Signature of applicant: _____

SWORN TO AND SUBSCRIBED BEFORE ME THIS _____ DAY OF _____, _____.

NOTARY PUBLIC

COMMISSION EXPIRES

APPROVED:

INVESTIGATING OFFICER: _____

DATE: _____

CITY CLERK: _____

DATE: _____

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If this application is not approved the ground for denial are:

Signature of Investigating Officer

I _____, have received a copy of the City of Cleveland's code as it pertains to Adult Entertainment, 9-501 through 9-516. This _____, day of _____, 20_____.

Signature of Applicant