

Sole Proprietorship

Fee: \$1,000.00



**CITY OF DERBY
ADULT CABARET ESTABLISHMENT**

Application Date: _____

Applicant's Legal Name _____ Social Security # _____

Aliases _____

Date of Birth _____ Drivers License (or State Issued ID)# _____

Residence Address _____

Business Address _____

Home Phone # _____ Business Phone # _____

Citizenship and place of birth _____

If a naturalized citizen, time and place of naturalization _____

Location of Business to be licensed _____

Name of the Business to be licensed _____

Name of Property Owner _____

I hereby certify that I have not within the last five (5) years immediately preceding date of application:

- (a) been convicted of, pleaded nolo contendere to, or participated in a diversion of any morals charge or felony.

List the conviction date, case number, nature of violation(s) or offense and the name and location of the court _____

I hereby certify that I have not within the last three (3) years immediately preceding date of application:

- (a) been convicted of, pleaded nolo contendere to, or participated in a diversion of any violation of a provision of Chapter 5.32 of the City of Derby Municipal Code.

List all pending cases involving: (a) alleged violations of morals charges, including the nature of the alleged violation, date of alleged offenses and the name and location of the jurisdiction in which said violation is alleged to have occurred; and (b) alleged violations of Chapter 5.32 of the Derby Municipal Code including the nature of the alleged

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violation(s) and the date of the alleged offense(s); _____

Have you ever had a license or other authorization to perform, work or provide services substantially the same as an adult cabaret establishment revoked or suspended.

If yes, provide date and grounds for each such revocation or suspension, and the name and location of the licensing jurisdiction: _____

NOTE: Answer all questions fully and completely. Use additional sheet if required. An incomplete application will not be processed.

OATH

I hereby swear under oath that the information contained in this application is true and correct and I am familiar with the provisions of Chapter 5.32 of the Derby Municipal Code and I am complying and will continue to comply with them..

Signature of Applicant

Date

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REQUIRED DOCUMENT/FEEES

- 1) License fee of \$1000.00
- 2) Two copies of this application with original signatures.
- 3) Two (2) photographs, measuring two (2) inches by two (2) inches in size, taken within thirty (30) days immediately preceding the date of application.
- 4) Proof that the applicant is at least 18 years of age on the date the application is submitted. The following shall be accepted as documentation of age:
 - a) A motor vehicle operator's license issued by any state, bearing the applicant's photograph and date of birth;
 - b) A state-issued identification card bearing the applicants photograph and date of birth;
 - c) An official and valid passport issued by the United States of America;
 - d) An immigration card issued by the United States of America;
 - e) any other form of picture identification issued by a governmental entity that is deemed reliable by the city clerk; or
 - f) any other from of identification that is deemed reliable by the city clerk.

Date paid _____

Receipt # _____

Amount paid _____

Return completed application with applicable fee to:

**City of Derby
City Clerk's Office
Attn: Judy Roberts
611 Mulberry
Derby, Ks 67037**