

Fee: \$100.00 Application
\$15.00 Record Check per person

License Expires June 30, 20____

APPLICATION FOR PUBLIC DANCE HALL LICENSE

FEIN#: _____

Wisconsin Seller Permit #: _____

NAME OF PERSON IN CHARGE: _____

TRADE NAME: _____ PHONE: _____

ADDRESS OF BUSINESS: _____

INDIVIDUAL OR PARTNERSHIP

Person's Name	Address & Home Phone Number	Date of Birth

CORPORATION (NAME)

Title	Name	Address	Date of Birth
President			
Vice-President			
Secretary			
Treasurer			

The following person or persons are hereby designated as Manager of the said dance hall:

NAME	RESIDENCE	DATE OF BIRTH
_____	_____	_____

The date and place of any conviction (if any) of an offense under Chapter 22.09 or under any similar law, ordinance or regulation of any person connected with this venture.

The name and address of the person owning the premises for which a license is sought:

Signature of Applicant or Agent

Please Print or Type Name