



**Adult Entertainment Parlour
Application for Municipal Business Licence**

Under the terms of By-Law 158 of 2002 of the City of Sarnia as Licenses Expire on December 31st of each year

Application for Licence for an Adult Live Entertainment Parlour

Submission of the following Documents is a Requirement of your Licence Application

Owner Application Requirements:

- () Proof of Legal Name of Applicant (Driver's Licence)
- () Land Transfer/Deed of Land for Premises listing title in the name indicated in answer to Question 12
- () Copy of Lease
- () Proof of current property taxes in good standing
- () If *Corporation*; Most Recently Filed Form 1
- () If *Partnership*; Copy of Declaration of Partnership

Operator Application Requirements:

- () Proof of Legal Name if Applicant; Driver's Licence
- () Fee Paid
- () Owner's Licence already issued
- () If *Corporation*; Most Recently Filed Form 1
- () If *not also Owner*; Copy of Lease, Employment Agreement to operate on Premises in Name of Applicant
- () If *Partnership*; Copy of Declaration of Partnership

I, _____, of the City of _____, in the Province of _____

MAKE OATH AND SAY AS FOLLOWS:

1. My proper legal name is as indicated above.
2. This application is for an: () Owner/Operator's licence
 () Owner's licence alone
 () Operator's licence alone
3. Municipal Address of Premises is () 348 Ontario St.
 () 132 S. Front Street

(Hereinafter referred to as the "Premises")
4. I am completing this Application for a Licence relating to the operation of an Adult Live Entertainment Parlour on behalf of:

() myself, the individual.
() myself, but in trust for, or for the benefit of, _____.
() a corporate entity whom I have the authority to bind.
() a partnership (including a joint venture) whom I have the authority to bind.

5. My home address and phone number or, in the case of a corporation or partnership, the address of the head office and phone number are as follows:

Home Address

Phone Number

IF LICENCE TO BE HELD BY A CORPORATION, THEN ANSWER QUESTIONS 6 TO 7

6. () There have been no changes in directors or officers since the previous application,
or
() There have been changes in directors and officers since the previous application and I have provided with this application a copy of the most recent Form 1 filed with the Ministry of Consumer and Commercial Relations.
7. List the name and home addresses of all directors, shareholders, and officers of the Corporation:

NAME

ADDRESS

IF LICENCE TO BE HELD BY A PARTNERSHIP, THEN ANSWER QUESTIONS 8 TO 9

8. () There have been no changes to the partnership since the previous application, or
() There have been changes to the partnership and I have provided with this application a copy of a registered declaration of partnership most recently filed with the Ministry of Consumer and Commercial Relations.
9. List the name and addresses of all partners:

NAME

ADDRESS

NAME

ADDRESS

10. There is no person whose name is not disclosed by this application who is involved in the Operation of the Adult Live Entertainment Parlour on the Premises.
11. I have read and understand the provisions of By-Law No. 158 of 2002. I have advised all persons listed above on this application that serious penalties can follow up from a conviction for any breach of said By-Law.

SKIP QUESTIONS 12 TO 14 IF YOU ARE NOT OWNER OR OWNER/OPERATOR

12. Title to the Premises is in the name of _____,
(if this represents a change in title, included with this application is a copy of the Transfer/Deed through which title was obtained.)
13. The Premises is currently under lease to _____,
(if there are any changes to the lease previously provided, enclosed is a current copy.)
14. Taxes payable to the City of Sarnia with respect to the Premises have been:
- paid in full to today's date
 - arrangements have been made, satisfactory to the City Treasurer for the City of Sarnia, to pay any outstanding taxes.

SKIP QUESTIONS 15 TO 16 IF YOU ARE BOTH OWNER AND OPERATOR.

15. The relationship between the owner of the premises and the operator of the Adult Live Entertainment Parlour on the Premises is as follows:
- The operator is an employee of the owner of the Premises
 - The operator is an employee of the lease holder of the Premises
 - There is an agreement between the operator and the owner of the Premises
 - There is an agreement between the operator and the lease holder of the Premises
16. Yes or No - There have been no changes in the Operator's authority from the time this application was filed last year (i.e.: Lease, Letter of employment, contract, or agreement to provide entertainment) to use the Premises to operate an Adult Live Entertainment Parlour.

17. The applicant has obtained all other necessary licenses, including a G.S.T. Registration Number which is _____, and a Retail Sales Tax Permit which is number _____.

SKIP QUESTIONS 18 TO 21 IF YOU ARE NOT OPERATOR OR OWNER/OPERATOR

18. The proposed seating capacity is for _____ persons.
19. The proposed hours of operation are _____
20. The square footage on the Premises devoted to the Adult Live Entertainment Parlour is _____ sq ft.
21. There are _____ parking spaces available for patrons and staff on the Premises.

- 22. I have read and understand the requirements with respect to signage found in By-Law No. 158 of 2002, as amended, and I am certain that the proposed signage on the Premises does, or will, comply with said requirements. I am aware that this licence, if granted, can be revoked in accordance with the provisions of By-law No. 158 of 2002, the provisions of the Liquor Licence Act, as well as the provisions of the Criminal Code and no new application for the licence shall be entertained.
- 23. I am aware that this licence is not transferable.
- 24. All statements contained in this application are true and are made in support of a request for an Adult Live Entertainment Parlour. licence, and **I undertake that, if any of the information found in this application changes, I will advise the Clerk of the City of Sarnia** within 7 calendar days of such change.

SWORN BEFORE ME at the
 City of Sarnia, in the County of
 Lambton, this _____ day of
 _____, 20____.

 Signature

 Please Print Name

 Position

 A Commissioner, etc.

ACKNOWLEDGEMENT BY THE CITY TREASURER:

All outstanding arrears of taxes: () have been paid in full to today's date.
 () are subject to an agreement satisfactory to me.

 City Treasurer

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