



Application for Entertainers/Dancers License

*Non-Refundable Application Fee - \$250.00 (CASH ONLY)

*Background Checks - \$10.00 (NON-REFUNDABLE MONEY ORDER ONLY)

*ALL APPLICANTS MUST BE 21 YRS. OF AGE OR OLDER

Date: ____/____/____

New ____ Renewal ____

Name of Applicant: _____
First Name Middle Name Last Name Maiden Name

Address: _____
Street Number Street Name Apt. # City State Zip Code Years?

Phone: (____) _____ Work Phone: (____) _____ Email: _____

Date of Birth: ____/____/____ Age: ____ Sex: ____ M or ____ F Social Security #: _____

Marital Status: ____ Single ____ Married ____ Divorced ____ Widowed

Height: _____ Weight: _____ lbs. Hair Color: _____ Eye Color: _____

Driver's License #: _____ Expiration Date: _____

Are you a U.S. Citizen: Yes ____ No ____ Place of Birth: _____

If not a U.S. Citizen, please provide Visa or Passport documentation Info: _____

List Two Immediate Previous Addresses Prior to Present Address:

Street Number Street Name Apt. # City State Zip Code Yrs. At This Address

Street Number Street Name Apt. # City State Zip Code Yrs. At This Address

Applicant MUST List All Criminal Convictions Other Than Traffic Violations:

Conviction Date of Conviction Court

Conviction Date of Conviction Court

List below all prospective employer(s) and locations:

1. Name of Employer _____ Address: _____

2. Name of Employer _____ Address: _____

Description of Services to be provided: _____

Stage Name: _____

FOR ORDINANCE DEPARTMENT ONLY

City of Romulus Code of Ordinance Chapter 4, Article IV, Entertainers and Dancers, Division 2. License; Section 4-170 - Required

Applicant has met City Ordinance requirements. - **APPROVED**

Applicant has **NOT** met City Ordinance requirements. - **DENIED**

Staff Initials: _____

APPLICANT AFFIDAVIT: I hereby swear and affirm that all information provided in this application is true and correct to the best of my knowledge and belief. I am aware of the City of Romulus Code of Ordinance, Chapter 4, Article IV, Entertainers and Dancers, Division 2. License; Section 4-170 – Required and agree to abide by it in the operation of my business.

Applicant Signature: _____

Date: _____

State of Michigan)
County of Wayne)

NOTARY ACKNOWLEDGEMENT

Notary Seal

On this _____ day of _____, 20____ before me personally appeared _____
Who being duly sworn, deposes and says that the statements and answers contained therein are true.

My commission Expires

Notary Public, Wayne County, Michigan

