

City of Terrell
Public Amusement Permit Application

APPLICANT IS REQUIRED TO PAY A NON-REFUNDABLE APPLICATION FEE OF \$200.00.
YOU MUST BE 21 YEARS OF AGE BEFORE YOU CAN APPLY.

Applicant Name _____ Date of Birth _____

Height _____ Weight _____ Sex _____ Hair Color _____ Eye Color _____

Age _____ Driver License No. _____ License State _____

Social Security Number _____

Have you, your spouse and/or an employee been convicted of a felony within the last 5 years.

If yes, Please Explain:

A person who wishes to operate a dance hall must sign the application for license as an applicant. If a person who wishes to operate a dance hall is other than an individual, each individual who is an officer of the business or who has a 20 percent or greater ownership interest in the business must complete the application for a license as an applicant

Applicant Home Address _____
(Number, Street, Apartment, City, State and Zip Code)

Home Telephone No.: _____ Work Telephone No.: _____

A photocopy of applicant Driver License or other Photo identification must be provided with this application.

Additional Attachments Required:

1. Two (2) recent 2x2 photographs of the applicants face.
2. Name, Date of Birth, height, weight, sex, hair and eye color, for each employee
3. Photocopy of Employees Drivers License or other form of photo identification.
4. A certified copy of the Sales Tax Permit issues by the State Comptroller.
5. Designated supervisors shall provide home address telephone number.

Business Information:

Do you have:

Certificate of Occupancy

Type: Bowling Alley Dance Hall Pool Hall Domino Hall Coin Operated Amusement

Machines Other _____

Check all that apply.

Coin Operated Amusement Machines

Includes machines that accept token.

Number of Machines _____

Applicant must provide a complete list of coin-operated machines. The list must contain Machine description, Manufacture, Model and Serial.

Business Name _____

Address _____

Telephone No.: _____

New applicants are required to provide a certificate of occupancy with this application. Business location must comply with all City of Terrell Zoning laws and distance requirements set forth in Section 9(B) of the City of Terrell Ordinance No. 2057.

All of the information provided for above is to the best of my knowledge true and correct. I also understand that any falsification of information I may have given is a misdemeanor and may result in the denial or Revocation of the Permit(s) applied for.

_____ Date _____

Signature

Approval does not constitute a Permit. Applicant must pay all applicable fees and obtain a permit prior to opening for business.

Do not write below this line.

Approved Denied Date _____ By _____

Permit Date _____ By _____

Comment
