



APPLICATION FOR ADULT ENTERTAINMENT LICENSE/YEARLY RENEWAL

City of Winter Park, Building Department
401 S. Park Ave., Winter Park, FL 32789
407-599-3237

Fees: Adult Entertainment Application Fee (non-refundable): \$200.00
Adult Entertainment Permit : \$750.00

Date Submitted _____

I. THIS APPLICATION IS FOR: (Check Only One) Chapter 14 Section 26-108

- A. _____ A New License
- B. _____ A Transfer of an existing license to the Applicant from current Licensee
Name: _____ Existing License #: _____
- C. _____ Renewal of an existing license currently issued to the Applicant

II. CLASSIFICATION OF LICENSE BEING APPLIED FOR:

(This application is for a license in the single classification of: (Check Only One))

- A. _____ Adult Bookstore
- B. _____ Adult Performing Establishment
- C. _____ Adult Theatre

III. APPLICANT:

- A. This application is for a license to be issued to: (Check Only One)
 - 1. _____ An Individual Person
 - 2. _____ A Partnership
 - 3. _____ A Corporation
- B. Full Legal Name of Applicant: _____
- C. Mailing Address of Applicant: _____

IV. ESTABLISHMENT INFORMATION:

- A. Name of Proposed Establishment: _____
- B. Is the Name of the Proposed Establishment a "Fictitious Name" under Section 865.09, Florida Statutes? _____ Yes _____ No
- C. If "Yes", state the County of Registration: _____
- D. Physical Address and Legal Description of the Proposed Establishment:

V. REQUIRED INFORMATION:

A. Complete the following regarding the Person submitting this application as an individual, or on behalf of a Partnership or Corporation:

1. Full Legal Name: _____
2. All aliases: _____
3. Date of Birth: _____ Sex: _____
4. Residential Address: _____
5. Residential Phone Number: _____
6. Business Address: _____
7. Business Phone: _____
8. Driver License or Identification Card Number: _____
9. Social Security Number: _____
10. Employer Identification Number: _____

B. If Applicant is a Partnership, complete the following:

1. Full Legal Name of Partnership: _____
2. For each partner, please list their Full Legal Name, Date of Birth, Sex, Residential Address and Residential Phone Number:
 - a. _____

 - b. _____

 - c. _____

for additional information, please attach an additional sheet of paper

3. Date Partnership was Formed: _____
4. Type of Partnership (e.g., General or Limited): _____
5. Name, Residential Address and Phone Number of person in Florida authorized to accept service of process: _____

C. If Applicant is a Corporation, complete the following:

1. Full Legal Name of Corporation: _____
2. Date of Incorporation: _____ State of Incorporation: _____
3. For each officer & director: Full Legal Name, Date of Birth, Sex, Residential Address & phone number, and capacity of each officer, director, or stockholder,

4. The Name of Corporation's Registered Agent, as well as address and phone number of the Registered Office: _____

5. The title or capacity of the person who submits the application on behalf of the corporation (must be an officer or director): _____

VI. GENERAL INFORMATION:

- A. Does the applicant own the real property upon which the proposed establishment is to be located? _____ YES _____ NO
- B. If "NO", state the full name, mailing address, and telephone number(s) of the owner of the property: _____

- C. If "NO", describe the exact nature of the applicant's interest in the real property (e.g., lessee): _____
- D. Does the applicant presently own or operate any other adult entertainment establishment licensed under the Orange County Adult Entertainment Code or any other municipal Adult Entertainment Code within Orange County? _____ YES _____ NO
- E. If "YES", identify the other adult entertainment establishment(s), by stating for each: the address of the other adult entertainment establishment(s), the classification of each license, and the corresponding license number(s): _____

- F. Has the applicant or any partner, officer, or director of the applicant been convicted within the last five (5) years of a felony or specified criminal act, as defined by the Orange County Adult Entertainment Code? _____ YES _____ NO
- G. If "Yes", state for each conviction: the specified criminal act, the date of conviction, and the location of conviction (e.g., state, county, or city): _____

H. Has the applicant or any partner, officer, or director of the applicant had a license under the Adult Entertainment Code denied, suspended, or revoked? _____ YES _____ NO

I. If "Yes", state the date of each denial, suspension, and/or revocation, and the license(s) for which each denial, suspension, and/or revocation applied: _____

J. Provide, for each person who has the right or authority to manage or control day-to-day operation of the establishment, the name, mailing, address, residential address, business address, residential phone number, business phone number. If any part of this is a corporation, provide the specified information for the officers and directors of the corporation:

VII. ATTACHMENTS:

- A. Attach to this application a current site plan, drawn to appropriate scale, of the proposed establishment, including but not limited to:
 - 1. All current property lines, right-of-ways, and the location of buildings, parking areas and spaces, curb cuts, and driveways;
 - 2. All current windows, doors, entrances and exits, fixed structural features, walls, stages, partitions, projection booths, admission booths, concession booths, stands, counters, similar structures; and
 - 3. All proposed improvements or enlargements to be made, which shall be indicated and calculated in terms of percentage of increase in floor size.
- B. Attach a recent photograph of the person submitting this application
- C. Attach a photocopy of either the driver's license or state of federally issued identification card for the person submitting the application.
- D. If the application is for a corporation, attach a photocopy of the articles of incorporation and by-laws of the corporation or, if the application is for a partnership, attach a photocopy of the partnership agreement. Attached? _____
- E. If the application is for a transfer of a license, attach a notarized affidavit by the current licensee evidencing consent to the transfer and any applicable contract or bill of sale. Attached? _____
- F. If the application is for a transfer of a license, attach a notarized affidavit by the property owner evidencing consent and approval to the application for an adult entertainment license and a copy of the lease. If the applicant is not the owner of the property, attach a notarized affidavit of the property owner evidencing consent and approval to the application for an adult entertainment license and a copy of the lease of or rental agreement along with any related documentation. Attached? _____

AUTHORIZATION AND CERTIFICATION

I hereby authorize the City of Winter Park Building and Code Enforcement Department, Orange County/Florida State Health Department, City of Winter Park Fire Department, and City of Winter Park Police Department, to obtain all data and information needed to examine and review this application and the operation of the proposed licensed establishment. I hereby authorize each of the above referenced departments to conduct an inspection(s) of the proposed or licensed establishment.

I understand that an application fee and an annual fee, as determined in the City of Winter Park's Schedule of Fees, is required.

I hereby swear under penalty of perjury that I am authorized by the named applicant to submit this application and that the foregoing statements are true and correct. I understand that, in the event a license is granted based upon false information, misrepresentation of fact, or mistake of fact, City of Winter Park Code Section 14-51 provides that the license shall be revoked.

Signature of Applicant

Capacity: _____

Print Name: _____

County of _____,
State of Florida

Sworn to and subscribed by the person named above who took an oath and is personally known to me, or produced _____ as identification before me this _____ day of _____, 20____.

Notary Public, State of Florida