

APPLICATION FOR CABARET LICENSE IN THE CITY OF TOMAH

TOMAH, WISCONSIN _____, 20_____

TO THE COMMON COUNCIL OF THE CITY OF TOMAH, WISCONSIN

I hereby apply for a license to operate a cabaret in the City of Tomah at the premises described below from _____, 20____ until June 30, 20____, unless sooner revoked, subject to the limitations imposed by Ordinance No. 4-137 of the Ordinances of the City of Tomah, Monroe, County, Wisconsin.

ANSWER THE FOLLOWING QUESTIONS FULLY AND COMPLETELY:

1. Name of Applicant _____
2. Home Address of Applicant _____
3. Name of the Owner of the premises where cabaret is to be conducted

4. Location of Premises to be licensed by legal description or street address _____
5. Name and address of Lessee of Premises _____

6. Describe any other business conducted on the premises

7. Name of Manager to be in charge of cabaret

8. Employment and occupation of the Manager of the Cabaret for the past two years _____
9. Are you a citizen of the United States? _____
Of Wisconsin _____ Age _____
10. Have you been a resident of the State of Wisconsin continuously for one (1) year prior to the date of this application? _____
11. Have you ever been convicted of violating any federal laws anywhere?

12. Have you been convicted of violating any license law or ordinance regulating the sale of intoxicating liquors? _____

SUBSCRIBED AND SWORN TO BEFORE ME
this ____ day of _____, 20_____

(Clerk/Notary Public)

Signature of Applicant

OFFICE USE ONLY-----

Date Presented to Council _____ License Number _____

Date Approved by Council _____ License Issued _____

Receipt Number & Date Paid _____