

ANNUAL TEENAGE PUBLIC DANCE PERMIT APPLICATION

Governed by Lincoln Municipal Code Chapter 5.20

Revised 2/28/08

FEE: \$50.00; **LICENSE YEAR:** June 1 thru May 31; **RESTRICTIONS:** Admit only persons 14 yrs. of age & over & who have not reached their 19th Birthday.; Please allow a **minimum of 2 WEEKS** for processing.

RETURN APPLICATION , SITE PLAN & PAYMENT TO: City Clerk's Office, 555 S. 10th St., Lincoln NE 68508 (Make checks payable to **City of Lincoln.**) (Please note: Payments by check authorize the City to make a one-time electronic fund transfer. Funds may be withdrawn immediately and your check will not be returned.)

THE SITE PLAN MUST INCLUDE:

- A diagram of the space to be used for dancing
- Any dressing rooms, check rooms, bathrooms, entrances, exits, stairways, elevators & fire escapes.
- Must be no larger than an 8½" x 11" sheet of paper.
- **Must** be attached to this application *prior* to submission. **APPLICATION WILL BE RETURNED IF THIS IS NOT SUPPLIED.**
- A new application **MUST** be submitted if **ANY** changes are made to the establishment or dance area after the permit has been approved. This includes change of owners, remodeling, changes to the establishment site plan, etc.

Please Note: Lincoln Municipal Code Section 5.20.130 **requires** all dances to end by 12 a.m.

Please PRINT using blue or black ink only.

APPLICANT'S INFORMATION - must be 21 yrs. of age					
NAME:					
STREET ADDRESS:					
CITY:		STATE:		ZIP:	
PHONE #:		CELL#:			
D.O.B.:					
EMAIL ADDRESS:					

BUSINESS INFORMATION					
NAME:					
STREET ADDRESS:					
CITY:		STATE:		ZIP:	
PHONE #:		CELL#:		FAX #:	
EMAIL ADDRESS:					

MAILING ADDRESS					
NAME:					
STREET ADDRESS:					
CITY:		STATE:		ZIP:	

PROPERTY OWNER'S INFORMATION					
NAME:					
STREET ADDRESS:					
CITY:		STATE:		ZIP:	

MAX. # OF PERSONS ALLOWED ON THE PREMISES (OCCUPANCY):	
FLOOR OF BUILDING WHERE DANCING & ALL OTHER ROOMS ARE LOCATED (i.e., 1 st , 2 nd , etc.):	

EMPLOYEE INFORMATION		
<i>Names of all persons employed by applicant in conducting dance</i>		

MINIMUM NUMBER OF ADULT SUPERVISORS:	
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NAME(S), ADDRESS(ES), & AGE(S) OF SUPERVISORS		
Names	Addresses (Include City, State, & Zip)	Age

