

CITY OF VAN BUREN
SEXUALLY ORIENTED BUSINESS
BUSINESS LICENSE APPLICATION

NOTICE: IF THE SEXUALLY ORIENTED BUSINESS IS TO BE OPERATED BY AN INDIVIDUAL, THAT INDIVIDUAL MUST SIGN THE APPLICATION AS APPLICANT. IF THE OPERATOR OF THE SEXUALLY ORIENTED BUSINESS IS TO BE A PARTNERSHIP, EACH GENERAL PARTNER MUST SIGN THE APPLICATION AS APPLICANT. IF THE SEXUALLY ORIENTED BUSINESS IS TO BE OPERATED BY CORPORATION; EACH OFFICER AND DIRECTOR MUST SIGN THE APPLICATION AS APPLICANT. IF THE SEXUALLY ORIENTED BUSINESS IS TO BE OPERATED BY A LIMITED LIABILITY COMPANY, EACH MEMBER MUST SIGN THE APPLICATION AS APPLICANT.

1. NAME AND ADDRESS OF OPERATOR:

2. TYPE OF OPERATOR:

INDIVIDUAL___ PARTNERSHIP___ CORPORATION___
LIMITED LIABILITY CORPORATION___ OTHER___
IN OTHER, TYPE

3. TAX IDENTIFICATION NUMBER OF OPERATOR:

4. NAME UNDER WHICH ESTABLISHMENT IS TO BE OPERATED:

5. GENERAL DESCRIPTION OF SERVICES TO BE PROVIDED:

6. ADDRESS OF ESTABLISHMENT:

7. LEGAL DESCRIPTION OF TRACT OF LAND WHERE ESTABLISHMENT IS TO BE LOCATED:

8. TELEPHONE NUMBER OF ESTABLISHMENT _____

9. SINGLE CLASSIFICATION OF LICENSE APPLIED FOR:

- ADULT ARCADE
- ADULT BOOKSTORE OR ADULT VIDEO STORE
- ADULT CABARET
- ADULT MOTEL
- ADULT MOTION PICTURE THEATER
- ADULT THEATER
- ESCORT AGENCY
- NUDE MODEL STUDIO
- SEXUAL ENCOUNTER CENTER

10. IF ESTABLISHMENT FOR WHICH LICENSE IS APPLIED IS CURRENTLY IN OPERATION:

DATE ESTABLISHMENT ACQUIRED BY OWNER (S):

DATE ON WHICH ESTABLISHMENT BEGAN OPERATION AS SEXUALLY ORIENTED BUSINESS AT LOCATION FOR WHICH BUSINESS LICENSE IS SOUGHT:

11. IF ESTABLISHMENT FOR WHICH LICENSE IS APPLIED IS NOT IN OPERATION:

EXPECTED START UP DATE (NUMBER OF DAYS FROM ISSUANCE OF LICENSE):

IF EXPECTED START UP DATE IS MORE THAN TEN (10) DAYS FOLLOWING DATE OF ISSUANCE OF BUSINESS LICENSE, GIVE EXPLANATION OF CONSTRUCTION, REPAIR OR REMODELING WORK OR OTHER CAUSE OF EXPECTED DELAY AND STATEMENT OF TIME SCHEDULE AND PLAN FOR ACCOMPLISHING SAME:

12. IF SINGLE PROPRIETORSHIP OWNER:

NAME: _____
STREET: _____
ADDRESS: _____

MAILING
ADDRESS: _____

DRIVER'S
LICENSE
NO./ STATE: _____
SOCIAL SECURITY NO.: _____
TAX IDENTIFICATION NO.: _____

13. IF PARTNERSHIP OWNER – FOR EACH PARTNER: (ATTACH MORE SHEETS IF NECESSARY)

(A)
NAME: _____
STREET
ADDRESS: _____

MAILING
ADDRESS: _____

DRIVER'S
LICENSE
NO./ STATE: _____
SOCIAL SECURITY NO.: _____
TAX IDENTIFICATION NO.: _____

(B)
NAME: _____
STREET:
ADDRESS: _____

MAILING
ADDRESS: _____

DRIVER'S

LICENSE
NO./ STATE: _____

SOCIAL SECURITY NO.: _____

TAX IDENTIFICATION NO.: _____

14. IF CORPORATE OWNER – FOR EACH OFFICER AND DIRECTOR:
(ATTACH MORE SHEETS IF NECESSARY)

PRESIDENT:

NAME: _____
STREET
ADDRESS: _____

MAILING
ADDRESS: _____

DRIVER'S
LICENSE
NO./ STATE: _____

SOCIAL SECURITY NO.: _____

VICE-PRESIDENT:

NAME: _____
STREET
ADDRESS: _____

MAILING
ADDRESS: _____

DRIVER'S
LICENSE
NO./ STATE: _____

SOCIAL SECURITY NO.: _____

SECRETARY

NAME: _____
STREET
ADDRESS: _____

MAILING
ADDRESS: _____

DRIVER'S _____

LICENSE
NO./STATE: _____

SOCIAL SECURITY NO.: _____

TREASURER:
NAME: _____
STREET
ADDRESS: _____

MAILING
ADDRESS: _____

DRIVER'S
LICENSE
NO./ STATE: _____

DIRECTOR (S)
(1)
NAME: _____
STREET
ADDRESS: _____

MAILING
ADDRESS: _____

DRIVER'S
LICENSE
NO./ STATE: _____

SOCIAL SECURITY NO.: _____

(2)
NAME: _____
STREET
ADDRESS: _____

MAILING
ADDRESS: _____

DRIVER'S
LICENSE
NO./ STATE: _____

SOCIAL SECURITY NO.: _____

(3)
 NAME: _____
 STREET _____
 ADDRESS: _____

 MAILING _____
 ADDRESS: _____

 DRIVER'S _____
 LICENSE _____
 NO./ STATE: _____
 SOCIAL SECURITY NO.: _____

15. IF LIMITED LIABILITY COMPANY OWNER – FOR EACH MEMBER:
 (ATTACH MORE SHEETS IF NECESSARY)

(A) MEMBER:
 NAME: _____
 STREET _____
 ADDRESS: _____

 MAILING _____
 ADDRESS: _____

 DRIVER'S _____
 LICENSE _____
 NO./ STATE: _____
 SOCIAL SECURITY NO.: _____
 TAX IDENTIFICATION NO.: _____

(B) MEMBER:
 NAME: _____
 STREET _____
 ADDRESS: _____

 MAILING _____
 ADDRESS: _____

 DRIVER'S _____
 LICENSE _____
 NO./ STATE _____
 SOCIAL SECURITY NO.: _____

TAX IDENTIFICATION NO.: _____

(C) MEMBER:

NAME: _____

STREET _____

ADDRESS: _____

MAILING _____

ADDRESS: _____

DRIVER'S _____

LICENSE _____

NO./ STATE: _____

SOCIAL SECURITY NO.: _____

TAX IDENTIFICATION NO.: _____

16. HAS ANY PERSON OR ENTITY LISTED ABOVE (SECTIONS 12-15) EVER BEEN CONVICTED OF THE FOLLOWING SPECIFIED CRIMINAL ACTIVITY:

(A) CARNAL ABUSE; INDECENT EXPOSURE; RAPE; SEXUAL ABUSE; VIOLATION OF A MINOR; PUBLIC SEXUAL INDECENCY; SEXUAL MISCONDUCT; SEXUAL SOLICITATION OF MINORS; SODOMY; PROSTITUTION; SEXUAL SOLICITATION OF A CHILD; PROMOTION OF PROSTITUTION; DISSEMINATION OF OBSCENITY; SALE, DISTRIBUTION OR DISPLAY OF HARMFUL MATERIAL TO A MINOR; SEXUAL PERFORMANCE BY A CHILD; POSSESSION OR DISTRIBUTION OF CHILD PORNOGRAPHY; PUBLIC LEWDNESS; SEXUAL ASSAULT; MOLESTATION OF A CHILD; OR ANY SIMILAR SEX RELATED OFFENSES TO THOSE DESCRIBED ABOVE UNDER THE CRIMINAL OR PENAL CODE OF THIS STATE, OTHER STATES OR OTHER COUNTRIES.

(B) FOR WHICH:

(1) LESS THAN TWO (2) YEARS HAVE ELAPSED SINCE THE DATE OF CONVICTION OR THE DATE OF RELEASE FROM CONFINEMENT IMPOSED FOR THE CONVICTION, WHICHEVER IS THE LATER DATE, IF THE CONVICTION IS OF A MISDEMEANOR OFFENSE.

(2) LESS THAN FIVE (5) YEARS HAVE ELAPSED SINCE THE DATE OF CONVICTION OR THE DATE OF

RELEASE FROM CONFINEMENT, WHICHEVER IS LATER, IF THE CONVICTION IS OF A FELONY OFFENSE.

IF YES, FOR EACH, PLEASE STATE THE OFFENSE, DATE, PLACE AND JURISDICTION. (ATTACH ADDITIONAL SHEETS IF NECESSARY.)

- 17. HAS ANY PERSON OR ENTITY LISTED ABOVE (SECTION 12-15) HAD A PREVIOUS LICENSE UNDER THIS ORDINANCE OR OTHER SIMILAR SEXUALLY ORIENTED BUSINESS ORDINANCE FROM ANOTHER CITY OR COUNTY DENIED, SUSPENDED OR REVOKED?

IF YES, PLEASE STATE THE NAME AND LOCATION OF THE SEXUALLY ORIENTED BUSINESS FOR WHICH THE SEXUALLY LICENSE WAS DENIED, SUSPENDED OR REVOKED, AS WELL AS THE DATE OF THE DENIAL, SUSPENSION OR REVOCATION.

- 18. HAS ANY PERSON OR ENTITY LISTED ABOVE (SECTION 12-15) BEEN A GENERAL PARTNER IN A PARTNERSHIP OR AN OFFICER OR DIRECTOR OF A CORPORATION OR A MEMBER OF A LIMITED LIABILITY COMPANY THAT IS OR WAS LICENSED UNDER A SEXUALLY ORIENTED BUSINESS ORDINANCE WHOSE BUSINESS LICENSE HAS PREVIOUSLY BEEN DENIED, SUSPENDED OR REVOKED?

IF YES, STATE THE NAME AND LOCATION OF THE SEXUALLY ORIENTED BUSINESS FOR WHICH THE BUSINESS LICENSE WAS DENIED, SUSPENDED OR REVOKED, AS WELL AS THE DATE OF THE DENIAL, SUSPENSION OR REVOCATION.

- 19. DOES ANY PERSON OR ENTITY LISTED ABOVE (SECTION 12-15) HOLD ANY OTHER LICENSE UNDER THIS ORDINANCE OR OTHER SIMILAR SEXUALLY ORIENTED BUSINESS ORDINANCE FROM ANOTHER CITY OR COUNTY? _____

IF SO, STATE THE NAMES AND LOCATIONS OF SUCH OTHER LICENSED BUSINESSES.

- 20. FOR EACH PERSON OR ENTITY LISTED ABOVE (SECTION 12-15), STATE THE SEXUALLY ORIENTED BUSINESS LICENSE HISTORY FOR FIVE (5) YEARS IMMEDIATELY PRECEDING THE DATE OF THE FILING OF THIS APPLICATION, INCLUDING WHETHER SUCH APPLICANT IN THIS OR ANY OTHER CITY, COUNTY, STATE OR COUNTRY HAS EVER HAD ANY SUCH LICENSE, PERMIT OR AUTHORIZATION DENIED, REVOKED OR SUSPENDED. IF SO, STATE THE NAME (S) UNDER WHICH THE LICENSE WAS SOUGHT AND/OR ISSUED, THE NAME (S) OF THE ISSUING OR DENYING JURISDICTION, AND DESCRIBE IN FULL THE REASON (S) FOR THE DENIAL, REVOCATION OR SUSPENSION. ALSO PLEASE ATTACH A COPY OF ANY ORDER OF DENIAL, REVOCATION OR SUSPENSION HERETO.

THE UNDERSIGNED STATE UNDER OATH THAT HE/SHE/THEY HAS/HAVE PERSONAL KNOWLEDGE OF THE INFORMATION CONTAINED IN THIS APPLICATION AND THAT THE INFORMATION CONTAINED HEREIN AND ATTACHED HERETO IS TRUE, CORRECT AND CURRENT, AND, THE UNDERSIGNED ACKNOWLEDGE (S) RECEIPT OF A COPY OF CITY OF VAN BUREN ORDINANCE 25-2002 AND THAT HE/SHE/THEY HAS/HAVE READ SAME.

APPLICANT

APPLICANT

APPLICANT

APPLICANT

APPLICANT

APPLICANT

MATERIALS TO BE ATTACHED TO APPLICATION FORM:

1. RECENT COLOR PHOTOGRAPH OF EACH APPLICANT
2. FINGERPRINTS OF EACH APPLICANT
3. LICENSE FEE OF \$250.00.
4. A SKETCH OR DIAGRAM SHOWING THE CONFIGURATION OF THE PREMISES, INCLUDING A STATEMENT OF TOTAL FLOOR SPACE OCCUPIED BY THE BUSINESS. THE SKETCH OR DIAGRAM NEED NOT BE PROFESSIONALLY PREPARED BUT MUST BE DRAWN TO A DESIGNATED SCALE OR DRAWN WITHIN MARKED DEMENSIONS OF THE INTERIOR OF THE PREMISES TO AN ACCURACY OF PLUS OR MINUS SIX INCHES.
5. IF ESTABLISHMENT IS AN ARKANSAS CORPORATION, LIMITED LIABILITY COMPANY OR LIMITED PARTNERSHIP, A CERTIFICATE OF GOOD STANDING ISSUED BY THE SECRETARY OF STATE OF ARKANSAS.
6. IF ESTABLISHMENT IS A FOREIGN CORPORATION, A CERTIFIED COPY OF THE CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN ARKANSAS.
7. A CURRENT CERTIFICATE AND STRAIGHT LINE DRAWING PREPARED WITHIN THIRTY (30) DAYS PRIOR TO APPLICATION BY A REGISTERED LAND SURVEYOR DEPICTION OF THE PROPERTY LINES AND THE STRUCTURES CONTAINING ANY EXISTING SEXUALLY ORIENTED BUSINESS WITHIN 1,000 FEET OF THE PROPERTY TO BE CERTIFIED; THE PROPERTY LINES OF ANY ESTABLISHED CHURCH; PUBLIC OR PRIVATE ELEMENTARY, SECONDARY OR POST-SECONDARY SCHOOL; PUBLIC PARK; LICENSED DAY CARE CENTER; A CLUB, ORGANIZATION, FACILITY, OR BUSINESS THAT IS ORIENTED PRIMARILY TOWARDS CHILDREN OR YOUTH; ANY ESTABLISHED RESIDENTIAL DISTRICT WITHIN 1,000 FEET OF THE PROPERTY TO BE CERTIFIED. FOR THESE PURPOSES, A USE SHALL BE CONSIDERED EXISTING OR ESTABLISHED IF

IT IS IN EXISTENCE AT THE TIME AN APPLICATION IS SUBMITTED.

8. ITEMS (5) THROUGH (7) ABOVE SHALL NOT BE REQUIRED FOR A RENEWAL APPLICATION IF THE ORIGINAL APPLICATION OR PREVIOUS RENEWAL APPLICATIONS FILED WITH THE CITY OF VAN BUREN REMAIN CORRECT AND CURRENT. IF YOU ARE FILING A RENEWAL APPLICATION, THEN THESE THREE ITEMS NEED NOT BE ATTACHED TO YOUR APPLICATION.
9. IF APPLICANT WISHES TO OPERATE A SEXUALLY ORIENTED BUSINESS OTHER THAN AN ADULT MOTEL, WHICH EXHIBITS ON THE PREMISES IN A VIEWING ROOM OF LESS THAN 150 SQUARE FEET OF FLOOR SPACE, PHOTOGRAPHS, SLIDES, FILMS, MOTION PICTURE, VIDEO CASSETTES, VIDEO DISC, ANY MAGNETIC OR ELECTRONIC VIDEO REPRODUCTIONS, OR ANY OTHER VISUAL REPRESENTATIONS THAT BY ANY FORM OR MEDIUM DEPICTS OR DESCRIBES "SPECIFIED SEXUAL ACTIVITIES" OR "SPECIFIED ANATOMICAL AREAS" AS DEFINED IN CITY OF VAN BUREN ORDINANCE NO. 25-2002, THEN THIS APPLICATION SHALL BE ACCOMPANIED BY A DIAGRAM OF THE PREMISES SHOWING A PLAN THEREOF, SPECIFYING THE LOCATION OF ONE OR MORE MANAGER'S STATIONS AND THE LOCATION OF ALL OVERHEAD LIGHTING FIXTURES AND DESIGNATING ANY PORTION OF THE PREMISES IN WHICH PATRONS WILL NOT BE PERMITTED. A MANAGER'S STATION MAY NOT EXCEED 32 SQUARE FEET OF FLOOR SPACE. THE DIAGRAM SHALL ALSO DESIGNATE THE PLACE AT WHICH THE BUSINESS LICENSE WILL BE CONSPICUOUSLY POSTED, IF GRANTED. A PROFESSIONALLY PREPARED DIAGRAM IN THE NATURE OF AN ENGINEER'S OR ARCHITECT'S BLUEPRINT SHALL NOT BE REQUIRED; HOWEVER, EACH DIAGRAM SHALL BE ORIENTED TO THE NORTH OR TO SOME DESIGNATED STREET OR OBJECT AND SHOULD BE DRAWN TO A DESIGNATED SCALE OR WITH MARKED DIMENSIONS SUFFICIENT TO SHOW THE VARIOUS INTERNAL DIMENSIONS OF ALL AREAS SO THE INTERIOR OF THE PREMISES TO AN ACCURACY OF PLUS OR MINUS SIX INCHES.

THIS APPLICATION, ONCE COMPLETED, MUST BE RETURNED TO:

LICENSING DIRECTOR
OFFICE OF THE CHIEF OF POLICE
111 SOUTH 11TH
VAN BUREN, AR. 72956

CITY OF VAN BUREN
SEXUALLY ORIENTED BUSINESS
EMPLOYEE LICENSE APPLICATION

1. DATE: _____
2. LEGAL NAME: _____
3. STAGE NAME: _____
4. ALIAS (ES): _____
5. AGE: _____
6. DATE OF BIRTH: _____
7. PLACE OF BIRTH: _____
8. HEIGHT: _____
9. WEIGHT: _____
10. HAIR COLOR: _____
11. EYE COLOR _____
12. PRESENT
RESIDENCE
ADDRESS: _____

13. PRESENT
RESIDENCE
TELEPHONE NO.: _____
14. PRESENT BUSINESS
ADDRESS: _____

15. PRESENT BUSINESS TELEPHONE NO.: _____
16. DRIVER'S LICENSE NUMBER: _____

17. DRIVER'S LICENSE – STATE OF ISSUANCE: _____

18. DRIVER'S LICENSE – DATE OF ISSUANCE: _____

19. OTHER IDENTIFICATION CARD INFORMATION: _____

20. SOCIAL SECURITY NUMBER: _____

21. HAVE YOU EVER BEEN CONVICTED OF THE FOLLOWING SPECIFIED CRIMINAL ACTIVITY:

(A) CARNAL ABUSE; IDECENT EXPOSURE; RAPE; SEXUAL ABUSE; VIOLATION OF A MINOR; PUBLIC SEXUAL INDECENCY; SEXUAL MISCONDUCT; SEXUAL SOLICITATION OF MINORS; SODOMY; PROSTITUTION; SEXUAL SOLICITATION OF A CHILD; PROMOTION OF PROSTITUTION; DISSEMINATION OF OBSCENITY; SALE, DISTRIBUTION OR DISPLAY OF HARMFUL MATERIAL TO A MINOR; SEXUAL PERFORMANCE BY A CHILD; POSSESSION OR DISTRIBUTION OF CHILD PORNOGRAPHY; PUBLIC LEWDNESS; SEXUAL ASSAULT; MOLESTATION OF A CHILD; OR ANY SIMILAR SEX RELATED OFFENSES TO THOSE DESCRIBED ABOVE UNDER CRIMINAL OR PENAL CODE OF THIS STATE, OTHER STATES OR OTHER COUNTRIES.

(B)FOR WHICH:

(1) LESS THAN TWO (2) YEARS HAVE ELAPSED SINCE THE DATE OF CONVICTION OR THE DATE OF RELEASE FROM CONFINEMENT IMPOSED FOR THE CONVICTION, WHICHEVER IS THE LATER DATE, IF THE CONVICTION IS OF A MISDEMEANOR OFFENSE.

(2) LESS THAN FIVE (5) YEARS HAVE ELAPSED SINCE THE DATE OF CONVICTION OR THE DATE OF RELEASE FROM CONFINEMENT, WHICHEVER IS LATER, IF THE CONVICTION IS OF A FELONY OFFENSE.

IF YES, FOR EACH, PLEASE STATE THE OFFENSE, DATE, PLACE AND JURISDICTION. (ATTACH ADDITIONAL SHEETS IF NECESSARY).

21. PLEASE PROVIDE A STATEMENT DETAILING YOU SEXUALLY ORIENTED BUSINESS EMPLOYEE LICENSE HISTORY FOR THE FIVE (5) YEARS IMMEDIATELY PROCEEDING THE DATE OF THE FILING OF THIS APPLICATION. THIS STATEMENT MUST INCLUDE ANY INFORMATION RELATING TO WHETHER YOU, IN THE CITY OF VAN BUREN OR IN ANY OTHER CITY, COUNTY, STATE OR COUNTRY, HAVE EVER HAD ANY SUCH LICENSE, PERMIT OR AUTHORIZATION TO DO BUSINESS DENIED, REVOKED, OR SUSPENDED. IN THE EVENT OF ANY SUCH DENIAL, REVOCATION R SUSPENSION, STATE THE NAME (S) UNDER WHICH THE LICENSE WAS SOUGHT AND/OR ISSUED, THE NAME (S) OF THE ISSUING OR DENYING JURISDICTION. ALSO, DESCRIBE IN FULL DETAIL THE REASON (S) FOR THE DENIAL, REVOCATION OR SUSPENSION. A COPY OF ANY ORDER OF DENIAL, REVOCATION, OR SUSPENSION SHALL BE ATTACHED TO THE APPLICATION.

THE UNDERSIGNED STATES UNDER OATH THAT HE/SHE HAS PERSONAL KNOWLEDGE OF THE INFORMATION CONTAINED IN THIS APPLICATION AND THAT THE INFORMATION CONTAINED HEREIN AND ATTACHED HERETO IS TRUE AND CORRECT AND, THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF A COPY OF CITY OF VAN BUREN ORDINANCE NO. 25-2002 AND THAT HE/SHE HAS READ SAME.

APPLICANT

MATERIAL TO BE ATTACHED TO APPLICATION FORM:

1. COPY OF PROOF OF AGE
2. COLOR PHOTOGRAPH CLEARLY SHOWING APPLICANT'S FACE.
3. FINGERPRINTS
4. LICENSE FEE \$25.00

THIS APPLICATION, ONCE COMPLETED, MUST BE RETURNED DURING REGULAR BUSINESS HOURS TO:

LICENSING DIRECTOR
OFFICE OF CHIEF OF POLICE
111 SOUTH 11TH
VAN BUREN, AR 72956