## TEEN NIGHTCLUB/CULTURAL PERFORMANCE VENUE PERMIT APPLICATION

For Office Use Only				
License No				
Date Issued				

LEASE PRINT OR TYPE INFORMATION	PERMIT APPLICATION
pplication Date:	(LICENSES ARE NOT TRANSFERABLE)

accordance with Title 10	of the Anchorage Mun	icipal Code for the 20	, 20	license years.			
Applicant's Name:					(Phone)		
Applicant's Mailing Addre	ess:				(ZIP)		
Applicant's Street Addre	ss:				_ (ZIP)		
	_ (Phone)						
Business Mailing Address:  Business Street Address:							
					lave you ever had any license o	or permit revoked or suspended	? ☐ YES ☐ NO If yes, give deta
ist the true name, residence ad	dress, daytime telephone numb	er, and date of birth of each person of	directly engaged or e	mployed in the manageme	ent or operation of the busin	less.	
NAME	TITLE	RESIDENCE ADDRI	ESS		PHONE #	BIRTHDATE	
DWNER/LANDLORD NAME _ DWNER/LANDLORD ADDRES							
f a partnership, list the true nam	e, principal occupation, residen	ce address, birth date and daytime	telephone number of	f each partner and numbe	r of shares owned or contro	olled by each.	
IAME	OCCUPATION	RESIDENCE ADDRESS		PH	IONE #	BIRTHDATE SHARES	
	<del></del>					<del></del>	
•		compliance with the Anchorage	•		y with all laws, including,	, but not limited to, the	
•	•	the TEEN NIGHTCLUB OR CULT			Francisco Data		
State of Alaska Busine	ss license No	(please attach a copy)	_ Date Issued_		Expiration Date		
F BUSINESS ENTITY, F	PLEASE COMPLETE:						
State of Alaska	\						
olale of Alaska	) ) ss:						
Third Judicial District	)						
		, being duly sworn, de	poses and says	that he/she is the ir	ndividual making the	foregoing application	
and authorized agent for nis/her knowledge.	r this business that the	answers to the questions a	and other stater	ments contained in	this application are t	true and complete to	
Subscribed and Sworn to	o before me this	day of, 2	20				
				Się	gnature of Applicant		
				Notary Public	expires:		
				iviy commission	oxpiios		

## TEEN NIGHTCLUB/CULTURAL PERFORMANCE VENUE PERMIT APPLICATION STATEMENT OF PROCEDURES FOR CROWD PROTECTION . TRAFFIC CONTROL AND CURFEW LAW COMPLIANCE

Business Name and Address:	
How will you identify when occupancy/capacity limits have been met?	
How will entry be restricted when the premise is at capacity?	
3. What are your emergency evacuation plans? Who will be responsible for clearing	the nightclub in case of emergency?
4 Identify the means to control or evict persons who pose a threat or hazard to others	s on the premises
5. What procedure is used to summon Police or Fire to an emergency or altercation?	?
6. Describe procedures for admission. Where is the line located and what method w	· · · · · · · · · · · · · · · · · · ·
7. Describe procedures for ensuring compliance with the Municipality's curfew ordinal	ance.
STATEMENT OF PARKING PLAN AND DISTANCE F	FROM RESIDENTIAL BUILDINGS
1. How do you plan to provide parking for patrons? How many parking spaces will be gram.	
2. What is the distance from the location of the proposed TEEN NIGHTCLUB/CULTUring?  ———————————————————————————————————	URAL PERFORMANCE VENUE to the nearest residential dwellent of Community Planning and Development that the location of a 150 feet from the nearest residential dwelling. (An applicant is
TO BE COMPLETED BY TEEN NIGHTCLU STATEMENT ON AGE RESTRICTIONS	JB APPLICANTS ONLY
How will you verify age of prospective patrons? How will you prevent prospective the ordinance's exceptions?      How will you prevent entrance of persons for whom a parent or legal guardian has TO BE COMPLETED BY CULTURAL PERFORMAN EVIDENCE OF QUALIFICATION FOR CULTURAL PERFORMAN EVIDENCE OF QUALIFICATION FOR CULTURAL PERFORMAN EVIDENCE TO A permit as a cultural performance of persons for whom a parent or legal guardian has TO BE COMPLETED BY CULTURAL PERFORMANCE OF QUALIFICATION FOR CULTURAL PERFORMANCE OF QUALIFICATION F	requested such limitation? ICE VENUE APPLICANTS ONLY ERFORMANCE VENUE PERMITS
ATTACH ADDITIONAL SHEETS AS	NEEDED
Applicant Signature	Title
Applicant Printed Name	Date

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