



ADULT ENTERTAINMENT LICENSE APPLICATION FORM

Attendant

Operator

LICENSING REQUIREMENTS:

- Completed application form
- Proof of being at least 18 years of age
- Proof of being eligible to gain employment in Canada
- Applicable fee

Full Legal Name: (SURNAME) _____ (GIVEN) _____

List all Aliases and Stage Names Used: _____

Address: _____

(CITY) _____ (PROVINCE) _____ (POSTAL CODE) _____

Phone Number: (HOME) _____ (CELLULAR) _____

Email Address _____

Driver's License No. _____ (PROVINCE OF ISSUE) _____

Identifying marks, tattoos, birthmarks, etc. (List all and locations): _____

Date of Birth: _____ Place of Birth: _____
Month / Day / Year City/Town Prov/State Country

Documents submitted if Place of Birth is outside Canada:

- WORKING PERMIT
- LANDED STATUS DOCUMENTS
- CITIZENSHIP DOCUMENTS

Name of the Adult Entertainment Parlour you will be employed by: _____

*** READ CAREFULLY BEFORE SIGNING THIS APPLICATION ***

This application may contain personal information as defined under the *Municipal Freedom of Information and Protection of Privacy Act*. The information collected is required pursuant to the terms of the *Municipal Act* and will be used by the City of Vaughan to process the application, and to determine whether to issue a license. Information will also be used for administration of such license, and for law enforcement purposes to ensure compliance with all applicable statutes, regulations and by-laws.

Questions relating to the collection of this information should be directed to the Licensing Officer, 2141 Major Mackenzie Drive, Vaughan, Ontario, L6A 1T1, (905) 832-8504.

By signing this application the Applicant agrees that all information provided is true. The Applicant further agrees that any false information may result in a revocation of any license that may be issued.

Signature of New Applicant: _____ Date: _____

By signing the renewal portion this application below the Applicant agrees that all information provided is true. The Applicant further agrees that any false information may result in a revocation of any license that may be issued

Renewal Signature of Applicant: _____ Date: _____

Renewal Signature of Applicant: _____ Date: _____

Renewal Signature of Applicant: _____ Date: _____

OFFICE USE ONLY

License Number: _____ Accepted By: _____ Date of Issue: _____

Comments: _____

Renewal Number: _____ Accepted By: _____ Date of Issue: _____

Comments: _____

Renewal Number: _____ Accepted By: _____ Date of Issue: _____

Comments: _____

Renewal Number: _____ Accepted By: _____ Date of Issue: _____

Comments: _____