



**CITY OF LAWDALE**  
 14717 Burin Avenue • Lawndale, CA 90260 • (310) 973-3200 • Fax (310) 970-2183

## LIVE ENTERTAINMENT APPLICATION

<b>Date:</b> _____  <b>Applicant Name</b> _____  <b>Applicant Address</b> _____ <b>City</b> _____ <b>State</b> _____ <b>Zip</b> _____ <small>(Cannot be P.O. Box for non-exempt businesses per State of California, Business &amp; Professions Code-Section 17538.5)</small>  <b>Business Name</b> _____  <b>Business Address</b> _____ <b>City</b> _____ <b>State</b> _____ <b>Zip</b> _____ <small>(Cannot be P.O. Box for non-exempt businesses per State of California, Business &amp; Professions Code-Section 17538.5)</small>  <b>Mailing Address</b> _____ <b>City</b> _____ <b>State</b> _____ <b>Zip</b> _____  <b>Bus. Phone ( )</b> _____ <b>Bus. Fax ( )</b> _____ <b>Business Type</b> _____ <b>Description of Business</b> _____	<b>Ownership:</b>  • Corporation    • Corp-Ltd Liability • Partnership    • Sole Proprietor • Trust            • Non Profit • Limited Partnership  State Lic. No. _____ Lic. Type _____ Exp Date _____  <b>PERMIT FEE</b> <input type="checkbox"/> <b>PAID</b>  <div align="center"></div>
<b>Enter names of Owner, Partners, Or Corporate Officers – Use additional sheets as necessary.</b>	
<b>Owner Name</b> _____ <b>Title</b> _____ <b>Home Address</b> _____ <small>(Cannot be P.O. Box)</small>	<b>Phone #</b> _____  <b>Driver's Lic. No.</b> _____
<b>Enter names of employees involved in day to day operation – use additional sheets as necessary</b>	
<b>Employee Name</b> _____ <b>Title</b> _____ <b>Home Address</b> _____ <small>(Cannot be P.O. Box)</small>	<b>Phone #</b> _____  <b>Driver's Lic. No.</b> _____
<b>Employee Name</b> _____ <b>Title</b> _____ <b>Home Address</b> _____ <small>(Cannot be P.O. Box)</small>	<b>Phone #</b> _____  <b>Driver's Lic. No.</b> _____
<b>Describe live entertainment in detail: (1) Type of entrainment, (2) purpose of entrainment, (3) number of persons involved &amp; (4) estimated number of people to attend. Proximity to nearest residential uses on the north, south, east and west sides.</b> _____ _____ _____ _____	
<b>Admission Fee:</b>	
\$ _____ <b>PER PERSON</b> \$ _____ <b>PER GROUP</b> <input type="checkbox"/> <b>NO CHARGE</b>	
<b>Type and nature of Vehicles, Equipment, or other apparatus to be used in conecction with the event:</b>	
<b>Vehicles to be used</b> _____ <b>Sound Systems</b> _____ <b>Security and/or System Provided</b> ___ YES ___ NO <b>Security Co. Name</b> _____	
<b>Please provide a plan for control of noise affecting nearby residents or business.</b>	
_____ _____ _____	
<b>Date &amp; Time of Event: Permit will be issued for 30 days, event to take place from 7:00 pm – 11:30 pm</b>	
<b>Date</b> _____ <b>Time</b> _____	



**CITY OF LAWDALE**  
 14717 Burin Avenue • Lawndale, CA 90260 • (310) 973-3200 • Fax (310) 970-2183

***LIVE ENTERTAINMENT APPLICATION***  
***(CONTINUED)***

**Legal: Please provide information on person involved in this business who within the last five (5) years have had a liquor license, adult oriented business permit, massage establishment permit, or similar permit suspended, revoked, or cancelled; or been convicted of a felony or of any crime involving theft, embezzlement, moral turpitude, violating any municipal or county ordinance relating to the conduct of live entertainment, including noise or public nuisance.  N/A**

**Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Written Consent of Property Owner (When Applicable)**

**Date:** \_\_\_\_\_ **Print Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Please provide a statement under oath that the applicant has personal knowledge of the information contained in the application, the information contained in the application is true and correct, and that the applicant has read and understands the provisions of Chapter 17.95.**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Date** \_\_\_\_\_ **Signature/s** \_\_\_\_\_

**I DECLARE, UNDER PENALTY OF PERJURY, THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT, AND THAT ALL REQUIRED LICENSES ARE IN FULL FORCE AND EFFECT.**

**DATE:** \_\_\_\_\_ **SIGNATURE OR OWNER OR REPRESENTATIVE:** \_\_\_\_\_

**OFFICE USE ONLY – PLEASE DO NOT WRITE BELOW THIS SECTION**

**BUSINESS LICENSE NO.** \_\_\_\_\_

**Approved**       **Denied**

**Planning** \_\_\_\_\_ **Date** \_\_\_\_\_

**Municipal Services** \_\_\_\_\_ **Date** \_\_\_\_\_

**Sheriff** \_\_\_\_\_ **Date** \_\_\_\_\_

**THANK YOU FOR DOING**

**BUSINESS IN THE**

**CITY OF LAWDALE**