

Charter Township of Clinton



DANCE AND/OR ENTERTAINMENT PERMIT APPLICATION FOR LIQUOR LICENSE BUSINESS CHARTER TOWNSHIP OF CLINTON

(Effective 10/21/2016)

OFFICERS:
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A one hundred fifty dollar (\$150.00) non-refundable Application Fee made payable to the Charter Township of Clinton is required to be paid in full at the time of application. The Township departments including Police, Fire, Building, Planning and Clerk's Office may each be involved in processing, reviewing, investigating and recommending your application.

INSTRUCTIONS

Read every question carefully and answer all questions accurately. Information provided will be used in an investigation to determine whether to recommend approval or denial of your application for consideration by the Michigan Liquor Control Commission.

It is preferred that answers be typed, if it is not possible, please print neatly in ink and legibly. If space furnished is insufficient, please use additional sheets of paper. Each question must have some type of answer. If you believe it is not applicable, so note.

Submit an original application form.

All statements and documentation is subject to verification and any inaccuracies, falsifications or incomplete statements may result in a recommendation of denial.

CRITERIA

The Township recommendation considers the following criteria:

1. The safety of patrons and persons performing dance and entertainment activity.
2. Whether dance and entertainment activities may be disruptive to the peace and enjoyment of surrounding property owners.
3. Whether the dance or entertainment activity will interfere with the patron's ability to move safely in a non-obstructive manner through the premises.
4. Whether the dance or entertainment activities will result in conditions occurring detrimentally affecting the safety and welfare of persons situated on the premises.

CIVIC CENTER

40700 Romeo Plank Road • Clinton Township, Michigan • 48038 -2900
Phone: (586) 286-8000 • Fax: (586) 228-1770

REQUIRED DOCUMENTATION

The following documents must be furnished and attached to the application and clearly marked as exhibits.

1. A copy of the Articles of Incorporation, Operating Agreement, Partnership Agreement, or any other document which reflects the ownership and management of the premises.
2. Drawings to scale depicting areas to be utilized for dance and entertainment activities within the premises showing the location of other objects within the premises such as walls, benches, bars, tables, stages, etc.
3. Descriptions and photographs and any and all objects which will be used in connection with entertainment such as pianos, speaker systems, etc.
4. Product descriptions and specifications for any equipment which will amplify music.

APPLICATION DANCE AND/OR ENTERTAINMENT PERMIT

Sole Proprietor Partnership Corporation

Name of Applicant_____

Name and Address of Applicant Business_____

City/State/Zip Code_____

Home Phone_____ Business Phone_____ Cell Phone_____

Name of person submitting APPLICATION forms on behalf of Applicant (if not submitted directly by Applicant)

Name and Title_____

Residence Address_____

City/State/Zip Code_____

Home Phone_____ Business Phone_____ Cell Phone_____

Does an attorney represent Applicant? Yes No Attorney Phone_____

Name_____

Address_____

City/State/Zip Code_____

Do you want your attorney contacted with regard to this Application? Yes No

Is there a designated representative of Applicant, other than attorney, authorized to be contacted regarding this Application? Yes No

Name and Title_____

Residence Address_____

City/State/Zip Code_____

Home Phone_____ Business Phone_____ Cell Phone_____

Signed_____ Title_____ Date_____
Applicant (Sole Proprietor, General Partner, Officer of Corporation)

1. Is the legal entity holding the liquor license application for this permit delinquent in any of its real or personal property taxes? Yes No

If yes, explain: _____

BUSINESS MANAGEMENT DATA - Section 2

1. Who will manage this business?

Full Name _____

Residence Address _____

City/State/Zip Code _____

Home Phone _____ Business Phone _____ Cell Phone _____

2. Provide a copy of Management Agreement, if applicable.
3. Are you familiar with the Michigan Liquor Control Act and Rules of the Michigan Liquor Control Commission, the Charter Township of Clinton Ordinances and Health Department requirements that apply to this type of business? Yes No

BUSINESS DETAILS - Section 3

1. Is this a new or existing business? New Existing

2. Name or proposed name of this business _____

Address _____

City/State/Zip _____

Telephone Number (if in service) _____

Attach a copy of Certificate of Persons Conducting Business Under Assumed Name.

3. Who owns the building and real estate upon which the business will operate?

Full Name of person, business or corporation _____

Address _____

City/State/Zip Code _____

Home Phone _____ Business Phone _____ Cell Phone _____

Terms of lease or mortgage (attach copies)

a. Rent or mortgage payment per month _____

b. How long is lease or mortgage for _____

c. What is the total current property tax _____

Attach a copy of the Purchase Agreement, Mortgage Contract, Deed or Lease Agreement regarding the Real Estate listed above.

4. Describe the building's exterior and provide its exterior dimensions _____

Is there a basement under the building? Yes No

Describe overall condition of the building _____

5a. Has your location been approved by the Charter Township of Clinton Planning Commission?

Yes No

If yes, list date of approval _____

5b. Provide a copy of the site plan and an interior layout showing the bar, dining area, dance and entertainment areas and any proposed outdoor seating areas.

6. Has your location been approved for occupancy? Yes No

If yes, list date the occupancy permit was issued _____

Attach a copy of Certificate of Occupancy.

7. What is the approved patron capacity of your business premises? _____

If not yet approved, give approximate capacity _____

(Subject to approval by the Clinton Township Fire Department)

8. Do you intend to have dancing or entertainment at your business? Yes No

If dancing, describe size of dance floor giving dimensions in feet and inches: _____

Please attach, as required, a scaled dimension drawing.

If entertainment permit is being sought, answer the following:

Type of entertainment _____

Please attach specifications for any equipment amplifying the sound of music including speakers and photographs and descriptions of other objects to be used as part of entertainment.

Are dressing rooms required for the type of entertainment being requested? Yes No

Are adequate dressing rooms provided for each sex, other than restrooms, public rooms, kitchens, or other similar areas for the hanging of clothes by the entertainers? Yes No

Are acts secured through a booking agent? Yes No

List the name, address and telephone number of booking agent _____

Give the size and location of the stage (if any) in feet and inches _____

Please attach a scaled drawing of the stage.

If no stage, in what section of the premises do entertainers perform _____

Please attach a scaled drawing of this area.

At any time during the ownership will contests or games be allowed to on the premises?

Yes No

If so, please describe in detail the nature of the contests and games _____

At any time during the ownership will wet t-shirt displays, bathing suits, lingerie, beach attire or other fashion (men's or women's) displays or contests take place? Yes No

At any time during the ownership will mud wrestling contests, squirting liquid contests, or any other type of contest or display occur that involves participants attired in lingerie, beach-type wear, swimwear, exercise wear or dance attire? Yes No

At any time during the ownership will entertainment be offered which involves the display of male or female genitalia or anus, or the female breast, inclusive of any area of the areola?

Yes No

Please advise to whether live or amplified music will be played furnishing the following:

- a. Hours of music.
- b. Location of speakers and/or live act.
- c. Method to control sound.
- d. Description of any sound insulation existing or to be installed, including contractor and proposed date of installation.

ALL APPLICANTS MUST COMPLY FULLY WITH THE APPLICABLE LAWS AND ORDINANCES, INCLUDING BUT NOT LIMITED TO, ZONING ORDINANCES, AND THE CLINTON TOWNSHIP ORDINANCE PROHIBITING PUBLIC NUDITY.

9. Do you plan to have amusement devices on the premises such as video games, pool tables, juke boxes, etc.? Yes No

If yes, the Charter Township of Clinton Ordinance #269, must be conformed with regarding the operation of amusement devices. An amusement device license must be obtained prior to displaying any type of amusement device for operation. Information and license applications are available at the Township Clerk's Office.

10. Has this business obtained a Federal Employer Identification Number? Yes No
If yes, list number and provide a copy _____

11. Has this business obtained a Michigan Sales and Use Tax License? Yes No
If yes, list number and provide a copy _____

12. Does this business possess a license from the Michigan Bureau of Lottery? Yes No
If yes, list number and provide a copy _____

13. Does this business possess any other type of license (provide copy) issued by any other government authority? Yes No
If yes, list number and provide a copy _____

14. Are all personal and real property taxes due and owing paid?
If not, explain: _____

(Applicant must sign before a Notary Public)

Date

Notary Public, State of Michigan
County of _____
My commission expires _____