

9229 W Loomis Rd, Franklin, WI 53132

City Clerk's Office Telephone: 414-425-7500 Fax: 414-425-6428

TEMPORARY ENTERTAINMENT & AMUSEMENT

License Application

Fee: \$25/day (\$25 X	number of day(s) = \$	or Public Grant:
General Description of Enter	tainment or Amusement:	
Location of Event:		
Date(s) of Event:	Time(s) of Event:	
Business Name:		
Mailing Address:		
Telephone:	Email:	
Individual	Partnership Corp	oration
If Corporation, list names, ac	ddresses and titles of Officers:	
Name	Address	Title
Applicant Name/Person in C	harge:	
Address:		
Date of Birth:	Place	e of Birth:
Drivers License Number:		State:
Any arrests or convictions of	any Federal, State or Local offense	(s)? Yes No
List of offenses, dates & place	ces of conviction(s). If never arreste	d or charged with a crime, please indicate N
Signature:	Date	: