

TOWN OF FARMINGTON
Application for Sexually Oriented Business Permit
[Include Site Review Application]

Note: Sexually Oriented Businesses are restricted to the General Purpose District in the Town of Farmington.

Map/Lot of Subject Property: Map _____ Lot _____

Location of Property: _____

Is this property within the General Purpose Zone? Yes No
[Please check with the Code Office for Zoning Information]

If the proposed location is not within the General Purpose Zone – Stop Here.

Enclose a \$50.00 non-refundable application and investigation fee with the submission of this application. Note: Permits must be renewed on an annual basis and applicant shall pay to the Town a non-refundable permit fee of \$50.00 prior to issuance of renewal. Submit proof of age.

[Please print or type]
Application Date: _____ Application Number: _____
[office use]

Legal Name and/or any Aliases of Applicant/s: _____

Address (Residence) of Applicant/s: _____

Mailing Address of Applicant/s: _____

Telephone Number of Applicant/s: _____

Business Telephone of Applicant/s: _____

Cell Phone Number of Applicants/s: _____

Email Address of Applicant/s: _____

Owner/s of Property [if different from applicant/s]: _____

Mailing Address of Property Owner/s: _____

Telephone Number of Property Owner/s: _____

Complete name of partnership, including names of all partners and whether the partnership is general or limited and attach a copy of the partnership agreement [if applicable]: _____

Complete name of corporation and date of its incorporation; evidence that the corporation is in good standing under the laws of its State of incorporation; name and capacity of all officers, directors and principal stockholders; and the name of the registered corporate agent and the address of the registered office for service of process [if applicable]: _____

Name of Business: _____
Attach business name registration documents.

Has the applicant/s or any person residing with the applicant been convicted of a specified criminal activity as defined in the Town of Farmington Sexually Oriented Business Ordinance (11-12.7)? Yes No

If so, state the specified criminal activity involved, the date, place and jurisdiction of each: _____

Has the applicant/s or any person residing with the applicant/s had a previous permit under this Ordinance or other similar sexually oriented business ordinances for which their permit was denied, suspended, or revoked? Yes No

If so, state the date and reason for the denial, suspension or revocation.

Has the applicant/s or a person residing with the applicant/s been a partner in a partnership or an officer, director, or principal stockholder of a corporation that is permitted under the Town of Farmington Sexually Oriented Business Ordinance whose permit has previously been denied, suspended, or revoked? Yes No

If so, state the date and reason for the denial, suspension or revocation. Include the name and location of the sexually oriented business for which the permit was denied, suspended, or revoked as well as the date of denial, suspension, or revocation.

Does the applicant/s or a person residing with the applicant/s hold any other permits under this Ordinance or other similar sexually oriented business ordinance from another town, city, or country? Yes No

If so, state the names and location of such other permitted businesses.

Check the classification of the sexually oriented business:

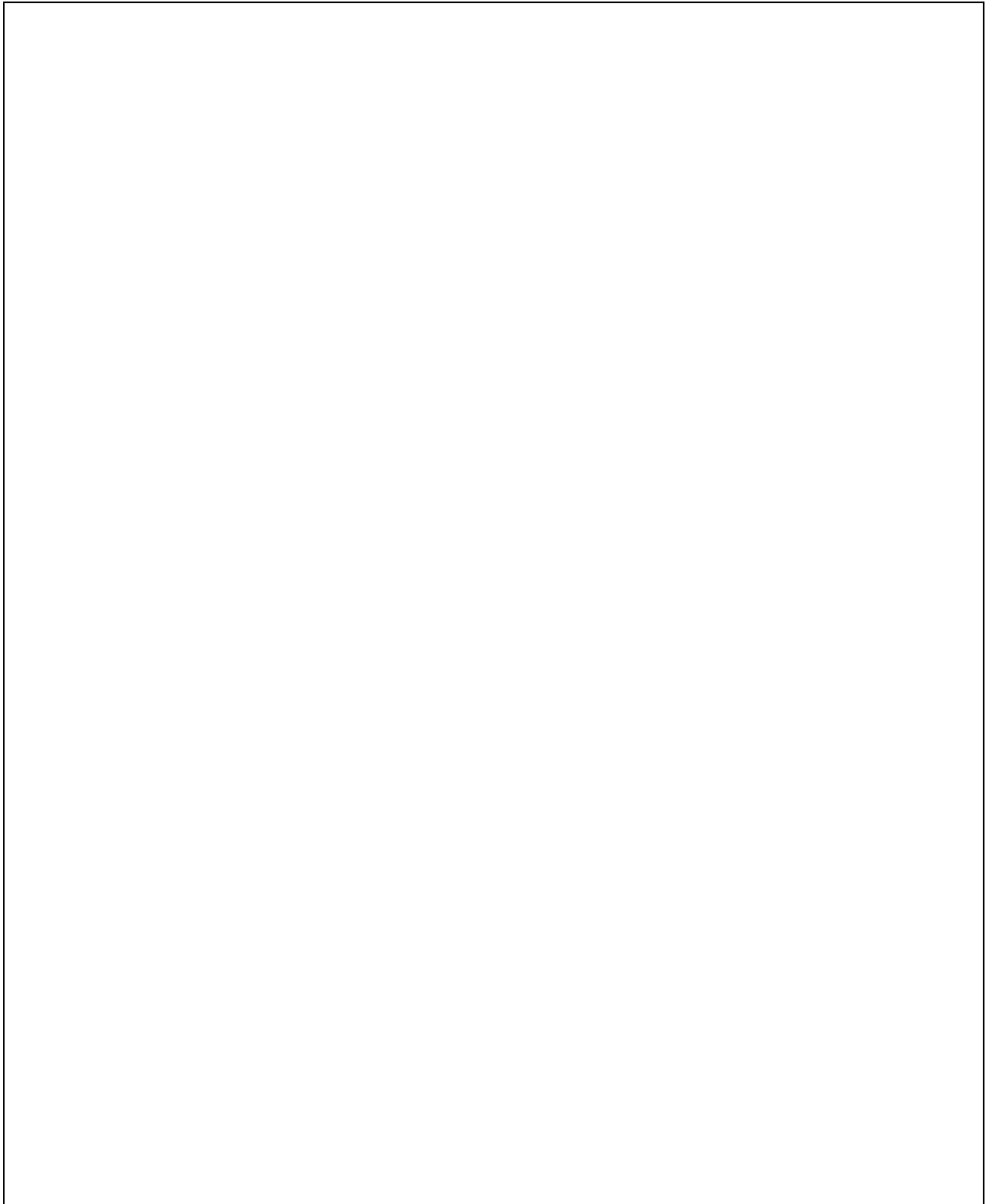
- Adult arcade
- Adult bookstores, adult novelty stores, or adult video store
- Adult cabaret
- Adult motel
- Adult motion picture theater
- Adult theater
- Escort agency
- Nude model studio
- Sexual encounter center

Applicant/s Driver's License Number: _____

Applicant/s Social Security Number: _____

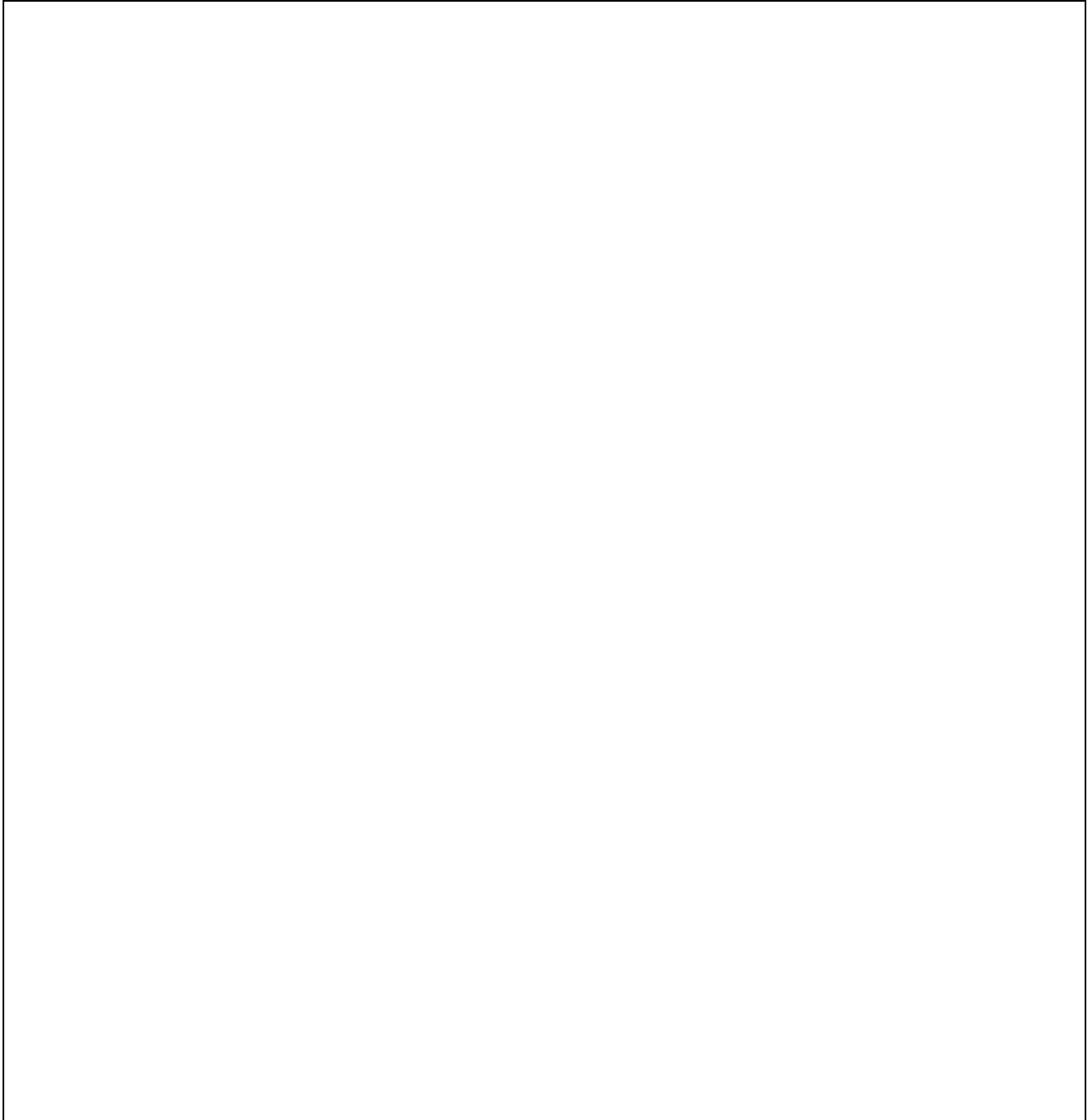
State or federally issued Tax Identification Number: _____

Sketch below a diagram showing the configuration of the premises, including a statement of total floor space occupied by the business. The sketch or diagram need not be professionally prepared, but it must be drawn to a designated scale or drawn with marked dimensions of the interior of the premises to an accuracy of plus or minus six (6) inches.

A large, empty rectangular box with a thin black border, intended for a hand-drawn sketch of the premises configuration. The box is currently blank.

Within thirty (30) days prior to submission of the application present a current certificate and straight-line drawing prepared by a registered land surveyor depicting the property lines and structures contain any existing sexually oriented businesses within 1,000 feet of the property to be certified, the property lines of any established religious institution/synagogue, school, or public park or recreation areas within 1,000 feet.

Attach recent photo/s of applicant/s.



Attach fingerprint card [See Farmington Police Department – 116 Franklin Avenue 207-778-6311].
[Note: Any fees for photographs and fingerprints shall be paid by the applicant]

