

# APPLICATION FOR PERMIT TO OPERATE AN ADULT ARCADE OR ADULT MINI-THEATRE

Date of Application:	
Control Number:	

### Instructions:

Type or print in ink. If more space is needed, attach a separate sheet of 8.5" x 11" white paper with the information. Sign, date and notarize each additional sheet of paper attached to this application.

#### General Information:

Arcade, when referred to in this application, means Adult Arcade or Adult Mini-Theatre as defined in section 28-81 of the amended Code of Ordinances of The City of Houston.

If applicant is an individual, the individual owner of the enterprise shall sign this application. If a partnership, this application shall be signed by ALL partners. If a corporation, this application shall be signed by the person responsible for the incorporation (President).

This permit application MUST be accompanied by the following:

- 1. The current calendar year Permit and Administrative fees. Fees are nonrefundable.
- 2. A certified copy of the assumed name, certificate filed in compliance with the Assumed Business of Professional Name Act if the Arcade is to operate under an assumed name.
- 3. A Diagram of the Adult Arcade showing a plan specifying the location of one or more manager's stations and the location of all lighting fixtures, areas where patrons will be excluded from being and the location where the permit, if issued, will be displayed (pursuant to Section 28-91(b) of the Code).
- 4. Certified copy of the lease agreement between the landowner and the tenant showing current lease arrangements.
- 5. Signed, dated and notarized letter from the landowner (or representative) indicating that the applicant has permission to operate an Adult Arcade on the premises.
- 6. A copy of the applicant's valid Government issued identification.

The following pages contain required information. Do not leave anything blank. If the information does not apply, indicate that in the blank provided by placing a "N/A" in the appropriate space.

POST OFFICE BOX 1561 • HOUSTON, TEXAS 77251-1561 HOUSTON PERMITTING CENTER, 1002 WASHINGTON AVENUE, 1<sup>ST</sup> FLOOR TEL: 832-394-8803 FAX: 832-395-9630

ONLINE: www.houstonpermittingcenter.org or www.houstontx.gov/ara

# ADULT ARCADE OR ADULT MINI-THEATRE



Address and Legal Description - pa	rcel of land where enterprise is located:
Street Address & Zip	
Subdivision	
Section	
Lot / Block Numbers	
Operator:	
Full Name	
Residential Address	
Identification Number	Phone Number
Owner:	
Full Name	
Residential Address	
Identification Number	Phone Number
Partnership (include type and names	
Names:	

\*If limited partnership, attach certified copy of certificate of limited partnership and all amendments.

\*If foreign partnership, attach qualified documents together with all amendments.

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of all officers, directors, majority shareholde	ers):			
Name of Corporation				
Type of Corporation				
State of CorporationNames of Directors, Officers, Shareholders				
Agent (applicant liaison):				
Full Name				
Local Address				
Phone Number				
Section 28).	of an Adult Arcade / Adult Mini-Theatre (Article II,			
Applicant:				
Date:				
FOR OFFICE	USE ONLY:			
Receipt No.:	Date Issued:			
Permit No.:	Date Denied:			

Corporation (include exact name and state of incorporation, type of corporation, names

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832-395-9630

## **AFFIDAVIT**

## Section. 1-11. Application for permits, licenses, etc.

not be issued unless the	· · · · · · · · · · · · · · · · · · ·	y code or ordinance of the city shall plication the following declaration, 132.001:
My name is		,
	(first, middle and last name	e),
My date of birth is	, and	My address is
		(street number)
	,	and .
(street name,	city, state, zip code)	and (country)
excuse or approve any viola To the extent that this decla persons, I certify that I ha	tion of deed restrictions or city, stration is made on behalf of a cor	cense; permit or certificate does not state, or federal laws or regulations. Poration or any other legal entity or ontents of the application and this on.
declare under penalty of pe	rjury that the foregoing is true ar	nd correct.
Executed in	County, State of	of,
on the day of _		
	(month)	(year)
Declarant		