

Date\_\_\_\_\_ License Number\_\_\_\_\_  
Receipt Number\_\_\_\_\_ Expiration Date\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Individual\_\_\_\_ Partnership\_\_\_\_ Corporation\_\_\_\_ Limited Liability Company\_\_\_\_  
Trade Name\_\_\_\_\_

CIRCUS LICENSE APPLICATION

Name of Individual/Partner/Corporation/LLC\_\_\_\_\_  
Business Address\_\_\_\_\_  
Phone Number\_\_\_\_ ( \_\_\_\_ )\_\_\_\_\_  
Circus Company\_\_\_\_\_  
Premises Description\_\_\_\_\_  
Agent/Manager\_\_\_\_\_  
Insurance Company\_\_\_\_\_ Insurance Exp.\_\_\_\_\_

I hereby state that I am familiar with the laws, ordinances and regulations applicable to the license being applied for and hereby agree, if granted such license, to comply with all said provisions.

Signature\_\_\_\_\_

\_\_\_\_\_  
City Attorney Dated\_\_\_\_\_