



# ADULT ENTERTAINMENT LICENSE APPLICATION FORM

Attendant

Operator

### LICENSING REQUIREMENTS:

- Completed application form
- Proof of being at least 18 years of age
- Proof of being eligible to gain employment in Canada
- Applicable fee

Full Legal Name: (SURNAME) \_\_\_\_\_ (GIVEN) \_\_\_\_\_

List all Aliases and Stage Names Used: \_\_\_\_\_

Address: \_\_\_\_\_

(CITY) \_\_\_\_\_ (PROVINCE) \_\_\_\_\_ (POSTAL CODE) \_\_\_\_\_

Phone Number: (HOME) \_\_\_\_\_ (CELLULAR) \_\_\_\_\_

Email Address \_\_\_\_\_

Driver's License No. \_\_\_\_\_ (PROVINCE OF ISSUE) \_\_\_\_\_

Identifying marks, tattoos, birthmarks, etc. (List all and locations): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
Month / Day / Year City/Town Prov/State Country

Documents submitted if Place of Birth is outside Canada:

- WORKING PERMIT
- LANDED STATUS DOCUMENTS
- CITIZENSHIP DOCUMENTS

**Name of the Adult Entertainment Parlour you will be employed by:** \_\_\_\_\_

### \*\*\* READ CAREFULLY BEFORE SIGNING THIS APPLICATION \*\*\*

This application may contain personal information as defined under the *Municipal Freedom of Information and Protection of Privacy Act*. The information collected is required pursuant to the terms of the *Municipal Act* and will be used by the City of Vaughan to process the application, and to determine whether to issue a license. Information will also be used for administration of such license, and for law enforcement purposes to ensure compliance with all applicable statutes, regulations and by-laws.

Questions relating to the collection of this information should be directed to the Licensing Officer, 2141 Major Mackenzie Drive, Vaughan, Ontario, L6A 1T1, (905) 832-8504.

By signing this application the Applicant agrees that all information provided is true. The Applicant further agrees that any false information may result in a revocation of any license that may be issued.

**Signature of New Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

By signing the renewal portion this application below the Applicant agrees that all information provided is true. The Applicant further agrees that any false information may result in a revocation of any license that may be issued

**Renewal Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Renewal Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Renewal Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**OFFICE USE ONLY**

License Number: \_\_\_\_\_ Accepted By: \_\_\_\_\_ Date of Issue: \_\_\_\_\_

Comments: \_\_\_\_\_

Renewal Number: \_\_\_\_\_ Accepted By: \_\_\_\_\_ Date of Issue: \_\_\_\_\_

Comments: \_\_\_\_\_

Renewal Number: \_\_\_\_\_ Accepted By: \_\_\_\_\_ Date of Issue: \_\_\_\_\_

Comments: \_\_\_\_\_

Renewal Number: \_\_\_\_\_ Accepted By: \_\_\_\_\_ Date of Issue: \_\_\_\_\_

Comments: \_\_\_\_\_