

ENTERTAINMENT EVENT/CIRCUS LICENSE APPLICATION FORM

1. Applicant: (Promoters, Sponsors, Organization, etc.)
Name _____ Birthdate _____
Business Address _____

Telephone No. _____ Driver's License No. _____
NOTE: If not an individual, please complete the attached
Form A - List of Officers

2. Agent of promoter/sponsor and property owner(s):
Name _____ Birthdate _____
Business Address _____

Telephone No. _____ Driver's License No. _____
NOTE: Agent must be a resident of Santa Clara County

3. Proposed Dates and Hours of Operation:
(a) Dates: _____
(b) Hours: _____

4. Location and occupancy of proposed entertainment event/circus
(including parking and ancillary activities):
(a) Address: _____

(b) APN: _____
(c) Expected number of occupants for each performance
(spectators, participants, etc.) _____
NOTE: Please complete Item #11 of instruction sheet

5. Provide detailed descriptions (numbers, types, and locations) of the
following:
(a) Aid Stations _____

(b) First Aid Kits _____

(c) Emergency Facilities _____

(d) Sanitary Facilities _____

(e) Water for Human Consumption _____

(f) Parking (e.g., Capacity, Ingress, Egress) _____

(g) Dust Control _____

(h) Proposed Lighting (including location of all light standards and electrical switches) _____

NOTE: You may choose to use a site plan for illustrative purposes

6. Provide a detailed description of the manner in which food and beverage are to be acquired, dispensed, and disposed of (include the source of energy or fuel to be used in any food preparation) _____

7. Provide a detailed description regarding the manner of clean-up of the premises during and after the conclusion of the entertainment event/circus _____

8. Owner(s) of all interests in the real property to be occupied by the proposed entertainment event/circus:

(a) Name _____
Address _____
_____ Telephone No. _____

(b) Name _____
Address _____
_____ Telephone No. _____

(c) Name _____
Address _____
_____ Telephone No. _____

9. Provide description regarding nature and type of performance as well as all special effects to be used: _____

10. Provide names of proposed or intended performers (list may be attached): _____

We certify, under penalty of perjury, that the foregoing is true and correct.

Signature of Applicant or Organization President & Other Required Officers

Signature of Property Owner

LIST OF OFFICERS

1.	_____ (NAME)	_____ (OFFICE OR POSITION)
	_____ (ADDRESS)	_____ (BIRTHDATE)/(DRIVER'S LICENSE)
	(CITY STATE ZIP)	_____ (SIGNATURE)
2.	_____ (NAME)	_____ (OFFICE OR POSITION)
	_____ (ADDRESS)	_____ (BIRTHDATE)/(DRIVER'S LICENSE)
	(CITY STATE ZIP)	_____ (SIGNATURE)
3.	_____ (NAME)	_____ (OFFICE OR POSITION)
	_____ (ADDRESS)	_____ (BIRTHDATE)/(DRIVER'S LICENSE)
	(CITY STATE ZIP)	_____ (SIGNATURE)
4.	_____ (NAME)	_____ (OFFICE OR POSITION)
	_____ (ADDRESS)	_____ (BIRTHDATE)/(DRIVER'S LICENSE)
	(CITY STATE ZIP)	_____ (SIGNATURE)
5.	_____ (NAME)	_____ (OFFICE OR POSITION)
	_____ (ADDRESS)	_____ (BIRTHDATE)/(DRIVER'S LICENSE)
	(CITY STATE ZIP)	_____ (SIGNATURE)
6.	_____ (NAME)	_____ (OFFICE OR POSITION)
	_____ (ADDRESS)	_____ (BIRTHDATE)/(DRIVER'S LICENSE)
	(CITY STATE ZIP)	_____ (SIGNATURE)