APPLICATION FOR GENERAL LICENSE OR PERMIT

TO THE COUNCIL OF THE
CITY OF FOND DU LAC, WISCONSIN

_____
TRADE NAME

_____
NAME OF APPLICANT

RESPECTFULLY APPLIES FOR A LICENSE/PERMIT UNDER AND PURSUANT TO SECTION 12.07 OF THE MUNICIPAL CODE OF THE CITY OF FOND DU LAC TO CARRY ON THE FOLLOWING BUSINESS:

THEATERS

IN THE CITY OF FOND DU LAC, AT _____
(ADDRESS)

THIS LICENSE/PERMIT WILL EXPIRE ON THE _____ DAY OF _____, 2 _____.

WISCONSIN SELLER'S PERMIT NUMBER: _____

DATED THIS _____ DAY OF _____, 2_____.

NUMBER OF SCREENS_____

_____
SIGNATURE OF APPLICANT

_____
HOME ADDRESS OF APPLICANT

_____

CONTROL NO._____

RECEIPT NO. _____ DATE: _____

DATE OF ISSUANCE _____ LICENSE NO. _____

FEE: $100.00 EACH SCREEN

City Clerk's Office ~ P.O. Box 150 ~ 160 S. Macy St. ~ Fond du Lac, WI 54935