

CITY OF TOPEKA

APPLICATION DANCE HALL BEER/NON PROFIT/REGULAR/HALL

BUSINESS OWNER'S

Name: _____

Address: _____ Zip: _____

Telephone Number: _____

Social Security Number: _____

Drivers License Number: _____

BUSINESS

Name: _____

Mailing Address: _____ Zip: _____

Business Address: _____ Zip: _____

Telephone Number: _____

State Sales Tax Number: _____

Sec. 14-111 to 126

License Period 1-1 to 12-31

Business location must be zoned properly

Sec 30-33 License not transferable

DANCE LICENSE APPLICATION

TAX STATUS FORM

REGULAR: permitted in any restaurant or dining place which does not dispense cereal malt beverages \$50.00 annual fee Sec 30-71(2)

BEER: for a tavern or restaurant where Cereal Malt Beverages are sold or dispensed \$160.00 annual fee Sec 30-71(3)

NON-PROFIT: for a non-profit Association, Company, Corporation, Club or Institution \$8.00 annual fee Sec 30-71(4)

HALL: for private gain in a public place or hall - \$80.00 annual fee- \$8.00 per day Sec 30-71(1)

OFFICE USE

License Fee: \$ _____ Cash () Check () (Check No. _____)

Date Paid: _____ \ _____ \ _____ License No.: PEND _____

License No.: _____

DANCE LICENSE APPLICATION

_____20_____

I HEREBY make application for a Dance License. Name of the Group or Business _____

Conducted by _____

Location of the Dances _____

Type of Building Dances to be held in: (Please circle two)
Brick Frame 1-Story 2-Story

CHECK ONE:

- _____ A. Permitted in any restaurant or dining place which does not dispense cereal malt beverages
Annual Fee-----\$50.00
- XXXXX B. For a Tavern or Restaurant where CEREAL MALT BEVERAGES are sold or dispensed.
Annual Fee-----\$160.00
- _____ C. For a Non-profit Association, Company, Corporation, Club or Institution.
Annual Fee-----\$8.00
- _____ D. For private gain in a public place or hall.
For one night only-----\$ 8.00
Annual Fee-----\$80.00

I UNDERSTAND that the full amount of the license fee is required on all annual licenses regardless of the time of year the application is made and that such license shall be for the current year expiring on December 31st.

APPROVED:

APPLICANT:

Police Chief

Signature

Fire Inspector

Address

Building Inspector

Telephone Number

Plumbing & Sanitation Inspector

PEND

Clerk's Receipt & License Number

Electrical Inspector

Date sent to the Police Department

Mechanical Inspector

Cross Connection Inspector

Business Name _____

Location _____ Year _____



CITY OF TOPEKA

Tax Status Form

Business owner or representative: Please have the bottom portion of this form filled out by the Shawnee County Treasurer's Office, Real Estate Division (200 E. 7th, Rm. 101) and return the original to the City Clerk's Office in City Hall (215 E. 7th, Rm. 166). Thank You.

Business Address:

Street	City/State	Zip
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County Treasurer Staff: Please review the real estate tax liabilities for the above address in Shawnee County and mark their status below.

Real Estate Tax Status:

- Paid
- Delinquent
- In Dispute

REAL ESTATE TAXES

Completed by _____ Date ____/____/____
Signature