

**BIRMINGHAM TOWNSHIP  
1040 W. STREET ROAD  
WEST CHESTER, PA 19382**

**APPLICATION FOR ADULT ENTERTAINMENT BUSINESS  
LICENSE**

Please print in ink or type the following information for each section below. The fee for processing this application is \$1,500.00 and must be submitted with this form.

**I. APPLICANT(S) NAME(S), MAILING ADDRESS AND MISCELLANEOUS INFORMATION:**

A. List applicant(s) name(s) and mailing address for proposed adult entertainment business.

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B. For each individual applicant, state the following:

1. List any aliases used by applicant: \_\_\_\_\_

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2. Applicant(s) date and place of birth: \_\_\_\_\_

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3. Applicant(s) height and weight: \_\_\_\_\_

4. Applicant(s) hair and eye color: \_\_\_\_\_

5. Applicant(s) home address and telephone number: \_\_\_\_\_

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6. Applicant(s) social security number: \_\_\_\_\_

7. List the issuing state and number of applicant(s) driver's license (Attach a copy of the applicant(s) driver's license):

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C. If applicant is a general or limited partnership, state and provide the following:

1. Copy of the partnership agreement and registration of the partnership with the State.
2. The complete name and the names of all partners, including general and limited partners:

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3. State whether the partnership is a general or limited partnership: \_\_\_\_\_

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4. Partnership Federal Identification Number: \_\_\_\_\_

D. If the applicant is a corporation, state or provide the following:

1. A copy of the Articles of Incorporation as approved by the State.

2. Corporate Federal Identification Number: \_\_\_\_\_

3. The complete corporate name: \_\_\_\_\_

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4. The date and place of incorporation: \_\_\_\_\_

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5. The names and capacity of all corporate officers: \_\_\_\_\_

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6. The names and capacity of all corporate directors: \_\_\_\_\_

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7. The names and capacity of all principal shareholders (principal shareholder is any individual or entity owning twenty percent (20%) or more of the corporation's shares):

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8. Name of registered corporate agent: \_\_\_\_\_

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9. Address of registered office: \_\_\_\_\_  
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10. Attach a Certificate of Good Standing from the Pennsylvania Corporation Bureau evidencing that the corporation is in good standing.

**II. USE OF FICTITIOUS NAME**

If the applicant intends to operate the business under a name other than the corporate or partnership name listed above, state the fictitious name. A copy of the registration of the fictitious name must be attached to this application at the time it is submitted.

List fictitious name(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**III. APPLICANT**

For purposes of this license form, "applicant" shall be defined to include:

- A. Any individual;
- B. Any partner in a partnership (general or limited);
- C. Any officer, shareholder or director in a corporation;
- D. Any agent associated with applicant who shall be considered part of the business so licensed.

**IV. PROOF OF AGE**

Proof of age must be provided for processing of application. All applicants listed above must be at least 18 years of age. All applicants must list age at time of application for business license, and sign next to listed age in space provided below. All persons who have a twenty percent (20%) interest in the adult entertainment business must sign this application as an applicant.

	Full Name (printed)	Age at time of application	Signature
1.	_____		
2.	_____		
3.	_____		
4.	_____		
5.	_____		

**V. CRIMINAL HISTORY**

Specify whether any of the applicant(s), as defined herein, or any persons presently residing with the applicant(s) has/have been convicted of any of the following crimes:

- Prostitution
  - Promotion of prostitution
  - Dissemination of obscenity
  - Sale, distribution or display of harmful material to a minor
  - Sexual performance by a child
  - Possession or distribution of child pornography
  - Public lewdness
  - Indecent exposure
  - Indecency with a child
  - Engaging in organized criminal activity
  - Sexual assault
  - Molestation of a child
  - Gambling
  - Distribution, possession or manufacture of a controlled substance
- Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, state the following:

- A. Name of offender: \_\_\_\_\_
- B. Name of the crime: \_\_\_\_\_
- C. Date crime occurred: \_\_\_\_\_
- D. Jurisdiction of crime: \_\_\_\_\_
- E. Criminal sentence imposed: \_\_\_\_\_

**VI. PRIOR APPLICATIONS FOR AN ADULT ENTERTAINMENT LICENSE**

Specify whether any of the applicant(s), as defined herein, or persons presently residing with the applicant(s) ever applied for an adult entertainment license before in this or in any other jurisdiction:

Yes \_\_\_\_\_ No \_\_\_\_\_

If the answer to the preceding question is yes, list all jurisdictions where applications were submitted and the date such application was submitted. (List most recent first)

- Jurisdiction: \_\_\_\_\_ Date: \_\_\_\_\_
- Jurisdiction: \_\_\_\_\_ Date: \_\_\_\_\_
- Jurisdiction: \_\_\_\_\_ Date: \_\_\_\_\_

If any of the applications for Adult Entertainment Licenses above were denied, suspended, or revoked, list the name and location of the adult businesses for which the license was denied, suspended or revoked. Explain in a concise form the reason for such denial, suspension or revocation. Attach a copy of all pertinent documentation regarding the denial, suspension and/or revocation of adult business license.

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Has the applicant(s), as defined herein, or a person presently residing with the applicant(s) previously been a partner, officer, director, or shareholder of a corporation or a partner in a partnership that was denied a license to operate as an adult entertainment business or had a license suspended or revoked? If yes, state the name of the partnership or corporation which was denied a license or had its license suspended or revoked. State the location of the business and the jurisdiction which denied, suspended or revoked said license and the date said license was denied, revoked or suspended.

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**VII. OTHER ADULT BUSINESS LICENSES**

Do any of the applicant(s), as defined herein, or persons presently residing with the applicant(s) hold an adult entertainment business license from this Township or any other jurisdiction? If yes, specify the following:

- A. Name of business: \_\_\_\_\_
- B. Address of business: \_\_\_\_\_
- C. Affiliation with business: \_\_\_\_\_
- D. Jurisdiction where license was issued: \_\_\_\_\_
- E. Date license was issued: \_\_\_\_\_

**VIII. NATURE OF ADULT ENTERTAINMENT BUSINESS**

- A. Describe the type of adult entertainment which will operate at the applicant's premises (i.e. arcade, bookstore, novelty store, video store, cabaret, theater, escort agency, motion picture theater, etc.)

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- B. Describe in detail the nature of the entertainment that is to be provided at the adult entertainment business. All activities and business operations that applicant(s) intends to conduct on the specified location must be described fully and accurately.

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**IX. LOCATION OF PROPOSED ADULT ENTERTAINMENT BUSINESS**

- A. Attach a legal description of the property where the adult entertainment business will be conducted.
- B. List the street address where the adult entertainment business will be conducted: \_\_\_\_\_
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- C. List the telephone number for the proposed adult business: \_\_\_\_\_
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- D. Attach a sketch or diagram (drawn to scale), showing a configuration of the adult entertainment business premises. **NOTE:** The sketch or diagram does not have to be prepared by a professional architect but it must be drawn to scale with the scale clearly designated. The sketch or diagram should include a statement of the total floor space occupied by the business.

**X. MISCELLANEOUS DOCUMENTS WHICH MUST BE ATTACHED TO THIS APPLICATION**

- A. A color photograph of all applicant(s), as defined herein, which clearly shows the applicant(s) face.
- B. A copy of all applicant(s), as defined herein, fingerprints.

**NOTE:** Applicant(s) are responsible for the costs of this photograph and fingerprints.

**ALL INFORMATION ON THIS FORM MUST BE SUPPLIED BEFORE THE TOWNSHIP WILL PROCESS THIS APPLICATION FOR AN ADULT ENTERTAINMENT BUSINESS LICENSE. THE TOWNSHIP MUST PROCESS THIS APPLICATION WITHIN THIRTY (30) DAYS OF SUBMISSION OF THIS APPLICATION. PLEASE REFER TO CHAPTER 39 OF THE BIRMINGHAM TOWNSHIP CODE OF ORDINANCE, WHICH GOVERNS THESE BUSINESSES IN BIRMINGHAM TOWNSHIP, BEFORE COMPLETING THIS FORM.**

I hereby verify that the information contained in the foregoing Application for Adult Entertainment Business License is true and correct to the best of my knowledge, information and belief.

\_\_\_\_\_ Date: \_\_\_\_\_