



**CITY OF LAS VEGAS**  
**DEPARTMENT OF PLANNING**  
**BUSINESS LICENSING DIVISION**  
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 Las Vegas, NV 89106

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**SUPPLEMENTAL PERSONAL INFORMATION**  
**(Adult Nightclub/Erotic Dance Establishment with No Alcohol)**

**This form must be completed by anyone having a ten-percent interest in the business or proposed business, or anyone having an interest in the real property or personal property utilized or to be utilized by the business or proposed business or anyone having a right to ten percent of the proceeds of the business.**

Business Name: \_\_\_\_\_ License #: \_\_\_\_\_

Business Type:  Erotic Dance Establishment  Adult Nightclub

Applicant's Title or Position with **THIS** Business: \_\_\_\_\_ Percentage of Business Ownership: \_\_\_\_\_

Applicant's Full Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_  
Street Number, Street Name, Apartment or Suite Number Area Code/Telephone Number

\_\_\_\_\_  
City, State, Zip Code

Principal Occupation: \_\_\_\_\_

Have you ever been convicted of or forfeited bail for any crime, excluding minor traffic offenses?  YES  NO

If YES, please list **all** such convictions and/or forfeitures below. Attach additional sheets if necessary.

Charge	Date	Court	Disposition

Have you ever had a business license denied, revoked, or charges filed therefore?  YES  NO

If YES, please list **all** such denials, revocations, and/or charges below. Attach additional sheets if necessary.

Business Name	Date	Jurisdiction	Outcome

\_\_\_\_\_  
 Applicant's Initials

Have you ever owned or operated an escort service, an outcall promoter establishment, a brothel, or an adult nightclub or theater?

YES  NO If YES, please list **all** such businesses below. Attach additional sheets if necessary.

Business Name	Date (from/to)	Position or Ownership Interest

Do you own or have ownership interest in any real or personal property utilized or to be utilized by this business or proposed business?

YES  NO If YES, please list **all** such property and interest below. Attach additional sheets if necessary.

Property	Percentage Owned

I, \_\_\_\_\_, being duly sworn, say that (s)he has read the foregoing application and knows the contents thereof, and that the same is true of his own knowledge; that the same contains a full and true account of the information requested; and that (s)he executed the same freely and voluntarily and for the uses and purposes therein mentioned, and with the knowledge that misrepresentation or failure to reveal information requested may be deemed sufficient evidence for refusal to issue, or revocation of, the license applied for, and, should the license applied for be granted, (s)he agrees to abide by all city, county, state and federal laws, and fully understands that failure to do so may result in revocation proceedings.

\_\_\_\_\_  
Signature of Applicant

Subscribed and sworn to, before me

this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public in and for said county and state