Office Use: License #:_____
Fee Paid:_____
Date:_____
Mayor/City Commission Approved:_____.
ISSUED:_____.

APPLICATION – SHOOTING GALLERIES

(City of Lapeer Ordinance: Chapter 20 (Business Licenses and Regulations), Section 20.00 and Section 20.04)

Date:_____

Applicant Information:

Name of Applicant:_____

Address:_____

Telephone #:_____

Location of Business:_____

Property Owner of location:_____
(Name, Address, Telephone # of property owner)

Previous experience as an operator of a Shooting Gallery:_____

_____

Have you:

Been convicted of any crime, misdemeanor, or local ordinance? ☐ Yes ☐ No

Describe violation and penalty assessed:_____

Held a permit in Michigan that was revoked, suspended or denied within the last three years?

☐ Yes ☐ No Explain:_____

Business Information:

Name of Business:_____

Address:_____

Individual ☐ Partnership ☐ Corporation ☐ Firm ☐ Association ☐

Telephone Number:_____

Applicant must furnish the following additional information.

☐ Nonrefundable Application Fee.
☐ Listing of all agents/employees with complete addresses (new employees within 10 days).
☐ Copy of Liability Insurance Policy.

By filing this application, I acknowledge I have read the appropriate Ordinance Section, and I authorize the City of Lapeer to conduct a background check on myself, the applicant, as well as on the agents/employees requested in this application. In addition, by signing this application I affirm that the information provided is accurate and that, if a license is granted, I will abide by all applicable ordinances, statutes, regulations and laws.

_____

Applicant Signature: Date:

OFFICE USE:

Police Department: ☐ Approval ☐ Disapproval

Signature:_____ Date:_____

City Clerk: ☐ Approval ☐ Disapproval

Signature:_____ Date:_____