



**Thunder Bay Police Services Board**  
**Application for License**

**ADULT ENTERTAINMENT ESTABLISHMENT - OWNER**

Fee- \$3,076.34

SOLE PROPRIETORSHIP                     PARTNERSHIP AND/OR CORPORATION

Personal information on this form is collected under the authority of the Municipal Act, R.S.O. as amended, and will be used to determine eligibility to be licensed for business within the City of Thunder Bay. Where applicable, personal information on this form may be disclosed for approval to the Thunder Bay Police Services Board and the Thunder Bay Police and for inspections to Thunder Bay Building Services, Thunder Bay Fire Department, Thunder Bay District Health Unit and Hydro One. Questions about this collection should be directed to the Manager – Licensing & Enforcement Division, Second Floor, Victoriaville Civic Centre, 111 Syndicate Avenue S., Thunder Bay, Ontario, P7C 5K4, Telephone: (807) 625-2710

**PART 1      To be completed by Applicant**

Business Name:	
Business Address:	
Applicant Name:	
Applicant Address:	POSTAL CODE
DATE OF BIRTH: _____ / _____ / _____ <div style="display: flex; justify-content: space-around; font-size: small;"> <span>MONTH</span> <span>DAY</span> <span>YEAR</span> </div>	
PROOF OF IDENTIFICATION:	
TELEPHONE    Res:	Business:
E-mail:	Cellular No.:

**PART 2**

Is this application for a newly constructed Adult Entertainment establishment? Y or N  
 If yes, please indicate Building Permit number\_\_\_\_\_

Have there been any renovations to the building since being licensed previously?  
 Y or N If yes, explain\_\_\_\_\_

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Has a building inspection been conducted pursuant to the renovations? Y or N  
 Please indicate Building Permit number\_\_\_\_\_

Has the occupant load of the premises changed since the last application for license?  
 Y or N

Does this application include any new portion of the building that was not previously licensed? Y or N

Has there been any new mechanical or plumbing equipment added or deleted since the previous license application? Y or N, if yes, please explain\_\_\_\_\_

**PLEASE SEE NEXT PAGE OF APPLICATION...**



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**PART 3**

Where a partnership exists, list all Partners/Directors:		
Name	Address	Telephone No.

If more partners, please list on separate sheet and attach.

**PART 4**

Where a Corporation exists, list all Officers and Directors		
Name	Address	Telephone No.

If more Officers/Directors, please list on separate sheet and attach.

**PART 5**

Owner of the Building, Premise, or Place.
Name:
Address:
Telephone Number:

**PART 6**

Have any of the Partners, Directors or Officers of the Corporation ever been convicted of a Criminal/Provincial Offence? (This includes any City By-laws or violations under the Liquor Licence Act). If yes, provide particulars.

**PART 7**

Are there any Criminal/Provincial charges currently pending against any of the Partners or the Partnership or Officers or Directors of the Corporation? (This includes any City By-laws or violations under the Liquor Licence Act). If yes, provide particulars.

**PLEASE SEE NEXT PAGE OF APPLICATION...**



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Other conditions required to obtain a license

- Proof of most recent inspection by Health Unit within previous 12 months.
- Police Services Board
- Licensing & Enforcement

**DISCLAIMER**

The undersigned acknowledges that the issuance of a license is not confirmation that the licensed person, premises or operation conforms with any Police Services Board By-law and that the Board and/or the City of Thunder Bay reserves its rights to enforce any such by-law notwithstanding the issuance of this license and its right to revoke or suspend this license for any reason, including without limitation, such violations. It shall be the sole responsibility of the undersigned to ensure compliance with such by-laws and the City of Thunder Bay shall have no liability in respect of or arising out of any violation thereof or any steps taken with respect to this license therefor.

\_\_\_\_\_  
Date

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

**PART 8 TO BE COMPLETED BY POLICE SERVICE**

I CERTIFY that I have interviewed or caused to be interviewed, the Applicant.

- Objection
- No Objection

Special Conditions/Objections if applicable, which will form part of the License:

Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Additional comments? Attach to Application)

\_\_\_\_\_  
Date (License Approved/Denied)

\_\_\_\_\_  
Police Chief (or Designate)

**PART 9 TO BE COMPLETED BY LICENSING & ENFORCEMENT**

I CERTIFY that I have reviewed the application.

- Approved
- Denied

Special Conditions/Objections if applicable, which will form part of the License:

Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

License Number \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_

Licensing & Enforcement (or Designate)