



CITY OF LAKE FOREST ENTERTAINMENT PERMIT APPLICATION

Permit Fee: \$393.00

FOR OFFICIAL USE ONLY:

DATE STAMP (RECEIVED)

Routing

File No.

PLEASE CHECK APPLICABLE BOX OR BOXES

- ☐ **CHECK HERE IF RENEWAL**
☐ ENTERTAINMENT PERMIT FOR CORPORATIONS/PARTNERSHIPS
☐ ENTERTAINMENT PERMIT FOR SOLE PROPRIETORSHIP

Please complete the following application and submit with required documentation to the City of Lake Forest. Refer to the *Applicant's Guide to Submitting Entertainment Permit* (Available at Lake Forest City Hall) for more information. (Ordinance 2003-136)

PART 1: APPLICANT INFORMATION

Last Name:		First:	Middle:
Mailing Address:			
City:	State:	Zip:	Phone:
Email Address:			

PART 2: ESTABLISHMENT

Name of establishment

Business Name:		Operators Name:	
Business Address:			
City:	State:	Zip:	Business Phone:

Property owner information

Please check one:			
Is the applicant the legal property owner? <input type="checkbox"/> Yes <input type="checkbox"/> No – Please provide the name and address of the legal property owner and/or agent of the Real Property where the business is to be conducted. In addition, the applicant shall submit a copy of the lease between the property owner and the applicant for the entertainment establishment and a notarized statement signed by the owner consenting to the operation of the entertainment establishment at the location by the applicant. (Section 5_.050.B.12)			
Organization:	Contact Person:	Title:	
Address:	City:	State:	Zip:
Telephone Number:		Email Address:	

PART 3: TYPE OF BUSINESS

Type of Business Organization:	<input type="checkbox"/> Corporation	<input type="checkbox"/> General Partnership	<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Other:
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For Sole Proprietorships Only	
You, the Applicant, must be the Sole Proprietor to submit this Application.	Name of Business as Appears on Fictitious Name Statement:

For General / Limited Partnerships Only
Name of Business as Appears on Fictitious Name Statement:

For Corporations Only		
Name of Corporation (as shown in Articles of Incorporation):		
State of Incorporation:	Corporation Number:	Date of Incorporation:

FOR CORPORATIONS Include the following information for each Officer and Director, and for each person who has a financial interest in the corporation amounting to more than five percent (5%) of the authorized and issued shares.					FOR PARTNERSHIPS Include the following information for each partner, including limited partners.				
Title (Please check)	<input type="checkbox"/> Responsible Managing Officer (Only One per Business)	<input type="checkbox"/> Officer	<input type="checkbox"/> Director	<input type="checkbox"/> Stockholder					
Last Name:		First Name:			Middle:				
Residence Address:									
City:		State:		ZIP:		Phone:			
Title (Please check)	<input type="checkbox"/> Responsible Managing Officer (Only One per Business)	<input type="checkbox"/> Officer	<input type="checkbox"/> Director	<input type="checkbox"/> Stockholder					
Last Name:		First Name:			Middle:				
Residence Address:									
City:		State:		ZIP:		Phone:			

PART 4: DESCRIPTION OF BUSINESS

A site plan or other diagram must be submitted in addition to this application. It must clearly depict the layout and configuration of the premises including the parking and relative location of all features and fixtures (including, but not limited to, all entrances/exits, windows, entertainment areas, stages, individual viewing booths, dressing rooms, bathrooms, banquette rooms, and other rooms, tables, booths, furniture, bars, kitchens, and other food or beverage preparation areas).

Description of Business

Describe in detail, the nature of the business or commercial enterprise to be conducted by the establishment.

Hours of operation

Please list the business hours of operation.						
MON	TUES	WEDS	THURS	FRI	SAT	SUN

Description of the entertainment

Describe in detail, the nature and type of the proposed entertainment, including the number of performers or participants to be involved. Include a statement describing the area within or on the premises where entertainment is to be performed and observed with reference to the site plan or diagram.

Hours of entertainment

Please list the hours during which the proposed entertainment is desired to be conducted.						
MON	TUES	WEDS	THURS	FRI	SAT	SUN

On-site Management

Please list the name(s) of the person(s) responsible for the operation, management, and supervision of the entertainment establishment and of the entertainment.		
Name:	Address:	
City:	State:	Zip:
Name:	Address:	
City:	State:	Zip:

Food and Beverage

<i>Please check one:</i>	
The business will provide food and/or beverages <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>If yes, please provide a detailed description of the food and/or beverage service, if any that will be offered to patrons.</i>
The business will provide alcoholic beverages <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>If any alcoholic beverages are to be offered for sale and served at the premises, a copy of a liquor license shall be submitted to the City</i>

Miscellaneous

<i>Please check one:</i>	
Admission will be charged <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>If yes, what is admission fee?</i>
Minors will be permitted upon the premises <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>If yes, during which hours of operation?</i>
Entertainers will be: <input type="checkbox"/> employees or <input type="checkbox"/> independent contractors	

PART 5: PERMIT HISTORY

Has the applicant, owner, or any person responsible for the operation, management, and supervision of the entertainment establishment or entertainment, within the past five (5) years, had any permit or license issued in conjunction with the sale of alcohol or provision of entertainment? <input type="checkbox"/> <i>Yes, I was issued a license. If yes, please complete the area below and attach a copy of any currently issued Alcoholic Beverage Licenses.</i> <input type="checkbox"/> <i>No, I have not applied for or previously held any licenses or permits in any state to conduct any type of business in conjunction with the sale of alcohol or entertainment.</i>			
City:	State:	License/Permit Type:	License/Permit No.
Date Issued:		Issuing Agency:	
During that period, was the permit or license suspended or revoked? <input type="checkbox"/> Yes – <i>Please complete area below.</i> <input type="checkbox"/> No			
<input type="checkbox"/> Revoked OR <input type="checkbox"/> Suspended	Revoked Date or Dates of Suspension From: To:	Reason:	
<input type="checkbox"/> Application Denied	Date of Application:	Denied by: (Issuing Agency)	

Entertainment Permit Application

If License/Permit was Revoked, Suspended, or Denied, In what business or occupation did you engage in following such revocation, suspension, or denial?

PART 6: OPERATING REQUIREMENTS

Please check the operational requirements to acknowledge that the subject business complies to the following:

☐ The entertainment establishment shall NOT operate or be open between the hours of 2:00a.m. and 7:00a.m.

☐ During entertainment performances, entertainment establishments shall keep all doors and windows closed, but unlocked, except as otherwise approved in conjunction with outdoor live entertainment.

☐ The entertainment establishment shall operate in compliance with all applicable State, County, and local laws, rules, regulations, and ordinances relating to the protection of health, safety, and welfare. If the entertainment establishment is licensed to offer for sale and serve alcoholic beverages, then the establishment shall also operate in compliance with the terms and conditions of its license and such other rules and regulations of the California Department of Alcoholic Beverage Control as are applicable.

☐ The entertainment establishment shall have a manager on-site at all times during the operating hours of the establishment. The manager shall be charged with keeping the peace within the establishment and enforcing compliance by patron and entertainers with the requirements of Lake Forest Municipal Code 5.36.

SECURITY REQUIREMENTS

Security guards are required under the following provisions: if the occupancy limit of the entertainment establishment exceeds fifty (50), then the establishment shall provide at minimum, the following number of security guards:

Occupancy Capacity	Number of Security Guards
51 to 200	2
201 to 350	3
351 to 500	4
Over 500	TBD

Occupancy Limit:

Number of Security Guards Provided:

Contracted Security:

☐ Yes
☐ No

If yes, name of security company:

PART 7: CERTIFICATION

I hereby certify, under the penalty of perjury, that the information given is true and correct. I understand that providing false information or withholding information, including any criminal record, is grounds for denial or revocation of my permit, and may subject me to criminal prosecution. I do hereby authorize the City of Lake Forest, its agents and employees to seek verification of the information contained on this application. I further understand that I may not conduct the activity applied for until a permit has been granted and that a copy of the City ordinances regulating entertainment is available to me in the City Clerk's office.

(Signature)

(Date)

Revised 7/7/2025 BT