



Prince George's County
 Department of Permitting, Inspections
 and Enforcement
PERMITTING & LICENSING DIVISION
Business Licensing Center
 9400 Peppercorn Place, 1st Floor
 Largo, Maryland 20774
 301.883.3840 ♦ FAX: 301.883.3875

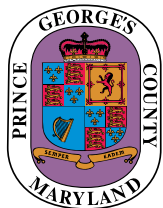


PUBLIC DANCE LICENSE REQUIREMENTS

- | | |
|---|--------------------------------|
| | OFFICE
USE
ONLY |
| <input type="checkbox"/> Complete application and checklist; submit supporting documents in sets of four — an application form is enclosed. Additional forms can be obtained from the Business Licensing Center. | <input type="checkbox"/> |
| <input type="checkbox"/> License fee of \$1,500 + 5% Technology Fee of \$75 for a total of \$1,575 MUST be made payable to Prince George's County. (Fees are NON-REFUNDABLE.) | <input type="checkbox"/> |
| <input type="checkbox"/> Copy of approved Use & Occupancy Permit for the current owner and tenant for a use that allows dance. | <input type="checkbox"/> |
| <input type="checkbox"/> Background investigation conducted by the Prince George's County Police Department's Office of Secondary Employment. Please contact this office at (301) 352-1200 or <i>police_secondaryemployment@co.pg.md.us</i> . | <input type="checkbox"/> |
| <input type="checkbox"/> Documentation of insurance, including bodily injury liability, property damage liability or equivalent self-insurance. Said insurance shall commensurate with the mandatory minimum required by law for the establishment. | <input type="checkbox"/> |
| <input type="checkbox"/> A security plan shall be submitted with the application for review. A Maryland Licensed Professional Engineer with experience in security planning should be consulted to assist in the preparation of the plan. The consultant may wish to work with the Police Department's Office of Secondary Employment in developing this plan. Minimally, the plan shall include: | <input type="checkbox"/> |
| • Recorded security surveillance inside and outside | <input type="checkbox"/> |
| • Parking plan | <input type="checkbox"/> |
| • Traffic flow plan | <input type="checkbox"/> |
| • Lighting plan for the premises within 1,000 feet of the public dance hall | <input type="checkbox"/> |
| • Staffing plan of services, including security staffing and responsibilities | <input type="checkbox"/> |
| ♦ Include patrol frequency and routes for the outside and perimeter within 1,000 feet of the Dance Hall | <input type="checkbox"/> |
| <input type="checkbox"/> A life safety and evacuation plan shall be submitted with the application for review when the County approved occupant load exceeds 250 persons. A Maryland Licensed Professional Engineer with experience in fire protection shall be used. The Engineer may wish to work with the Office of the Fire Marshall at (301) 583-1830 during the development of this plan. | <input type="checkbox"/> |
| <input type="checkbox"/> Copy of the County Fire and Emergency Medical Services Department's "Occupancy Load Certificate." | <input type="checkbox"/> |
| <input type="checkbox"/> Copy of Current Articles of Incorporation (State Business License). | <input type="checkbox"/> |
| <input type="checkbox"/> LLCs must provide copies of Articles of Organization and Operating Agreement. | <input type="checkbox"/> |
| <input type="checkbox"/> Current Certificate of Good Standing from Maryland State Department of Assessments and Taxation (SDAT) for corporations, partnerships or LLCs. | <input type="checkbox"/> |
| <input type="checkbox"/> For business/trade names/entities not in the category of corporations, partnerships or LLCs, provide proof or a certificate from SDAT that the business/trade name/entity is currently registered with the State to do business in Maryland. | <input type="checkbox"/> |
| <input type="checkbox"/> All businesses must provide an organization chart. Please include all officers, members, partners and/or managers. | <input type="checkbox"/> |

Although notified by the Director of the Department of Permitting, Inspections and Enforcement, any municipality within half mile of the establishment has 45 days to conduct a public hearing. Applicants for a public dance license may wish to identify and discuss their plans with any municipality in advance of their application. The cost of any municipal hearing is the responsibility of the applicant.

The property and facility shall be in compliance with all applicable County codes and safety regulations, pursuant to County Code §5-200.02.



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APPLICATION FOR PUBLIC DANCE LICENSE

TYPE OF LICENSE *(Check One)*

- Adult Dance Hall
or
- Teen Dance Hall

FEES: \$1,500 + 5% Technology Fee of \$75 for a total of \$1,575

*All fees MUST be made payable to Prince George's County.
 (Fees are NON-REFUNDABLE.)*

SECTION A — IDENTIFICATION

Type of Business

- Sole Entity (Owner)
- Partnership
- Corporation
- LLC

Please print clearly.

Name of Business: _____

Business Address: _____
Street

_____ *City* _____ *State* _____ *ZIP Code*

Business Telephone #: _____

Is business located within the boundaries of an incorporated municipality? Yes No

If Yes, Name of Municipality: _____

Name of Property Owner: _____

Address of Property Owner: _____
Street

_____ *City* _____ *State* _____ *ZIP Code*

Submit a copy of the Maryland State Department of Assessments and Taxation property tax printout found at
http://sdatcert3.resiusa.org/rp_rewrite/.

SECTION B — BUSINESS DATA

CORPORATIONS

1. President: _____
Home Address: _____
Business Address: _____
Telephone #: _____

2. Vice President: _____
Home Address: _____
Business Address: _____
Telephone #: _____

3. Secretary: _____
Home Address: _____
Business Address: _____
Telephone #: _____

4. Treasurer: _____
Home Address: _____
Business Address: _____
Telephone #: _____

5. Resident Agent: _____
Home Address: _____
Business Address: _____
Telephone #: _____

PARTNERSHIPS

List each partner.

1. Name/Title: _____
Home Address: _____
Business Address: _____
Telephone #: _____

2. Name/Title: _____
Home Address: _____
Business Address: _____
Telephone #: _____

3. Name/Title: _____
Home Address: _____
Business Address: _____
Telephone #: _____

PARTNERSHIPS — *Continued*

4. Name/Title: _____
Home Address: _____
Business Address: _____
Telephone #: _____

LLC

List each member.

1. Name/Title: _____
Home Address: _____
Business Address: _____
Telephone #: _____

2. Name/Title: _____
Home Address: _____
Business Address: _____
Telephone #: _____

3. Name/Title: _____
Home Address: _____
Business Address: _____
Telephone #: _____

4. Name/Title: _____
Home Address: _____
Business Address: _____
Telephone #: _____

BUSINESS ENTITY/TRADE NAME

1. Owner: _____
Home Address: _____
Business Address: _____
Telephone #: _____

I, THE UNDERSIGNED, HEREBY CERTIFY UNDER PENALTY OF PERJURY THAT I HAVE READ AND FULLY COMPREHEND THIS FORM IN ITS ENTIRETY AND THAT THE INFORMATION PROVIDED HEREIN IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND THAT SHOULD ANY STATEMENT I HAVE MADE PROVE FALSE, MISLEADING OR ERRONEOUS, IT MAY RESULT IN THE REJECTION OF MY APPLICATION.

Signature of Owner/President

Sworn to before me this _____ day of _____, 20 _____.

SEAL

Notary Public

PLEASE NOTE THAT THE MINIMUM REVIEW TIME IS 90 DAYS FROM THE DATE APPLICATION IS RECEIVED.