



Application for Nightclub Permit

Financial Management Services
Revenue Division
City of Winston-Salem
Post Office Box 2756
Winston-Salem, NC 27102
Telephone: 336.747.6954
Facsimile: 336.747.6918

Application Date _____/_____/_____

Applicant's Name _____

Applicant's Address _____

Telephone () _____ - _____ **Cell phone** () _____ - _____

Other () _____ - _____ **E-Mail** _____

Best time of day to reach applicant: _____

Nightclub Name _____

Nightclub Address _____

Telephone Number including area code () _____ - _____

Is applicant the nightclub owner? _____ Yes _____ No

If "no", please state applicant's position at the nightclub. _____

Please provide name, address, and telephone number (including area code) for any other owner(s). _____

This nightclub _____ **has** _____ **has not previously been issued a nightclub permit.**

Does the nightclub intend to participate in the Police Department's Violence Reduction Program? _____ Yes _____ No

Has the nightclub participated in the Police Department's Violence Reduction Program in the past? _____ Yes _____ No

Does the nightclub wish to authorize the Winston-Salem Police Department to act as its agent for purposes of trespassing individuals on the nightclub's premises? _____ Yes _____ No

I certify that all information provided is true and accurate to the best of my knowledge and authorize the Winston-Salem Police Department to conduct a complete background check.

Signature of Applicant

Internal Use Only

Permit Fee Paid _____ **Date Paid** _____ **Receipt Number** _____

Approved _____ **Denied** _____ **By :** _____ (Print Name)

Signature

Title

Date