



Application for Public Dance License

616 NE 4th Ave. Camas, WA 98607
(360) 834-2462 Fax: (360) 834-1535

For Office Use Only:

Fee Collected: \$ _____

Receipt #: _____

Received By: _____

Date: _____

Approved / Disapproved

*******Please allow 14 working days for investigation*******

As it states in Camas Municipal Code: 5.28

No person or persons, firm, corporation or other organization shall hold any public dance or conduct or maintain any dancehall within the limits of the city without first having obtained from the city clerk a license therefor. Applications for a license hereunder shall be filed with the city clerk two weeks prior to the scheduled date of any dance or for the commencement of an annual license. Applications shall be accompanied by the required license fee. The city clerk shall cause the application to be delivered to the chief of police, who shall investigate same to determine if the applicant qualifies for a license. In the event the application is not approved, any applicant may appeal the decision to the city council, who shall hold a hearing to determine if such denial was for

Applicant:

Organization/Business Name: _____

Address: _____ City/State/Zip: _____

Name of Applicant-Sponsor/Owner or Manager: _____

Business Phone: _____ Alternate Phone: _____

License Information:

License Applied For: Annual (\$50) _____ Single Dance (\$15) _____

Date(s) and Time(s) of Dance(s): _____

Music Furnished By: _____

Security Provisions or Plans: _____

Facility or Room Capacity per Fire Marshall: _____ Est. Attending: _____

Alcohol Permitted: Yes _____ No _____

If "yes" Licensed obtained to serve Yes _____ No _____

The City reserves the right to stop any and all activity if violations of the license conditions occur. The City further reserves the right to stop any or all activity if a condition endangers the general health or safety of the participants, or hinders efficient public safety operations.

By signing below you have agreed to the conditions of the application. Your signature further indicated that you have read and understand the City of Camas Public Ordinance 5.28 in its entirety.

Signature: _____

Date Submitted: _____

For Office Use Only:

License is: **APPROVED / DENIED**

Chief of Police Signature: _____ Date: _____

Additional Comments: _____

City Clerk:

_____ Contact Fire Marshal

_____ Contact Police Department for security impacts or traffic control.