



# CITY OF LAKE GENEVA

## BUSINESS & THEATER LICENSE APPLICATION

**\$25.00 Annual Business Fee &  
Annual Theater Fee \$200 (Up to 1,200 Seats), or \$275 (Over 1,200 Seats)**

Annual License Expires **June 30<sup>th</sup>** Each Year

Please fill in the blanks completely, as incomplete applications will be rejected.

**Please Check:** ☐ New Business ☐ New Owner ☐ Name Change ☐ Renewal  
☐ Location Change – Must be approved by Building & Zoning Dept prior to application

### APPLICANT AND BUILDING INFORMATION

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_ Suite/Unit #: \_\_\_\_\_

Business Owner(s) Mailing Address (if different): \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Business Owner(s) Name: \_\_\_\_\_

Business Owner(s) Email: \_\_\_\_\_

Business Owner(s) Phone & Home Address: \_\_\_\_\_

Local Contact Person for Business (if different): \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Building Owner Name: \_\_\_\_\_ Address: \_\_\_\_\_

Building Owner(s) Email: \_\_\_\_\_

Building Owner(s) Phone #: \_\_\_\_\_

### BUSINESS INFORMATION

Type of business: \_\_\_\_\_ Opening date (new businesses only): \_\_\_\_\_

Is the property currently vacant? ☐ YES ☐ NO Seating Capacity: \_\_\_\_\_

Are there any improvements planned to the existing property? ☐ YES ☐ NO

*\*If yes, please explain* \_\_\_\_\_

**APPLICANT SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

### *For Office Use Only*

Date Filed: \_\_\_\_\_ Receipt Number: \_\_\_\_\_ Total Paid: \$ \_\_\_\_\_

Date forwarded to Building Dept: \_\_\_\_\_ Building Inspector Approval: \_\_\_\_\_

Date forwarded to Fire Dept: \_\_\_\_\_ Fire Inspector Approval: \_\_\_\_\_

Verified: Stark ☐ MSI ☐ Notes/conditions: \_\_\_\_\_

Date License issued: \_\_\_\_\_ License #: \_\_\_\_\_ *Copies to: Assessor, Chamber*