

**APPLICATION FOR THEATER LICENSE
\$25.00/THEATER SCREEN**

To be filed with the City Clerk
City of Shawano
127 S. Sawyer Street
Shawano, WI 54166

Payable to: City of Shawano

An application for a Theater License pursuant to and in compliance with the provisions of Chapter 7, Section 7.11 of the Municipal Code of the City of Shawano, Wisconsin.

Business Name: _____

Business Address: _____

Telephone No. _____

Agent Name: _____

Number of Theater Screens: _____

Beginning July 1, 20____ and ending June 30, 20____.

Dated this ____ day of _____, 20____.

Owner/Authorized Agent
(Please Indicate)

Please note: According to City Ordinance, your Personal Property taxes and Real Estate taxes must be current. Payment by check will be accepted on or before June 20; payments made after June 20 must be by cashiers checks, wire transfers or cash for release of licenses.

MUST PROVIDE THE FOLLOWING:

FEIN: _____ **SELLERS PERMIT NO.:** _____