

ENTERTAINMENT PERMIT PROGRAM
COVID-19: REQUEST FOR MODIFICATION

(Please Type or Print Clearly)

MODIFICATION REQUEST INFORMATION			
Permit No.		Date	
Business Name			
Business Address			
PROPOSED MODIFICATIONS			
Modification(s) Requested	<input type="checkbox"/> Area(s)	<input type="checkbox"/> Type(s)	<input type="checkbox"/> Days/Hours <input type="checkbox"/> Other
Proposed Area(s) for Entertainment (e.g., patio, parking lot, sidewalk, etc.) Attach scalable layout of venue including proposed expanded area for entertainment			
Will alcohol be sold in the proposed entertainment area? If yes, attach approval from ABC for Temporary Catering Authorization (ABC-218 CV19) as appropriate (e.g., parking lot).	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Proposed Entertainment Type(s) (e.g., DJ, live music, trivia, karaoke, etc.) Attach additional sheets if needed.			
Proposed Days of Entertainment	<input type="checkbox"/> Mon <input type="checkbox"/> Tues <input type="checkbox"/> Weds <input type="checkbox"/> Thurs <input type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun		
Proposed Hours of Entertainment	From		To
Request to modify other conditions. Please explain in detail reason for modifications. Attach additional sheets if needed.			
PERMIT HOLDER INFORMATION			
Permit Holder Name #1			
Permit Holder #1 Signature			
E-Mail Address			
Contact Telephone No.		Alt. Phone	
Permit Holder Name #2			
Permit Holder #1 Signature			
E-Mail Address			
Contact Telephone No.		Alt. Phone	

Before modifying conditions of an entertainment permit, this application must be approved by the City (Representative). Staff members may be contacting the applicant(s) as part of this process. Inspection or comments by staff do not constitute approval of the request. Expenditures for remodeling, purchasing equipment, or entering into agreements or leases prior to approval is solely at the applicant(s) risk.

Approved By: _____
Date: _____