

**CITY OF SAN ANTONIO  
SEXUALLY ORIENTED BUSINESS (SOB)  
FLOOR-MANAGER & ENTERTAINER PERMIT APPLICATION  
PRINT USING BLACK OR BLUE INK ONLY**

**Section A: Identification Data**

	NAME OF INITIAL SOB WHERE YOU WILL BE WORKING/PERFORMING			
DATE OF APPLICATION				
1. STAGE NAME: (If an Entertainer)	NAME	NUMBER ASSIGNED BY CITY		
2. REAL NAME:	LAST	FIRST	MIDDLE	MAIDEN NAME
3. RESIDENTIAL ADDRESS:	STREET ADDRESS			
	COUNTY & CITY		STATE	ZIP CODE
4. BIRTH INFORMATION:	MONTH/DAY/YEAR	PLACE OF BIRTH	CITY, COUNTY & STATE	
5. DESCRIPTORS:	RACE	SEX	WEIGHT	
	HAIR COLOR	EYE COLOR	HEIGHT	
6. TATTOOS:	DESCRIPTION		LOCATION	
7. IDENTIFICATION:	Driver's License/State	Identification No./State	U.S. Passport No.	Military I.D. No.
8. POINT OF CONTACT:	Your Telephone No.			

**Section B: Criminal Information**

9. HAVE YOU BEEN CONVICTED OF ANY OF THE FOLLOWING OFFENSES WITHIN TEN YEARS IMMEDIATELY PRECEDING THE DATE OF THIS APPLICATION?

a. Prostitution or Promotion of Prostitution	YES ____	NO ____
b. Aggravated Promotion of Prostitution	YES ____	NO ____
c. Compelling Prostitution	YES ____	NO ____
d. Obscenity	YES ____	NO ____
e. Sale, Distribution of Display of Harmful Material to a Minor	YES ____	NO ____
f. Sexual Performance By A Child	YES ____	NO ____
g. Employment Harmful To Children	YES ____	NO ____
h. Possession of Promotion of Child Pornography	YES ____	NO ____
i. Public Lewdness or Indecent Exposure	YES ____	NO ____
j. Indecency With A Child	YES ____	NO ____
k. Sexual Assault, or Aggravated Sexual Assault	YES ____	NO ____
l. Harboring a Runaway Child	YES ____	NO ____
m. Criminal attempt, conspiracy or solicitation to commit any of the above offenses	YES ____	NO ____
n. A felony in any jurisdiction	YES ____	NO ____
o. Any Violation of City Ordinance Number 2012-12-06-0933 (Sexual Oriented Business), as amended	YES ____	NO ____
p. Texas Penal Code 20A.02 - Trafficking of Persons	YES ____	NO ____

**SECTION C: Additional Criminal Information**

10. HAVE YOU BEEN PLACED ON DEFERRED ADJUDICATION, DEFERRED DISPOSITION, OR PROBATION WITHIN TEN YEARS IMMEDIATELY PRECEDING THE DATE OF THIS APPLICATION FOR ANY OF THE OFFENSES IDENTIFIED ABOVE? YES \_\_\_\_\_ NO \_\_\_\_\_

11. IF YOU ANSWERED YES TO ANY ITEM IN SECTION "B" OR SECTION "C" ABOVE, THEN STATE BELOW THE FOLLOWING: THE CRIME, THE JURISDICTION, AND THE COURT FOR EACH SUCH CRIME. ALSO, STATE THE DATE(S) OF CONVICTION, PROBATION, DEFERRED ADJUDICATION, AND DEFERRED DISPOSITION FOR EACH SUCH CRIME. USE ADDITIONAL BLANK SHEETS, IF NEEDED, AND ATTACH TO THIS APPLICATION.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SECTION D: STATEMENT AND AUTHORIZATION OF APPLICANT**

BEFORE ME, THE UNDERSIGNED NOTARY PUBLIC, ON THE DATE INDICATED BELOW APPEARED \_\_\_\_\_, KNOWN TO ME BY \_\_\_\_\_ AS \_\_\_\_\_, AND WHO AFTER BEING BY ME DULY SWORN ON HIS OR HER OATH, DEPOSED AND SAID AS FOLLOWS:

"I SWEAR OR AFFIRM, UNDER PENALTY OF PERJURY, THAT I PERSONALLY HAVE COMPLETED THIS FORM AND THE INFORMATION THAT I PRESENTED ON THIS FORM IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I AM AWARE THAT THE PERMIT I SEEK UNDER THIS FORM IS SOLELY THE PROPERTY OF THE CITY OF SAN ANTONIO AND MUST BE RETURNED UPON REVOCATION, EXPIRATION, OR NON-USE. I AM ALSO AWARE THAT THIS APPLICATION IS A GOVERNMENTAL RECORD AND THAT I MAY BE CRIMINALLY PROSECUTED IF I KNOWINGLY MAKE A FALSE ENTRY ON THIS RECORD OR MAKE OR PRESENT OR USE THIS RECORD WITH KNOWLEDGE OF ITS FALSITY. I ALSO ACKNOWLEDGE THAT THIS IS A STATEMENT BEING PROVIDED TO A LAW AGENCY AND THAT I MAY BE CRIMINALLY PROSECUTED IF I KNOWINGLY FALSIFY THIS STATEMENT."

"I AUTHORIZE THE CITY OF SAN ANTONIO, ITS AGENTS AND EMPLOYEES TO SEEK INFORMATION AND CONDUCT AN INVESTIGATION INTO THE TRUTH OF THE STATEMENTS SET FORTH IN THIS APPLICATION, TO INCLUDE OBTAINING MY FINGERPRINTS AND MY CRIMINAL BACKGROUND HISTORY."

\_\_\_\_\_  
SIGNATURE OF APPLICANT

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public  
State of \_\_\_\_\_  
My Commission Expires On: \_\_\_\_\_

**SECTION E: FOR OFFICIAL USE ONLY — DO NOT WRITE BELOW LINE**

FEE PAID TO: \_\_\_\_\_  
SIGNATURE DATE Approved \_\_\_\_\_ Denied \_\_\_\_\_

CCH COMPLETED BY: \_\_\_\_\_  
SIGNATURE DATE Approved \_\_\_\_\_ Denied \_\_\_\_\_

FINGERPRINTS PROCESSED BY: \_\_\_\_\_  
SIGNATURE DATE

PERMIT ISSUED BY: \_\_\_\_\_  
SIGNATURE DATE

PERMIT NO. ISSUED BY CITY: \_\_\_\_\_