

City of Minot

Minot Police Department Sexually Oriented Business Employee License Minot Code of Ordinances Section 18-192

Office Address: 515 2nd Ave SW
Mailing Address: PO Box 5006
Minot, ND 58702
Email: records@minotnd.org
(701) 837-3658

APPLICANT INFORMATION:

Last Name	First name	Middle Initial	Date
Street Address	Apartment/Unit#		
City	State	Zip Code	
Phone	Email		
Date of Birth	Height & Weight	Hair Color	
Stage Name: (If Applicable)			
Type of ID Presented	Issuing State		
Have you ever been denied a cabaret-type license in another jurisdiction?	Yes	No	
If yes, when & where?			
Have you ever been convicted or are you awaiting trial on pending charges related to specified criminal activity?	Yes	No	
If yes, explain:			

DISCLAIMER AND SIGNATURE:

I certify that my answers are true and complete to the best of my knowledge

Signature of Property Owner/Manager

Date

INTERNAL USE ONLY:

Issuing Person _____ Date of Expiration _____

Authorizing Agent _____ Date _____

Please Attach the Following:

1. Fee: Entertainer/Employee \$30.00
2. A current color photo (3" x 4" or larger).
3. A photocopy of a license issued for 1 year.