

**CITY OF WATERLOO, IOWA
APPLICATION FOR THEATER LICENSE**

Date _____, 20____

Owner (s) Name: _____

Doing Business As: _____

Address: _____

Business Phone: _____

Applicant Signature

Fire Inspectors signatures have to be on Application before it can be presented to the Council.

Application must be completed no later than 4:00 p.m. Tuesday, preceding the Monday Council Meeting.

A check to cover the license should accompany the application.

Approved by:

Fire Chief

Date

License Fee \$ _____