

**Building & Code
Enforcement**

www.junctioncity-ks.gov



PO Box 287
700 N Jefferson
Junction City, KS 66441
785-210-2951

MOVIE THEATER LICENSE APPLICATION

DOING BUSINESS AS:	
BUSINESS PHYSICAL ADDRESS:	
MAILING ADDRESS:	
BUSINESS PHONE:	
OWNER NAME:	
OWNER PHONE:	
APPLICANT NAME:	
APPLICANT ADDRESS:	
APPLICANT PHONE:	
ATTACH PHOTO COPY OF APPLICANT DRIVER'S LICENSE	

APPLICANT DL #:	STATE OF ISSUANCE

<i>I hereby certify the above information is true and correct:</i>	
X.	X.
<i>Signature of Applicant</i>	<i>Date</i>
X.	
<i>Witness to Applicant Signature</i>	

FOR OFFICE USE ONLY

Received By: _____ Date Received: _____

APPROVED BY:	CODE ENFORCEMENT	KDA	FIRE MARHSAL	PLANNING & ZONING	FEES
DATE APPROVED:					Amount Received: