



AUG/2022

# REGULATORY BUSINESS LICENSE APPLICATION OUTDOOR MUSICAL ENTERTAINMENT

Email application to: [businesslicenses@auburnwa.gov](mailto:businesslicenses@auburnwa.gov)

**PLEASE RETURN TO:**  
Community Development  
Department  
25 West Main Street  
Auburn, WA 98001  
Phone: (253) 804-5011

## APPLICATION FOR OUTDOOR MUSICAL ENTERTAINMENT REGULATORY LICENSE

City of Auburn regulatory license requirements can be found at Auburn City Code ACC 5.20

<b><u>CHECKLIST/REQUIREMENTS:</u></b>		<b><u>CASH BOND DEPOSIT:</u></b>	
Proposed Facility Plan	Yes <input type="checkbox"/> No <input type="checkbox"/>	The cash bond deposit or its balance will be returned if NO damage has occurred or the cost of making any repairs and the amount of any extraordinary law enforcement costs.	
Cash-Bond (Minimum \$500)	Yes <input type="checkbox"/> No <input type="checkbox"/>	DATE OF EVENT: _____	
Liability Insurance	Yes <input type="checkbox"/> No <input type="checkbox"/>		
LOCATION OF EVENT: _____			
<b><u>OUTDOOR MUSICAL ENTERTAINMENT BUSINESS INFORMATION:</u></b>			
Name: _____			
Address: _____			
City: _____	State: _____	Zip: _____	Telephone: _____

<b><u>APPLICANT'S INFORMATION:</u></b>			
Name: _____			
Address: _____			
City: _____	State: _____	Zip: _____	Telephone: _____
Maiden Name: _____		Alias/Previous Name: _____	
Drivers License No.: _____	Eye Color: _____	Hair Color: _____	
Sex: M <input type="checkbox"/> F <input type="checkbox"/>	HT: _____	WT: _____	
Social Security No.: _____	Date of Birth: _____	Place of Birth: _____	
U.S. Citizen: Yes <input type="checkbox"/> No <input type="checkbox"/> If no, please indicate status: _____			
Previous Home Address Past (5) years:			
1. _____		2. _____	
Previous Employment Past (5) years:			
1. _____		2. _____	

STATE OF WASHINGTON  
COUNTY OF KING

I, \_\_\_\_\_, being first duly sworn, on oath deposes and says: I am the above named applicant and make this affidavit for the purpose of obtaining from the City of Auburn an OUTDOOR MUSICAL ENTERTAINMENT individual license. I have personal knowledge of the matters stated in the individual license application, and the statements therein contained are true. I have read the individual license regulation in Auburn City Code 8.24 and the legal requirements contained therein.

I, \_\_\_\_\_, hereby give permission to the City of Auburn to conduct an investigation into my background. I waive any and all claims against any company, corporation or individual pertaining to information received from such company, corporation or individual by the city as a result of such investigation.

\_\_\_\_\_  
Signature of Applicant

Subscribed and sworn before me this \_\_\_\_\_ date of \_\_\_\_\_, 20\_\_\_\_,  
Notary Public in and for the State of Washington, residing  
at \_\_\_\_\_. My Commission Expires: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Signature: \_\_\_\_\_

### FEES:

The annual adopted Auburn business license and permit/application fees can be found here: [Auburn fee schedule](#)