



City of Rock Springs  
 212 D Street  
 Rock Springs, WY 82901  
 307-352-1500  
 307-352-1516 (fax)

All fees are **NON-REFUNDABLE**, the issuance of a license does not guarantee employment of any kind.

**Sexually Oriented Business Manager/Entertainer/Security License Application**

Incomplete applications will not be accepted.

New                       Entertainer License                      SOB License # \_\_\_\_\_  
 Renewal                     Manager License  
     Security License

Applicant Name: \_\_\_\_\_

Alias or Stage Name(s): \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Physical Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Personal Information**

Date of Birth: \_\_\_\_\_ Birthplace (City & State): \_\_\_\_\_

Social Security #: \_\_\_\_\_ Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_

Please check the Adult Cabaret(s) you will be working at:

- Astro Lounge Inc., 822 Pilot Butte, Frank Lew Owner
- Bare Back Saloon, 729 Pilot Butte, Schi. Rocks LLC/ Marcus Hadlock Owner
- Taboo, 1506 1/2 9th Street, Simba Inc, Frank Lew Owner

List below a complete statement of **all** convictions of the applicant for any misdemeanor or felony violations in this or any other city, county, or state within **five (5) years** immediately preceding the date of the application, except parking violations or minor traffic infractions. (Attach additional sheets if necessary.)

Charge: _____	Conviction Date: _____
Charge: _____	Conviction Date: _____
Charge: _____	Conviction Date: _____
Charge: _____	Conviction Date: _____
Charge: _____	Conviction Date: _____
Charge: _____	Conviction Date: _____

**Application Attachments:**

- Documentation that the applicant has attained the age of 21 years. Any of the following shall be accepted as documentation of age:
  - A copy of applicants fingerprints taken by a Rock Springs Police Department employee.
  - a. A motor vehicle operator's license issued by any state bearing the applicant's photograph and date of birth.
  - b. A state issued identification card bearing the applicants photograph and date of birth.
  - c. An official passport issued by the United States of America.
  - d. An immigration card issued by the United States of America.
  - e. Any other identification that the city determines to be acceptable.

**Nonrefundable** application and license fee of \$100.00.

I, the undersigned, hereby declare, under penalty of perjury, that the foregoing statements and answers herein and all data, information, documents, and evidence herewith submitted are to the best of my knowledge and belief true and correct. FURTHER, I HEREBY AUTHORIZE the City of Rock Springs, its agents and employees, to seek any information necessary to confirm any of the statements set forth in this application.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Temporary License Issued: \_\_\_\_\_ Expires: \_\_\_\_\_

Picture License Issued: \_\_\_\_\_ Expires: \_\_\_\_\_

**DEPARTMENT RECOMMENDATIONS:**

The Rock Springs Police Department \_\_\_\_\_ recommends \_\_\_\_\_/does not recommend that a license be issued to this applicant.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_. Department Representative \_\_\_\_\_