



2013 2014
May 1, 2012 ---- April 30, 2013

Fee \$25.00

CITY OF BURLINGTON SPECIAL EVENT ENTERTAINMENT PERMIT APPLICATION

Indoor Outdoor

PART I ORGANIZATION

All information in this section is required

1. Corporation/Sole Proprietor name Spielplatz Cabaret, Inc
2. D/B/A (Business Name) Spielplatz Cabaret 3. Bus. Phone 802.363.5544
4. Business Address 78 Rose St. Apt. #6, Burlington, VT 05401
5. Mailing Address 2015 Kinsley Rd. Jeffersonville, VT 05464
6. Contact person Jessie Owens 7. Contact Phone 802.363.5544
8. Email contact address jessie@spielplatzcabaret.org

RECEIVED
2013 APR 30 A 9:00
BURLINGTON OFFICE
TREASURY

PART II OPERATION

1. Do you currently have a Liquor License? Yes or No No
2. Do you currently have an Entertainment Permit/Special Event Permit? Yes or No No
3. Proposed Date(s) for this Special Event May 10, 11, 12 2013
4. Proposed Hours for this Special Event 7pm - 11pm
5. Proposed Location for this Special Event Specify if event will be on City street or right-of-way
Contra's Auditorium, City Hall, Burlington

For this Proposed location please answer the following questions:

- a) Occupancy Load _____ b) # of Restrooms _____ c) # of Egresses _____
 d) Date of last Fire/Safety Check _____ e) Dancing by Patrons? Yes or No No
 f) Amplified Music? Yes Yes or No _____ g) Will additional staff and/or security be required? Yes or No No

(Continued on back)

Fee \$25.00

PART III
DESCRIPTION OF ENTERTAINMENT

Please give DETAILED description of the type of entertainment for which you are applying:

Description Spulpalast Cabaret is a dance + theater troupe.
We will be giving a 2 hour performance, with an intermission.
We will be offering a cash bar, catered by A Single Pebble.

STATEMENT OF APPLICANT: Under the pains and penalties of perjury, I affirm that the preceding answers are true to the best of my knowledge and belief. I have read, understand and agree to comply with all City and State conditions, laws, ordinances, regulations and statutes.

DATE SIGNED: 04/29/13

SIGNATURE OF APPLICANT [Signature]

PRINT NAME: Jessie Owens

RELATIONSHIP TO BUSINESS Producer / Art Director

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BURLINGTON CLERK
TREASURER'S OFFICE

OFFICE USE ONLY

Fee Paid \$ _____ Date: _____ Fee Returned \$ _____ Date: _____

At their meeting of _____, the Burlington City Council License Committee recommended
Approval _____ Denial _____

At their meeting of _____, the Burlington City Council _____ this SPECIAL
entertainment permit application.