

APPLICATION FOR BOWLING ESTABLISHMENT LICENSE

The undersigned hereby submits the following information to support the application for a license to operate a Bowling Alley Establishment in the City of Holland.

Name of Business _____ Phone _____

Address _____ City _____ State _____ Zip _____

Owner of Business _____ DOB _____ Phone _____

Owner Address _____ City _____ State _____ Zip _____

Manager of Business _____ DOB _____ Phone _____

Manager Address _____ City _____ State _____ Zip _____

Number of alleys to be maintained _____

Length of time applicant has been resident of Holland _____

Place of residence during past five (5) years

I **have / have not** been convicted of any crime involving moral turpitude.

Below are the names of five (5) reputable citizens of this community, or other community in which I last resided, who may be used as references:

1. _____ Address/Phone _____

2. _____ Address/Phone _____

3. _____ Address/Phone _____

4. _____ Address/Phone _____

5. _____ Address/Phone _____

ADDITIONAL INFORMATION ON REVERSE SIDE REQUIRED

SUPPLEMENTARY INFORMATION RELATIVE TO
APPLICATION FOR BOWLING ESTABLISHMENT LICENSE

We hereby certify that _____ is known to us
and that we do testify to his good moral character:

Print Name _____ Signature _____

Address _____ Phone _____

Print Name _____ Signature _____

Address _____ Phone _____

Additional Requirement:

Owner/Manager must appear in person, provide a valid Michigan ID or Driver's License for an ICHAT background check, and pay the separate ICHAT fee. ICHAT form is available from the City Clerk website or office. If not a Michigan resident, applicant must show valid photo ID and submit a current background check.

Note: This application must be approved by Council.

I do hereby certify that the above information is correct to the best of my knowledge.

_____ Date

_____ Applicant Signature