



## CLASS II SEXUALLY ORIENTED BUSINESS PERMIT APPLICATION

OFFICE USE ONLY (DO NOT WRITE IN THIS SECTION)

PERMIT NUMBER: \_\_\_\_\_ RENEWAL: MONTHS: \_\_\_\_\_ FEE \$ \_\_\_\_\_  
DATE ISSUED: \_\_\_\_\_ DATE DENIED: \_\_\_\_\_  
DATE EXPIRES: \_\_\_\_\_ DATE ELIGIBLE: \_\_\_\_\_

PERMIT FEES

NEW/INITIAL: \$300 RENEWAL: Prorated @ \$25 per month REPLACEMENT/UPDATE: \$25

The applicant must submit a completed application along with his/her VALID Driver's License or State Identification Card, Social Security Card, and non-refundable permit fee. The fee shall be paid in the form of a money order or cashier's check, made payable to "Val Verde County Treasurer".

For more information, please refer to the online regulations for "*Sexually-Oriented Businesses*" in the unincorporated area of Val Verde County, Texas: <http://valverdecountry.texas.gov/334/Permits>

- |  |  |
|--|--|
| <input type="checkbox"/> No Changes                          | <input type="checkbox"/> Replacement - Lost Permit       |
| <input type="checkbox"/> New Permit                          | <input type="checkbox"/> Replacement - Damaged Permit    |
| <input type="checkbox"/> Renewal of Permit                   | <input type="checkbox"/> Replacement - Stolen Permit     |
| <input type="checkbox"/> Update Permit - True Name           | <input type="checkbox"/> Police Report For Stolen Permit |
| <input type="checkbox"/> Update Permit - Stage Name          | Agency: _____  |
| <input type="checkbox"/> Update Permit - Title/Position      | Report # _____   |
| <input type="checkbox"/> Update Permit - Establishment       |  |
| <input type="checkbox"/> Update Permit - Contact Information |  |

Money Order or Cashier's Check Number: # \_\_\_\_\_

Please print the name of the applicant: \_\_\_\_\_

NOTICE OF DENIAL WARNING

*See Attached Appendix A for details.  
(Pages 11-12)*



Complete all blanks on form. Place "N/A" in the field(s) if they do not apply. Please print legibly.

Providing false information on this document is a violation of Texas Penal Code Sec. 37.10-Tampering with Governmental Record.

STAGE NAME: \_\_\_\_\_

NAME OF ESTABLISHMENT: \_\_\_\_\_

POSITION (choose one):  Bar Back  Bartender  Bus Boy  Disc Jockey  Door Attendant  
 Entertainer  Host/Hostess  Manager  Security  Owner  Waitress  Other:

Do you have a T.A.B.C. Permit?  YES  NO Permit #: \_\_\_\_\_

Do you have a "City of Del Rio" S.O.B. Permit?  YES  NO Permit #: \_\_\_\_\_

**CRIMINAL HISTORY**

HAVE YOU EVER BEEN ARRESTED OR CHARGED WITH ANY CRIME?

This includes any arrests as a juvenile or adult, whether inside or outside Val Verde County and/or the State of Texas, regardless of the disposition of the case.

- No
- Yes

If you answered "YES", please indicate the following information using the space provided below:

- Any and all criminal charges/convictions and the date and place thereof
- Any charge for which applicant entered a plea of nolo contendere or for which applicant received deferred adjudication
- Do NOT include Class "C" misdemeanor traffic violations

If you answered "NO", please print "N/A" in the space provided below

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**APPLICANT INFORMATION**

FULL LEGAL NAME: \_\_\_\_\_  
Last Name First Name Middle Name Maiden Name

ALIAS NAME(S): \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ PLACE OF BIRTH: \_\_\_\_\_  
Month Day Year City State Country

SOCIAL SECURITY #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

DRIVER'S LICENSE #: \_\_\_\_\_ STATE: \_\_\_\_\_

IDENTIFICATION CARD #: \_\_\_\_\_ STATE: \_\_\_\_\_

HEIGHT: \_\_\_\_\_ ft. \_\_\_\_\_ in. WEIGHT: \_\_\_\_\_ lbs. EYE COLOR: \_\_\_\_\_

NATURAL HAIR COLOR: \_\_\_\_\_

**Specify number and location of each (if applicable). If not applicable, print "N/A" on the line:**

SCARS: \_\_\_\_\_

MARKS: \_\_\_\_\_

TATTOOS: \_\_\_\_\_

PIERCINGS: \_\_\_\_\_

**CONTACT INFORMATION**

HOME PHONE: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ MOBILE PHONE: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

VALID E-MAIL ADDRESS: \_\_\_\_\_



**RESIDENTIAL/MAILING ADDRESS**

**CURRENT RESIDENTIAL ADDRESS:**

**Address:** \_\_\_\_\_

**Street                      Apartment#                      City    State                      Zip Code**

**RESIDENCES WITHIN THE LAST THREE (03) YEARS:**

**Address:** \_\_\_\_\_

**Street                      Apartment#                      City    State                      Zip Code**

**Address:** \_\_\_\_\_

**Street                      Apartment#                      City    State                      Zip Code**

**Address:** \_\_\_\_\_

**Street                      Apartment#                      City    State                      Zip Code**

**CURRENT MAILING ADDRESS (If different from residential address above)**

**Address** \_\_\_\_\_

**Street or P.O.                      Apartment#                      City    State                      Zip Code**

**CURRENT OR PREVIOUS EMPLOYMENT**

**Employer's Name:** \_\_\_\_\_

**Employer's Address:** \_\_\_\_\_

**Street    City    State    Country**

**Employer's Phone Number:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ **Position:** \_\_\_\_\_

**Date Started:** \_\_\_\_\_ **Date Ended:** \_\_\_\_\_ **Reason for Ending:** \_\_\_\_\_

**AUTHORIZATION**

I, \_\_\_\_\_, (print name) hereby submit this application with having personal knowledge of the information contained in the application and that the information contained therein is true and correct. I declare under the penalty of perjury under the laws of the United States of America that the foregoing is true and correct. I authorize the Val Verde County Sheriff to seek information to confirm any statements set forth in the application. I have read and understand "The Regulations for Sexually-Oriented Businesses in the Unincorporated Area of Val Verde County, Texas" and agree to abide by these regulations.

\_\_\_\_\_  
**Applicant Signature**

\_\_\_\_\_  
**Date**



## Appendix A

### ORIENTED BUSINESS PERMITS (S.O.B.P.)

According to the regulations for *Sexually Oriented Businesses* in the unincorporated area of Val Verde County, Texas, the S.O.B. permit **SHALL BE DENIED** upon the finding by the VVSO of any of the following facts:

I. If the recipient or applicant has a conviction, criminal attempt, conspiracy, or solicitation to commit any of the following offenses; and any other offenses committed in another state that, if committed in this state, would have been punishable as one or more of the following offenses (described by law in the Texas Penal Code).

- Prostitution
- Promotion of Prostitution
- Aggravated Promotion of Prostitution
- Compelling Prostitution
- Obscenity, Sale, Distribution, or Display of Harmful Material to a Minor
- Sexual Performance by a Child
- Solicitation of a Child
- Indecency with a Child/Incest
- Harboring a Runaway Child
- Possession of Child Pornography
- Indecent Exposure
- Sexual Assault
- Aggravated Sexual Assault
- Gambling
- Gambling Promotion
- Keeping a Gambling Place
- Communicating Gambling Information
- Possession of Gambling Equipment
- Possession of Gambling Paraphernalia
- Forgery
- Credit Card Abuse
- Commercial Bribery
- Money Laundering
- Public Lewdness
- Any Violation of the Texas Controlled Substances Act. Chap. 481, Subchapter D of the Health and Safety Code

- II. Any conviction from an offense listed above AND the conviction was:
- A MISDEMEANOR offense and less than 2 years have elapsed since the final disposition of the conviction (confinement, probation, deferred adjudication, etc.)
  - A FELONY offense and less than 5 years have elapsed since the final disposition of the conviction (confinement, probation, deferred adjudication, etc.)
  - Within 5 years of the final disposition of any of the above offenses, applicant is convicted of TWO OR MORE MISDEMEANOR OFFENSES within a 24-month period
- III. The applicant has knowingly made a misleading statement of a material fact by omitting or falsifying information in the application for the Sexually Oriented Business Permit.
- IV. The applicant is delinquent in payment to the county of taxes, fees, fines or penalties assessed or imposed regarding the operation of a sexually oriented business.

The Sheriff shall defer determination whether to issue a S.O.B.P. until final disposition of any charge of any of the crimes listed in subsection XII(e)(1)(iv) that is pending or arises during the investigation period. No temporary S.O.B.P. shall be issued before there is a final determination of the criminal charge.

(Providing false information on this document is a violation of the Texas Penal Code, Section 37.10 - Tampering with Governmental Record.)

I, \_\_\_\_\_, (print name) hereby submit this application with

having personal knowledge of the information contained within the application. I declare under the penalty of perjury under the laws of the United States of America that all information provided in any submitted documents/applications is true and correct. I also declare that I have read and understand *"The Regulations for Sexually Oriented Businesses in the Unincorporated Area of Val Verde County, Texas"* and agree to abide by these regulations. In the event that my application is denied, I also understand that all payments submitted with my application are non-refundable.

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