

SECTION II: CORPORATION, LLC, OR PARTNERSHIP

(List names and addresses of all members)

Name of Member <i>(first, middle, last, suffix)</i>	
Address	
City and Zip	
Phone Number	
E-Mail Address	
Date of Birth	
Driver's License or State I.D.	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/>

Name of Member <i>(first, middle, last, suffix)</i>	
Address	
City and Zip	
Phone Number	
E-Mail Address	
Date of Birth	
Driver's License or State I.D.	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/>

Required Questions:

Does the applicant know that a sale to Minors is Prohibited? No person shall, give, furnish, or cause to be sold, given, or furnished an electronic smoking device or electronic smoking device paraphernalia to a person less than 18 years of age	YES NO
Does the applicant understand that the licensed premises shall be conducted in an orderly manner, and no disorderly, riotous, or indecent conduct shall be allowed at the licensed premises?	YES NO
Does the applicant understand that the licensee shall comply with all other provisions of the ordinances of the City of West Allis and the laws of the State of Wisconsin?	YES NO
Does the applicant understand that the transfer of license is prohibited to another person or premises?	YES NO
Posting of License. Does the applicant understand that the license shall be displayed at all times in plain view of the public on the licensed premises?	YES NO
Electronic Smokes Device will be sold	Over the Counter Vending Machine Both



Clerk's Office
 7525 W. Greenfield Avenue
 West Allis, WI 53214
 (414) 302-8220
www.westalliswi.gov

ELECTRONIC SMOKING DEVICE SALES LICENSE **FEE: \$100**

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the applicant. Applicant agrees to operate this business according to law and that the rights and responsibilities conferred by the license, if granted, cannot be assigned to another.

Any lack of access to any portion of licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal may be grounds for revocation of this license.

(Officer of Corporation/Membership/Manager of Limited liability Company/Partner/Individual or Agent)

CLERK'S OFFICE USE:					
LICENSE NO.	INSPECTIONS		RIGHTS TO PREMISES <small>(APPROVED BY CITY ATTORNEY)</small>	DATE DENIED	DATE ISSUED
	FROM POLICE	○ BINS (N)	○		