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City License 455 N. Main – 1st Floor Wichita KS 67202
 CITY LICENSE (316) 268-4553

**SMOKING PERMIT APPLICATION
 SMOKER-FRIENDLY ESTABLISHMENT
 MUST BE RENEWED ANNUALLY
 FEE \$250.00 IF REQUIRED BY ORDINANCE
 ALLOW 30 DAYS FOR APPROVAL**

Date _____

New _____ Renewal _____

APPLICANT INFORMATION:

Name		Phone Number	
Home Address		Zip	

BUSINESS INFORMATION (location for which permit is desired):

Business Name		Phone Number	
Business Address		Zip	
Mailing Address		Zip	

OWNER INFORMATION (List legal ownership: individual, corporation, limited partnership, etc)

Owner Name		Phone Number	
Owner Address		Zip	

MANAGER INFORMATION

Manager Name		Phone Number	
Manager Address		Zip	

Is Applicant required by law (other than City Code Chapter 7.56) to exclude persons under 18 years of age from its premises?

If so, please specify the source of that legal requirement: _____

Is Applicant prohibited by law from excluding persons under 18 years of age from its premises?

If so, please specify the source of that legal requirement: _____

ONGOING REQUIREMENTS INCLUDE:

- **Smoker Friendly signage as required by City Ordinance (City Code Chapter 7.56), at all entrances to the establishment.**
- **Exclusion from the premises of persons under age 18 (or proof that the business is legally prevented from excluding persons under age 18), except such persons as are employees who were already employed on the licensed premises on September 4, 2008.**
- **Obtaining and keeping on file written acknowledgements from all employees that they have been advised of the dangers of environmental tobacco smoke.**
- **Keeping premises and records available for inspection.**
- **Annual permit renewal.**

I, _____, the above named applicant, do solemnly swear that I have read the contents of this application and that all information and answers herein contained are complete and true. In addition, I have read and understand all rules and regulations as set out in the Code of the City of Wichita. Furthermore, I hereby agree to comply with all of the laws of the State of Kansas, and all rules and regulations prescribed by the City of Wichita.

 Signature of Applicant

 Date

FOR OFFICIAL USE ONLY

	Approved	Disapproved	Date
Office of Central Inspection			
License #		Date	Expiration Date

