

**APPLICATION FOR SEXUALLY ORIENTED BUSINESS LICENSE WITHIN  
THE COUNTY OF EL PASO, TEXAS**

**Name of Business:** \_\_\_\_\_

**Address of Proposed Business (the Property):** \_\_\_\_\_  
*Numbers* *Street*

\_\_\_\_\_  
*PO Box* *City* *County* *State* *Zip Code*

**Business Telephone Number:** \_\_\_\_\_

**Alternate Telephone Number:** \_\_\_\_\_

**Legal Description:** \_\_\_\_\_

\_\_\_\_\_  
**An applicant for a sexually oriented business license shall file in person at the permit office a complete application made on this form provided by the El Paso County Sheriff's Office. The application shall be signed as required by Article 4, Section C of the Order and shall be notarized. An application shall be considered complete when it contains, for each person required to sign the application, the information and/or items required below accompanied by the appropriate licensing fee.**

**Attach a copy of business's assumed name certificate filed with the County Clerk's Office.**

**1. Applicant's Full Legal Name:** \_\_\_\_\_

**Any Other Name(s) Used by the Applicant in the Past 5 Years:** \_\_\_\_\_

\_\_\_\_\_  
**Mother's Maiden Name:** \_\_\_\_\_

**2. Current Address of Applicant:** \_\_\_\_\_  
*Numbers* *Street*

\_\_\_\_\_  
*PO Box* *City* *County* *State* *Zip Code*

**3. Written proof of age of the Applicant, in the form of a departmental issued driver's license or a copy of a certified birth certificate accompanied by a picture identification document issued by a governmental agency must be provided at the time the application is filed.**

**4. A current photograph of the Applicant must be provided at the time the application is filed.**

**5. Name and Business Address of Statutory Agent or Other Agent Authorized to Receive Service of Process:**

<i>First</i>		<i>Middle</i>		<i>Last Name</i>		
<i>PO Box</i>	<i>Number</i>	<i>Street</i>	<i>City</i>	<i>County</i>	<i>State</i>	<i>Zip Code</i>

**6. A statement of whether the Applicant has been convicted of or has pled guilty or nolo contendere to a specified criminal activity as defined in this Order, and if so, each specified criminal activity involved, including the date, place and jurisdiction of each as well as the dates of conviction and release from confinement, where applicable. Use the below lines to provide the requested information. Use additional paper if needed and attach it to this application when submitting. *Note: An application will not be processed until all required information is submitted.***

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**7. A statement of whether any sexually oriented business in which the Applicant has had ownership and/or management stake, has, in the previous five (5) years (and at a time during which the Applicant had the influential interest):**

- a. Been declared by a court of law to be a nuisance; or
- b. Been subject to a court order of closure or padlocking.

**Use the below lines to provide the requested information. Use additional paper if needed and attach it to this application when submitting. *Note: An application will not be processed until all required information is submitted.***

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**8. An application for a sexually oriented business license shall be accompanied by a legal description of the property where the business is located and a site plan.**

**At the time of filing an application, the filing Applicant shall present himself or herself to the Sheriff's Office Headquarters during regular public fingerprinting hours for the purpose of being fingerprinted. For information, call the El Paso County Sheriff's Office Headquarters at (915) 538-2292.**

**9. The Applicant must place a sign in a conspicuous place at or near the entrance of the location where the sexually oriented business will be located. The sign must state the following in no smaller than four (4) inch type size: "THIS LOCATION HAS APPLIED FOR A SEXUALLY ORIENTED BUSINESS LICENSE FOR THE COUNTY OF EL PASO."**

**NOTE: THE INFORMATION PROVIDED PURSUANT TO THIS APPLICATION SHALL BE SUPPLEMENTED IN WRITING BY CERTIFIED MAIL, RETURN RECEIPT REQUESTED, TO THE PERMIT OFFICE/EL PASO COUNTY SHERIFF'S HEADQUARTERS WITHIN TEN (10) WORKING DAYS OF A CHANGE OF CIRCUMSTANCES WHICH WOULD RENDER THE INFORMATION ORIGINALLY SUBMITTED FALSE OR INCOMPLETE.**

**If a person who seeks a Sexually Oriented Business License under this order is an individual, he or she shall sign the application for a license as Applicant. If a person who seeks a Sexually Oriented Business License is other than an individual, each person with an ownership and/or management stake in the sexually oriented business or in a legal entity that controls the sexually oriented business shall sign the application for a license as Applicant. Each Applicant must be qualified under this Order and each Applicant shall be considered a licensee if a license is granted. By signing this application, each Applicant certifies that everyone who has a financial interest in the business has provided all required information and has signed this application.**

**FEES. The initial license and annual renewal fees for a sexually oriented business licenses shall be five-hundred-fifty dollars (\$550.00) for the initial fee and three-hundred-fifty dollars (\$350) for annual renewal.**

**INSPECTION. Sexually oriented businesses and sexually oriented business employees shall permit the El Paso County Sheriff's Office and/or the permit office and their agents to inspect, from time to time on an occasional basis, the portions of the sexually oriented business premises where patrons are permitted, for the purpose of ensuring compliance with the specific regulations of this Order, during those times when the sexually oriented business is occupied by patrons or is open to the public. This section shall be narrowly construed by the County of El Paso to authorize reasonable inspections of the licensed premises pursuant to this Order, but not to authorize a harassing or excessive pattern of inspections. This authority is in addition to any other authority to enter and inspect authorized by law. This Order is not intended to limit any other authority to enter or inspect authorized by law.**

**By my signature below, I acknowledge that I am aware of the requirements related to sexually oriented businesses as defined in the County of El Paso Sexually Oriented Business Order including the location restrictions in Article 13 of the Order. I further affirm that I have been provided a copy of the Order and understand that violations may result in suspension and/or revocation of this license, and potential criminal prosecution. I hereby submit the above information provided along with the attached documents in support of the Application for a License of occupancy for the property for a Sexually Oriented Business. I certify that all information is accurate and complete. I understand if it is determined that the application is not accurate and/or complete, the license may be denied or revoked, and may further result in criminal prosecution.**

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Applicant (additional licensee)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant (additional licensee)

\_\_\_\_\_  
Applicant (additional licensee)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

**STATE OF TEXAS §**

**§**

**COUNTY OF EL PASO §**

**Before me, the undersign authority, on this day personally appeared the above named affiant(s) who, after being duly sworn an oath, deposed and state(s) the facts herein set forth are true and correct.**

**Sworn to and subscribed before me on this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.**

\_\_\_\_\_  
**NOTARY PUBLIC, STATE OF TEXAS**