



**ENTERTAINMENT/AMUSEMENT/DANCE
PERMIT APPLICATION (L.H.M.C. CHAPTER 5.32)**

BUSINESS NAME: La Habra 300 Bowl PERMIT FEE: \$380.00
BUSINESS ADDRESS: 370 E Whittier Blvd
La Habra CA 90631 INITIAL: _____
BUSINESS PHONE: 562-691-6721 RENEWAL: X
BUSINESS LICENSE NO. 29865 ABC LICENSE NO. 345864

1. BUSINESS OWNER(S) INFORMATION:

NAME: Catherine Bage
ADDRESS: 934 Bonnie way Brea, CA 92821
TELEPHONE NO.: 714-404-1212
DRIVER'S LICENSE NO.: M0851875
HAVE YOU EVER BEEN CONVICTED OF A CRIME? _____ YES X NO
(IF YES PLEASE DESCRIBE TYPE OF CRIME): _____

NAME: Andrea Warren
ADDRESS: PO Box 115 La Habra CA 90631
TELEPHONE NO.: 714-865-6779
DRIVER'S LICENSE NO.: B4673777
HAVE YOU EVER BEEN CONVICTED OF A CRIME? _____ YES X NO
(IF YES PLEASE DESCRIBE TYPE OF CRIME): _____

2. PROPERTY OWNER'S NAME:

Catherine Bage
ADDRESS: 934 Bonnie way Brea, CA 92821
TELEPHONE NO.: 714-404-1212

3. NAME OF PERSON(S) WHO WILL SERVE AS ON-SITE MANAGER:

Annette Cox DRIVER'S LICENSE NO. C3458425
Ed Saleh DRIVER'S LICENSE NO. H4224558

4. LIST THE FULL NAMES AND D.OB. OF ALL EMPLOYEES AT THE BUSINESS:

Marcia Buettner, Amanda Buettner, Anthony Valdivia, Nathan GenSteke
Annette Cox, Ed Saleh, Caleb Knottz, Tim Davis, Rick Davis, Pedro Parades
Eusebio Maganellas, Chris Rodriguez, Getz Sandaval, Enrique Almaraz
Robert Higha, Getz Sandaval, Cody Anderson, Douglas Hecker

5. DESCRIBE ANY PROPOSED SECURITY MEASURES TO BE IMPLEMENTED AT BUSINESS: Onsite security cameras and License
Unarmed Security Guard During Karaoke Only

6. LIST THE NAME (IF ANY) AND DESCRIPTION OF ANY ADDITIONAL BUSINESS TO BE CONDUCTED AT THE PREMISES: Bowling, Bar, Arcade games and
occasional dancing during Karaoke

7. TYPE OF ENTERTAINMENT (CHECK ALL THAT APPLY):

LIVE (GIVE DETAILED DESCRIPTION I.E. MUSIC, CABARET, DANCE SHOW, PLAYS, ACTS, KARAOKE, ETC.):
Karaoke

<input checked="" type="checkbox"/> PATRON DANCING	<input checked="" type="checkbox"/> POOL/BILLIARDS; HOW MANY <u>1</u>
<input checked="" type="checkbox"/> RECORDED MUSIC	<input checked="" type="checkbox"/> ELECTRONIC/VIDEO GAMES;
<input checked="" type="checkbox"/> JUKE BOX	HOW MANY <u>12</u>
<input type="checkbox"/> DARTS; HOW MANY _____	OTHER; SPECIFY _____
<input checked="" type="checkbox"/> KARAOKE	

8. OWNER OF COIN OPERATED EQUIPMENT: Family Amusement
ADDRESS: 876 N. Vermont Ave. Los Angeles
TELEPHONE NO. 323-660-8180

9. BUSINESS HOURS (SPECIFY DAYS AND TIMES):

Sun - Thurs 9am - 10pm
Friday & Sat 9am - 12am

• HOURS OF ENTERTAINMENT, IF DIFFERENT (SPECIFY DAYS AND TIMES):
Sunday - Saturday 6pm - 12am

10. DIMENSIONS OF ROOM WHERE ENTERTAINMENT WILL TAKE PLACE: On File
OCCUPANCY OF ROOM: 192 DIMENSIONS OF DANCE AREA: On File

11. LIST ANY OTHER ENTERTAINMENT BUSINESSES/PERMITS OPERATED IN ANY OTHER CITY DURING PREVIOUS 3 YEARS (INCLUDE TYPE OF PERMIT, NAME OF CITY AND CURRENT STATUS OF PERMIT): none

ATTESTATION APPLICANT:

• I attest, under penalty of perjury, that the foregoing information is true and correct.
• I have also received a copy of La Habra Municipal Code Chapter 5.32.
• I understand that, if required, 15 copies of site and floor plans (to scale) showing the proposed layout of entertainment (i.e. dance/stage area, location of amusement devices) must be filed at the time of application filing, including the required \$380.00 fee.

NOTE: All "Live" Entertainment Permit applications must include site and floor plans.

Signature of Applicant: Catherine Gage
Title: Owner Date: 6/14/24

ATTESTATION PROPERTY OWNER:

I, (We) Catherine Gage, being duly sworn, depose and say that I am (We are) the owner(s) * of the property involved in this petition and that the statements herein contained and the information herewith submitted are in all respects true and correct to the best of my (our) knowledge.

Signature of Property Owner: Catherine Gage
Signature of Property Owner: _____

FOR OFFICE USE ONLY

\$380.00 Fee: Acct No. 113000-4419

Date filed with Community Development: _____ Date Application Deemed Complete _____

Type of Permit: LIVE _____ AMUSEMENT _____ DANCE FLOOR _____

Date Application Routed to Police Department (Amusement/Dance Floor):

- Approved _____ Denied _____ Date Decision Notice Sent _____
- Date Appealed to City Manager _____ Date Notice of Hearing Sent _____
Hearing Date _____ Approved ___ Denied ___ Date Decision Notice Sent _____

Date Application Routed to Planning Department (Live):

- City Council Hearing Date _____ Date Notice of Hearing Sent _____
Approved _____ Denied _____ Date Decision Notice Sent _____
- Planning Commission Hearing Date _____ Date Notice of Hearing Sent _____
Approved _____ Denied _____ Date Decision Notice Sent _____