



HENRICO COUNTY POLICE DIVISION

Dance Hall Permit Application

HCPD-190 (04/25)

Dance Hall Permit Application Instructions

This application must be completed in its entirety and submitted to the Police Division, along with the Dance Hall Application fee of \$200, **AT LEAST THIRTY DAYS PRIOR TO THE EVENT**. Payment may be made in cash, check, or money order made payable to the County of Henrico.

The following County departments will review this application: Planning, Division of Fire, Building Inspections, and Police Division. Each department has its own section within this application. A copy of Henrico Code Chapter 4, Article III titled "Dance Halls" is available upon request. Please read through these instructions completely before you begin. If you have any questions, you may contact the Police Division's Permits Unit at 804-501-7494.

SECTION I (page 2)

This section requests general information about the applicant, the venue, and the event. This page will be forwarded to all the reviewing departments. You must select one of the following:

- Continuous (to operate a permanent dance hall)
- Promoter – Multiple Events (to conduct multiple dances at the same location)
- Single Event (to conduct a single dance)

Permits issued as Promoter – Multiple Events are valid for 12 months following the date of issuance. You may list as many events as desired within the 13-month period following the date of application, provided that all events will occur at the same location. Final approval for each dance will not be granted until the premises passes inspection by the Division of Fire prior to the dance. It is your responsibility to contact the Police Division's Permits Unit at 804-501-7494 a minimum of 30 days prior to each event to arrange for an inspection.

SECTION II (page 3)

This section is for the Planning Department, who determines if the venue is properly zoned for the event. You **must** submit a floor plan showing the total floor area and area devoted to dancing.

SECTION III (page 4)

This section is for the Division of Fire. You **must** submit the following with your application:

1. A site plan for the venue indicating the building location and parking areas; and
2. A floor plan for the venue indicating locations of exits, seating areas, dance floors, food preparation areas, and other occupied areas.

The venue must submit to a fire inspection of the premises, including building systems, occupancy limits, emergency exit conditions, fire suppression and detection systems, and emergency evacuation plans.

SECTION IV (page 5)

This section is for Building Inspections, who determines if the venue adheres to the Virginia Uniform Statewide Building Code.

SECTION V (pages 6-8)

This section is for the Police Division. Background screening is performed on the applicant, as well as those affiliated with the dance hall venue and promotion of the event. **The Authorization to Obtain Information (page 8) must be notarized.**

Within 30 days of filing a completed application, or a longer period if requested by the applicant, the Chief of Police shall issue a permit or provide a written decision of denial to the applicant.

SECTION I – GENERAL INFORMATION

Check one:

Continuous
(permanent dance hall)

Promoter – Multiple Events
(multiple dances at the same location)

Single Event
(one dance)

APPLICANT INFORMATION

Name:	_____		_____	
	<i>Name of individual applying</i>		<i>Name of your business or employer</i>	
Phone numbers:	_____	_____	_____	_____
	<i>Home</i>	<i>Work</i>	<i>Cell</i>	<i>Fax</i>
E-mail address:	_____			
Address:	_____	_____	_____	_____
	<i>Street</i>	<i>City</i>	<i>State</i>	<i>Zip code</i>
Have you ever had a dance hall permit denied or revoked by any jurisdiction? Yes No				
If yes, list the date(s) and reason(s) for revocation(s):				

ABC license #:	** An ABC license is required if there will be <u>ANY</u> alcohol at your dance hall, either served by you or brought by the attendees. **			
Has your ABC license ever been suspended/revoked, or have you ever been denied an ABC license? Yes No				
If yes, list the date(s) and reason(s) why:				

EVENT INFORMATION

Name of event:	_____	Date of event:	_____
Sponsoring organization:	_____		
Anticipated number of attendees:	_____		
Attendee ages:	18 and over	18 and under	21 and over 21 and under All ages

VENUE INFORMATION

Name of business:	_____	Phone number:	_____
Address:	_____	_____	_____
	<i>Street</i>	<i>City</i>	<i>State Zip code</i>
Contact person/manager:	_____		

SECTION II – PLANNING

VENUE INFORMATION

Tax map or parcel number:	_____	Zoning:	_____
Type of business:	Restaurant		
(check one)	Private Club (if admission privileges are sold to the general public at any time, check "Other")		
	Other		
Floor plan showing total area and area devoted to dancing attached?	Yes	No	
Total floor area (in square feet):	_____	Area devoted to dancing (in square feet):	_____

FOR PLANNING DEPARTMENT OFFICE USE ONLY

Case number:	_____
The location COMPLIES with zoning regulations for a public dance hall.	
The location DOES NOT COMPLY with zoning regulations for a public dance hall.	
The proposed use is not a public dance hall as defined in the zoning ordinance.	
Director of Planning (or designee):	_____
Date:	_____

SECTION III – DIVISION OF FIRE

Will there be any pyrotechnics/special effects in conjunction with the event? Yes No

If yes, you must complete a separate permit application, obtained through the Fire Marshal's Office. Contact the Division of Fire at 804-501-4900 for more information.

Site plan for the venue indicating the building location and parking areas attached? Yes No

Floor plan provided indicating locations of exits, seating areas, dance floors, food preparation areas, and other occupied areas? Yes No

FOR DIVISION OF FIRE USE ONLY
Case number: _____
Did the proposed venue submit to a fire inspection of the premises, including building systems, occupancy limits, emergency exit conditions, fire suppression and detection systems, and emergency evacuation plans? Yes No
Date of inspection: _____
Comments:
The location COMPLIES with State and County fire codes. The location DOES NOT COMPLY with State and County fire codes. The proposed use is not a public dance hall as defined in the zoning ordinance.
Fire Chief (<i>or designee</i>): _____ Date: _____

SECTION IV – BUILDING INSPECTIONS

Existing/previous use of space: _____

Proposed occupant load: _____

Floor plan provided indicating locations of exits, seating areas, dance floors, food preparation areas, and other occupied areas? Yes No

FOR BUILDING INSPECTIONS OFFICE USE ONLY
Date of inspection: _____
Use group: _____
Occupant load: _____
Construction type: _____
CO number: _____
<div style="padding-left: 40px;">The location COMPLIES with applicable provisions of the Virginia Uniform Statewide Building Code.</div> <div style="padding-left: 40px;">The location DOES NOT COMPLY with applicable provisions of the Virginia Uniform Statewide Building Code.</div>
Building Official (<i>or designee</i>): _____ Date: _____

SECTION V – POLICE DIVISION

APPLICANT INFORMATION				
Name: _____ <div style="display: flex; justify-content: space-between; font-size: small; margin-top: 5px;"><i>Name of individual applying</i><i>Name of your business or employer</i></div>				
Position with business: _____				
Date of birth: _____		Last four digits of SSN: _____		Marital status: _____
Race: _____		Sex: _____	Height: _____	Weight: _____
		Hair: _____	Eyes: _____	
Have you ever been convicted of any criminal violations? Yes No				
If yes, list the date(s) and offense(s): _____ _____				
REFERENCES				
List the name, residential address, and telephone numbers of two individuals who are neither minors nor relatives of the applicant or of any person affiliated with the proposed dance hall.				
1. Name: _____ Relationship to applicant: _____				
Phone numbers: _____				
<div style="display: flex; justify-content: space-between;"><i>Home</i><i>Work</i><i>Cell</i></div>				
Address: _____				
<div style="display: flex; justify-content: space-between;"><i>Street</i><i>City</i><i>State</i><i>Zip code</i></div>				
2. Name: _____ Relationship to applicant: _____				
Phone numbers: _____				
<div style="display: flex; justify-content: space-between;"><i>Home</i><i>Work</i><i>Cell</i></div>				
Address: _____				
<div style="display: flex; justify-content: space-between;"><i>Street</i><i>City</i><i>State</i><i>Zip code</i></div>				
SECURITY				
What arrangements have you made for security for the dance hall? Include the security company's name, number of security personnel, etc. For information on hiring off-duty Henrico Police Officers, call 804-501-7226.				
PROMOTER/MANAGER/OFFICER INFORMATION				
List the name, date of birth, last four digits of SSN, telephone numbers, work title, and home address of each individual who is an officer, director, partner, principal, or manager of the proposed public dance hall, as well as any promoter involved in conducting the dances at the proposed public dance hall. Attach a separate piece of paper if needed.				
1. Name: _____ DOB: _____ Last four digits of SSN: _____				
Phone numbers: _____				
<div style="display: flex; justify-content: space-between;"><i>Home</i><i>Work</i><i>Cell</i></div>				
Work title: _____				
Address: _____				
<div style="display: flex; justify-content: space-between;"><i>Street</i><i>City</i><i>State</i><i>Zip code</i></div>				
2. Name: _____ DOB: _____ Last four digits of SSN: _____				
Phone numbers: _____				
<div style="display: flex; justify-content: space-between;"><i>Home</i><i>Work</i><i>Cell</i></div>				
Work title: _____				
Address: _____				
<div style="display: flex; justify-content: space-between;"><i>Street</i><i>City</i><i>State</i><i>Zip code</i></div>				

3.	Name: _____	DOB: _____	Last four digits of SSN: _____
	Phone numbers: _____	_____	_____
	<i>Home</i>	<i>Work</i>	<i>Cell</i>
	Work title: _____		
	Address: _____		
	<i>Street</i>	<i>City</i>	<i>State</i> <i>Zip code</i>
4.	Name: _____	DOB: _____	Last four digits of SSN: _____
	Phone numbers: _____	_____	_____
	<i>Home</i>	<i>Work</i>	<i>Cell</i>
	Work title: _____		
	Address: _____		
	<i>Street</i>	<i>City</i>	<i>State</i> <i>Zip code</i>
5.	Name: _____	DOB: _____	Last four digits of SSN: _____
	Phone numbers: _____	_____	_____
	<i>Home</i>	<i>Work</i>	<i>Cell</i>
	Work title: _____		
	Address: _____		
	<i>Street</i>	<i>City</i>	<i>State</i> <i>Zip code</i>
6.	Name: _____	DOB: _____	Last four digits of SSN: _____
	Phone numbers: _____	_____	_____
	<i>Home</i>	<i>Work</i>	<i>Cell</i>
	Work title: _____		
	Address: _____		
	<i>Street</i>	<i>City</i>	<i>State</i> <i>Zip code</i>
LEASED OR RENTED PROPERTY			
If the applicant does not own the premises of the proposed dance hall, the following signed statement must be obtained from the owner or owners of the premises:			
I, _____, the owner of the property at _____			
<i>(Name of owner)</i>		<i>(Address of proposed dance hall)</i>	
do hereby authorize the applicant, _____, to use the above-listed property for a public dance hall.			
<i>(Name of applicant)</i>			
_____ <i>Signature of owner</i>		_____ <i>Date</i>	
FOR POLICE DIVISION OFFICE USE ONLY			
Pursuant to Chapter 4, Article III of the Code of Henrico County, and the representations, terms, and conditions set forth in the above application _____ is issued a dance hall permit _____ is denied a dance hall permit for the operation of a dance hall as described in said application.			
Chief of Police (or designee): _____		Date: _____	

AUTHORIZATION TO OBTAIN INFORMATION

I authorize the County of Henrico Police Division to perform a background investigation in connection with my application for a public dance hall permit.

This investigation may include information as to my credit, criminal convictions, Division of Motor Vehicle records, personal references, professional references, previous employers, and other appropriate sources.

I authorize the release of any information that the County of Henrico may request from the above sources. All the information I have provided on this application is true and accurate.

Applicant's signature: _____ Date: _____

Commonwealth of Virginia
County of Henrico Police Division

On this _____ day of _____, 20____, _____,

whose name is signed to the foregoing instrument, personally appeared before me, acknowledged the foregoing signature to be his/hers, and having been duly sworn by me, made oath that the statements made in the said instrument are true.

Signature of Notary Public: _____ My commission expires: _____