

Performer Work Identification Card Application

Jacksonville Sheriff's Office

Any person who wants to perform in an adult entertainment establishment licensed under Jacksonville Municipal Ordinance Code Chapter 150 and Chapter 151 must obtain a Performer Work Identification Card from the Jacksonville Sheriff's Office. All performers will be required to obtain and maintain a Performer Work Identification Card on their person or within their custody and control at all times while at the adult entertainment establishment.

No Performer Work Identification Card will be issued to individuals who have been convicted of any Human Trafficking or crimes related to such activity.

No Performer Work Identification Card shall be issued if previously convicted within the relevant periods of time of any violations listed below.

For any performer convicted of the following violations either while performing at or while present in any dancing entertainment establishment, the performer's Work Identification Card shall be suspended as follows:

- Prostitution 5 years
- Forcible Felonies 3 years
- Narcotics Sales/Trafficking 3 years
- Lewd/Obscene Acts 1 year
- Possession of Narcotics and/or Narcotic Paraphernalia 1 year

A non-refundable fee of \$100.00 will be collected at the time this application is submitted. For your application to be processed, you must be in possession of a valid form of identification (a state issued driver's license or state issued identification card). Application, supporting documentation, and payment must be submitted to the Police Memorial Building at 501 East Bay Street Jacksonville, Florida for processing.

A fee of \$35.00 will be assessed for lost Performer Work Identification Cards.

A fee of \$50.00 will be assessed for renewing the Performer Work identification Cards.

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Applicant Information								
First Name				Middle Name				
Last Name			Maiden/Other Name					
Date of Birth	/	/	Sex		Race			
Natural Hair Color			Eye Color		Height			
Street Address					Apt #			
City				State	Zip Code			
Place of Birth (City, State or Country)								
Telephone Number	()	-					
Email Address								
Do you have any tattoos? Yes No								
If yes, please list the location and description of the tattoo:								
Driver License State Issu	ed				_			
Driver License Number	_				_			
Driver License Expiration	n Date _	/	/					
Passport Country of Issu	e _							
Passport #	_				_			
Passport Expiration Date	9	/	/					

OFFICE USE ONLY	License Year:	License Number:
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By signing my initials, I swear or affirm that I have read, and understand that I am subject to Municipal Ordinance Code, Chapters 150 and 151.

Initials

By signing my initials, I swear or affirm that I have viewed the Human Trafficking Training Video.

I, _______, swear or affirm that I am the above named applicant applying for a Jacksonville Performer Work indentification Card, and I declare under penalties of perjury, that the answers contained in the application and any supporting documentation has been submitted by me. This application and supporting documents are true, correct, and complete. Further, I understand that any falsifications or omissions of the application or supporting documents are grounds for the denial, suspension , or revocation of the Performer Work Identification Card.

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Print Name	Signature	<u>_</u>	// Date	
Notary Acknowledgment				
Sworn to and subscribed before me that applicant \Box who is personally known the second secon	/	, 20	, by the referrenced	

as identification and who did take an oath.

Notary Public State of Florida