

Phone: (216) 664-2264

## Instruction Sheet for Ticket Broker License

City of Cleveland

Division of Assessments & Licenses 601 Lakeside Avenue, Room 122 Cleveland, Ohio 44114

Hours of Operation: 8:00 a.m. to 4:30 p.m. Weekdays

DALLicenses@clevelandohio.gov

## When do you need a Ticket Broker License?

Any person, firm or corporation that engages in the procuring, reserving, buying, selling or any other dealing of two (2) or more tickets of admission or other evidence of right of entry at a price greater than the price printed on the ticket <u>or</u> for compensation in addition to the box office price to a theater, place of amusement or entertainment, or other place where public exhibitions, games, contests or performances are held within the City in any one (1) calendar year.

#### \*ONLINE TICKET SALES ARE EXEMPT FROM LICENSING\*

This is an annual license that expires on August 31st.

City of Cleveland Codified Ordinance Chapter 698, Ticket Broker.

<u>Additional Requirements:</u> Any person selling tickets of admissions as described above is required to collect and remit Admissions Tax as described in Codified Ordinance Chapter 195. For more information regarding Admissions Tax, please contact our Tax Compliance Section at (216) 664-2260.

City of Cleveland employees may not provide legal advice to the public. The information provided is for informational purposes only and is not legal advice. For questions regarding the application of a city ordinance or regulation, you should consult an attorney regarding your specific situation.

## How to obtain and/or submit a Ticket Broker License application

In Person/By Mail: Cleveland City Hall, Division of Assessments and Licenses, 601 Lakeside Avenue,

Room 122, Cleveland, OH 44114.

### What to bring or submit to the Division of Assessments and Licenses

- 1) Completed and signed application.
- 2) A bond that meets the following requirements:
  - In the amount of one thousand dollars (\$1,000.00);
  - Created by a surety company authorized to write bonds in the State of Ohio;
  - Includes the stamp and/or seal of the Insurance Company (future dates prohibited);
  - Expires on August 31st of the following year;
  - The date on the Power of Attorney matches the Witness seal date on the bond (future dates prohibited).
- 3) Fee of \$100.00 for the initial location and \$25.00 for each additional location. Fees are payable by cash, check or credit card. All fees are non-refundable. Make checks payable to the City of Cleveland.

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Telephone:

# **Ticket Broker License** Application

City of Cleveland Division of Assessments & Licenses

601 Lakeside Avenue, Room 122 Cleveland, Ohio 44114

Phone: (216) 664-2264 8:00	Hours of Op a.m. to 4:30 p		<u>DALLicen</u>	ses@clevelandohio.gov	
Date:	Fee: <b>\$100.</b>			- Each additional location	
SECTION A - APPLICANT INFORMATION	)N	(A	ll Fees are Non-refund	lable)	
Name of Applicant:					
Home Address:					
City:			State:	Zip:	
Home Phone #:		Email:	State.	Zip.	
Social Security #:		Date of Bir	th:		
Bocial Beculity #.		Date of Dif	011.		
SECTION B - BUSINESS INFORMATION					
BUSINESS TYPE					
Person (Sole Proprietorship)		Lin	nited Liability Comp	any	
Corporation		<b></b>	tnership (General o	<del>-</del>	
Other (specify)			r (		
Legal Name:					
DBA / Alias:					
Primary Business Address:					
City:			State:	Zip:	
Telephone #:		Email		zip.	
Federal ID # – REQUIRED:		Dillali	•		
rederarib # - REQUILED.					
SECTION C - ADDITIONAL PLACES OF	BUSINESS				
	Lo	cation #2			
Address:				T	
City:		Email:	State:	Zip:	
Telephone:		Email:			
	$\mathbf{Lo}$	cation #3			
Address:					
City:			State:	Zip:	
Telephone:		Email:			
	Lo	cation #4			
Address:		<u> </u>			
City:		T	State:	Zip:	
Telephone:		Email:			
Location #5					
Address:					
City:			State:	Zip:	

Attach additional sheets if necessary

Email:

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## Ticket Broker License Application

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SECTION D – OWNERSHIP INFORMATION: Provide the full name, title, complete home address and telephone number of each corporate officer, owner, general partner, stockholder and/or director with a controlling interest. Make copies of this page if additional space is needed.					
Name:	Title:				
Home Address:					
City:		State:	Zip:		
Telephone #:	Email:				
Name:	Title:				
Home Address:					
City:		State:	Zip:		
Telephone #:	Email:				
	T				
Name:	Title:				
Home Address:					
City:		State	Zip:		
Telephone #:	Email:				
SECTION E – REFERENCES: List two (2) character	r references from (	City of Clevel	and residents.		
Name:	Name:				
Address:	Address:				
City, State, Zip:	City, State, Zip:				
Employed by:	Employed by:				
Telephone:	Telephone:				

## **SECTION F - DECLARATION**

I declare under penalty of perjury that the above information is true and correct, and I understand that if this information is found to be fraudulent, the license issued in association with this statement will be revoked. I declare under penalty of perjury that I have read and understand Chapters 698 and 195 of the Cleveland Codified Ordinances, and I agree to comply with all obligations under these laws pertaining to ticket brokers and the buying, selling and dealing of tickets of admission.

## SIGNATURE OF APPLICANT

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# -TICKET BROKER'S BOND-\$1,000.00

Applicant Name:	
Legal Name of Business:	
DBA / Alias:	
KNOW ALL MEN BY THESE PRESENTS, That (I/we)	, as
Principal, and, as Surety, are held and Cleveland in the sum of one thousand dollars (\$1000.00), for the payment of we jointly and severally bind ourselves, our successors, heirs, executors, administration of the payment of	firmly bound unto the City of f which, well and truly to be made,
Witness our hands and seals this day of	, 20
The CONDITIONS of this obligation are such that in consideration of being	licensed by the Commissioner of
Assessments and Licenses of the City of Cleveland, Ohio, to engage in condu	
the business of Ticket Broker as defined in Section 698.01 or capable theret	
day of August, 20, and in consideration thereof said	
(Applica	nt Name)
undertaken to indemnify and save harmless said City of Cleveland from all	_
other expenses that may be occasioned in any wise by a violation of any of the	<del>-</del>
Ordinances of the City of Cleveland or statues of the State of Ohio relating t	
that said licensee will pay all final Judgments recovered against him by rea	_
account of the violation of said ordinances or laws or because of any misrepr	<del>-</del>
have been practiced on the person securing such judgment by the licensee of	
licensed. This bond shall be and remain in full force and effect with continu	
amount thereof notwithstanding any recovery thereon, and the surety hereo	_
and agrees to give ten (10) days notice in writing to the Commissioner of As cancellation.	sessments and Licenses before
Now, if the said shall well (Applicant or Business Name)	and truly perform all and singular
the conditions and obligations on his part to be performed as hereinbefore se	
be void, otherwise to remain in full force and virtue in law.	ov fortin, then this owngation share
20 1024, 00102 1120 00 10114111 111 1011 10200 4124 112040 111 14111	
	n.::.1
	Principal
	Surety