



Approved: _____

Permit No. _____

Disapproved: _____

Fee: \$50.00 Annually

Date: _____

Permit Expires: 12/31/20 _____

Annual Amusement Device License Application

1. Name of Proprietor: _____

Address of Proprietor: _____

Email: _____ Phone: _____

2. Name of Owner of Amusement Device: _____

Title: _____ Firm Name: _____

Owner's Address: _____

3. Name & Address of Every Person Who Has Financial Interest in Amusement Device:

4. Name of Amusement Device: _____

Type of Amusement Device: _____

Model Number: _____

Manufacturer: _____

Serial Number: _____

5. Address Where Amusement Device Will Be Kept & Maintained: _____

_____ Section _____ Block _____ Lot _____

6. Number of Devices at Premises (Include one sought to be licensed): _____

Applicant's Name: _____

Applicant's Title: _____

Applicant's Signature: _____ Date: _____