



License #cm~ \_\_\_\_\_

\$30.00 per machine

## Application for Amusement/Arcade Machine Permit

Town of Washington  
5750 Old Town Hall Road  
Eau Claire, WI 54701

Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Nature of Business: \_\_\_\_\_

To the Town Board of the Town of Washington:

I/We hereby apply for a permit for coin-operated machines to be effective from July 1, 200\_\_\_, to June 30, 20\_\_\_, (unless sooner revoked).

Answer all the following questions completely:

1. Do you own your own machines?  Yes  No

2. Name of owner of machines \_\_\_\_\_

3. Number and types of machines on premises  
\_\_\_\_\_  
\_\_\_\_\_

4. Do you have a police record?  Yes  No

5. If so, what are the facts?  
\_\_\_\_\_  
\_\_\_\_\_

6. If a corporation or association, give full name of corporation  
\_\_\_\_\_

7. If a corporation, give name of State of incorporation \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant