



APPLICATION FOR DELIVERY LICENSE(S)
Submit with nonrefundable \$26 fee / license to the City Clerk for Licensing

www.troyil.us

Please PRINT using ONLY BLUE or BLACK INK

APPLICANT INFORMATION:

Full Name of Applicant: _____
Full Address of Applicant: _____
Phone Number: _____ Cell Phone Number: _____
Date of Birth: _____ Age: _____ Email Address: _____

BUSINESS INFORMATION:

Name of Business: _____ Email Address: _____
Address of Business: _____ Business Phone Number: _____
Type of Business: _____
Owner of Establishment: _____
Full Address of Business Manager/Agent (if applicable): _____
Manager/Agent Phone Number: _____ Email Address: _____

PAYMENT AND LICENSE:

- The above-mentioned business requires the following licenses with the City of Troy.
 - (#) _____ Video Gaming Terminal Licenses (\$25 each - separate application required)
 - (#) _____ Delivery Licenses (\$26 each)
 - (#) _____ Amusement Licenses (\$11 each - separate application required)
- I have enclosed a check / money order in the amount of \$ _____ paid to the City of Troy for licenses.
- Please mail the completed license to my business address. OR I prefer to pick up the completed license.

Signature of Applicant: _____ Date: _____

I understand that per City Ordinance, it is the responsibility of the business owner to inform the City of Troy of a change in the number of vehicles used for delivery.

06/2020 ADL