



APPLICATION FOR AMUSEMENT LICENSE(S)

Submit with nonrefundable \$11 fee / amusement 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 where Amusement(s) are/will be Located: _____
Address of Business: _____ Business Phone Number: _____
Type of Business: _____ Owner of Amusement(s): _____
Owner of Establishment where Amusement(s) are/will be Located: _____
Full Address of Business Manager/Agent: _____
Manager/Agent Phone Number: _____ Email Address: _____
List all amusement machines by type below or attach a list: *(example: 3 dart boards, 1 pinball machine, etc.)*

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 - separate application required)
 - (#) _____ Amusement Licenses (\$11 each)
- 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: _____