

CITY OF OCONOMOWOC  
AMUSEMENT OPERATOR'S LICENSE APPLICATION

(Please Print)

Date: \_\_\_\_\_

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

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

Phone No.: \_\_\_\_\_

|                         |
|-------------------------|
| Filed _____             |
| Receipt No. _____       |
| Permit No. _____        |
| Reported to Board _____ |
| Granted / Denied        |
| (Office Use Only)       |

To the Common Council of the City of Oconomowoc:

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

1. Do you own your own machines? Yes / No (If you answered "No", complete question #2)
2. Name of Owner of machines: \_\_\_\_\_
3. Number and Type of machines on premises: \_\_\_\_\_
4. Where will machines be placed? \_\_\_\_\_
5. If a Corporation or Association, give full name of corporation: \_\_\_\_\_
6. If a Corporation, give name of State of incorporation: \_\_\_\_\_
7. Do you have a Police Record? Yes / No
8. If so, explain: \_\_\_\_\_

Subscribed and sworn to before me this  
\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Signature: \_\_\_\_\_  
Name: \_\_\_\_\_  
(Please Print)

\_\_\_\_\_  
Deputy Clerk / City Clerk / Notary Public  
Notary Public, \_\_\_\_\_ County, WI  
My Commission expires \_\_\_\_\_