

**VILLAGE OF CHEBANSE  
APPLICATION FOR AMUSEMENT/VIDEO GAMING DEVICES**

**Application Date:** \_\_\_\_\_ **FISCAL YEAR** \_\_\_\_\_ **LICENSE NO.** \_\_\_\_\_

**TYPE OF APPLICATION:** (Please Circle) 1) Amusement Device 2) Amusement Center 3) Video Gaming

**Name of Business Where Amusement Device(s) is Located:** \_\_\_\_\_

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

Phone #: \_\_\_\_\_ Type of Business \_\_\_\_\_

Contact: \_\_\_\_\_ Drivers License # \_\_\_\_\_

**Name of Business that Owns Amusement Device(s):** \_\_\_\_\_

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

Phone # \_\_\_\_\_ Contact Name: \_\_\_\_\_

Contact: \_\_\_\_\_ Drivers License # \_\_\_\_\_

**If A Corporation, Please Provide Complete Names  
Of Individuals and the Percentage of Ownership**

**If a Partnership, Please Provide Complete  
Names**

_____	_____ %	_____
_____	_____ %	_____
_____	_____ %	_____
_____	_____ %	_____

**Fee:** \$100.00 per pool table      \$100.00 x \_\_\_\_\_ (number of pool tables) = \_\_\_\_\_ **Total Fee**  
\$ 25.00 per casino based game    \$ 25.00 x \_\_\_\_\_ (# of casino based games)= \_\_\_\_\_ **Total Fee**  
**(PLEASE LIST ALL MACHINES ON ATTACHED SHEET)**  
\$100.00 per amusement center (5 or more amusement devices) \$100.00/year= \_\_\_\_\_ **Total Fee**  
\$ 35.00 per amusement device    \$ 35.00 x \_\_\_\_\_ (# of amusement device) = \_\_\_\_\_ **Total Fee**  
**(PLEASE LIST ALL MACHINES ON ATTACHED SHEET)**

• **TOTAL FEE**      \$ \_\_\_\_\_

**Non-refundable Fees Are As Follows:**

A separate device license shall be required for each premise that shall have amusement devices for operations. **This license is valid for one year (8/1 thru 7/31) and renewable every year.** These fees will not be prorated or refunded. The license shall be conspicuously displayed in the place of business.

**Restrictions:** Amusement devices shall not be operated within 200 hundred feet of the boundaries of a parcel of real estate occupied by any school building, public library, park, playground or place of worship.

I subscribe and affirm, under the penalties of perjury, that the statements made in this application (including statements made in the accompanying papers) have been examined by me and to the best of my knowledge are true and correct, and the applicants are of good moral character.

**DATE** \_\_\_\_\_ **TITLE:** \_\_\_\_\_ **SIGNATURE:** \_\_\_\_\_

TYPE MACHINE  
MANUFACTURES NAME  
MFR #

REGISTRATION  
NUMBER

FEE EACH

DATE OF REGISTRATION

DATE FILE WITH  
VILLAGE CLERK:

TOTAL FEES COLLECTED:

CHECK #

FEES RECEIVED BY:

DATE FEES SUBMITTED  
TO VILLAGE TREASURER

BY WHOM: