

CITY OF WAUSAU LICENSE APPLICATION

AMUSEMENT DEVICE DISTRIBUTOR

407 GRANT STREET, WAUSAU WI 54403, PH # (715) 261-6620

Date of Application: _____ Licensing Year: _____

AMUSEMENT DEVICE DISTRIBUTOR

Name of Business: _____ Ownership Type: _____
Business Address: _____ Business Phone: _____
Name of Business Owner or Agent: _____ Date of Birth: _____
Owner/Agent Address: _____ Telephone #: _____
Owner/Agent Drivers License #: _____ DL Issuing State: _____

LOCATION AND # OF DEVICES

Location of Devices Business Name #1: _____ Business Address: _____	Total # of Devices at this Location: _____ X \$ / Each = _____
Location of Devices Business Name #2: _____ Business Address: _____	Total # of Devices at this Location: _____ X \$ / Each = \$ _____
Location of Devices Business Name #3: _____ Business Address: _____	Total # of Devices at this Location: _____ X \$ / Each = \$ _____
Location of Devices Business Name #4: _____ Business Address: _____	Total # of Devices at this Location: _____ X \$ / Each = \$ _____
Location of Devices Business Name #5: _____ Business Address: _____	Total # of Devices at this Location: _____ X \$ / Each = \$ _____
TOTAL OF ALL LICENSES DUE _____ \$ _____	

Note: If you have more than five locations, please xerox this form for additional pages.

I hereby certify the foregoing answers are true and correct. I agree, in consideration of the grant of this license, to comply with the laws of the State of Wisconsin, the Municipal Code and the rules and regulations of the various regulatory agencies and commissions the City of Wausau pertaining to the supervision of activities permitted under the license for which this application is made. I understand this license may be revoked by the issuing authority according to the law. Section 111.321, 111.322, 111.325 & 111.335, Wisconsin Statutes, limits the information a licensing agency may ask regarding the arrest and conviction record of an applicant. If you have been arrested and the charges are still pending and this license requires you to qualify for a fidelity bond, or if the pending charges substantially relate to the activity for which you seek the license, you must provide such arrest information on this application. If you have been convicted of a felony, misdemeanor or other offense which substantially relates to the circumstances of the licensed activity or if you must qualify for and post bond, you shall enter such information on this application. Take notice, the state law provides the City may suspend or revoke a license issued upon his application if the applicant fails to provide this information. If you have doubts as to what you must enter see your own lawyer, or the Wisconsin Department of Industry, Labor and Human Relations. City employees shall not advise you on this matter.

Enter applicable arrest and conviction information here: _____

(Applicant Signature)

Subscribed and sworn to me this ____ day of _____ 20____.

BY (Print Name) : _____

(Signature of Clerk or Notary Public)

TITLE: _____

My Commission (is Permanent) or Expires: _____