

Fee: \$40.00 for each device  
 \$15.00 Record Check per person

License Expires June 30, 20\_\_

**CITY OF RACINE**  
**APPLICATION FOR LICENSE TO OPERATE**  
**JUKE BOXES, MECHANICAL AMUSEMENT DEVICES, VIDEO GAMES AND POOL TABLES**

FEIN#: \_\_\_\_\_

Wisconsin Seller Permit #: \_\_\_\_\_

NAME OF PERSON IN CHARGE: \_\_\_\_\_

TRADE NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS OF BUSINESS: \_\_\_\_\_

NATURE OF BUSINESS CONDUCTED ON PREMISES: TAVERN \_\_\_\_\_ OTHER \_\_\_\_\_

I/WE, hereby apply for a license to operate Juke Box, Mechanical Amusement Device and/or Video Game as defined in Sections 22-166 through 22-181 of the Municipal Code of the City of Racine from the date hereof until JUNE 30, 20\_\_ (unless sooner revoked), subject to limitations thereof and supplementary thereto, and agree to comply with all laws, resolutions and ordinances adopted by the Common Council of the City of Racine pertaining to the same.

I certify that I am a resident of the State of Wisconsin continuously since \_\_\_\_\_, and of the City of Racine continuously since \_\_\_\_\_.

**INDIVIDUAL OR PARTNERSHIP:**

Person's Name	Address & Home Phone Number	Date of Birth

**CORPORATION, LLC, CLUB OR ASSOCIATION:**

Title	Name	Address	Date of Birth
President			
Vice-President			
Secretary			
Treasurer			

**\*\*GAMBLING MACHINES THAT PAY OUT MONEY ARE ILLEGAL AND MUST BE REMOVED FROM THE PREMISES. FAILURE TO DO SO CARRIES THE RISK OF PROSECUTION AND SUSPENSION/NON-RENEWAL/REVOCAION OF CITY-ISSUED LICENSES, DEPENDING ON THE TYPE OF LICENSE HELD.\*\***

MECHANICAL

No. of Devices                      Description of type of device                      Device location in the establishment

# \_\_\_\_\_ Type: \_\_\_\_\_ Location: \_\_\_\_\_  
# \_\_\_\_\_ Type: \_\_\_\_\_ Location: \_\_\_\_\_  
# \_\_\_\_\_ Type: \_\_\_\_\_ Location: \_\_\_\_\_  
# \_\_\_\_\_ Type: \_\_\_\_\_ Location: \_\_\_\_\_  
# \_\_\_\_\_ Type: \_\_\_\_\_ Location: \_\_\_\_\_

VIDEO GAMES

# \_\_\_\_\_ Type: \_\_\_\_\_ Location: \_\_\_\_\_  
# \_\_\_\_\_ Type: \_\_\_\_\_ Location: \_\_\_\_\_  
# \_\_\_\_\_ Type: \_\_\_\_\_ Location: \_\_\_\_\_  
# \_\_\_\_\_ Type: \_\_\_\_\_ Location: \_\_\_\_\_  
# \_\_\_\_\_ Type: \_\_\_\_\_ Location: \_\_\_\_\_

POOL TABLES

# \_\_\_\_\_ Type: \_\_\_\_\_ Location: \_\_\_\_\_  
# \_\_\_\_\_ Type: \_\_\_\_\_ Location: \_\_\_\_\_

JUKE BOX

# \_\_\_\_\_ Type: \_\_\_\_\_ Location: \_\_\_\_\_  
# \_\_\_\_\_ Type: \_\_\_\_\_ Location: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF APPLICANT

DATE OF BIRTH \_\_\_\_\_