

| RECEIPT # |  |
|-----------|--|
| LICENSE # |  |

## APPLICATION FOR COIN OPERATED GAME/JUKEBOX AND/OR ARCADE OPERATION

I hereby make application under the provisions of Ordinance 971 to apply for a license to operate a mechanical coin-operated amusement device or jukebox in the City of Ashland beginning JULY 1 of the application year through JUNE 30 of the following year.

| LOCATION OF MACHINES:   | BUSINESS NAME    |                        |
|---|------------------|------------------------|
|   | BUSINESS ADDRESS |                        |
| NAME OF APPLICANT:  |                  |                        |
| APPLICANT BUSIINESS ADDRESS:  |                  |                        |
|   |                  |                        |
| APPLICANT PHONE NUMBER:   |                  |                        |
| APPLICANT EMAIL:  |                  |                        |
| ARCADE LICENSE (IF MORE THAN 4 GA<br>(1st game included with Arcade License |                  | \$ 30.00               |
| NUMBER OF COIN-OPERATED GAM   | E MACHINES       | x \$ 25 =              |
| NUMBER OF JUKE BOXES:   |                  | x \$ 20 =              |
| NUMBER OF KIDDIE MACHINES:  |                  | x \$ 20 =              |
|   | TOTAL DU         | E \$                   |
| Copy of valid WI Seller's Perm  | nit is required  |                        |
| Copy of valid WI Tax Registrat  | tion is required |                        |
|   |                  | Signature of Applicant |
|   |                  | Date                   |