



**VILLAGE OF WEST MILWAUKEE**

4755 WEST BELOIT ROAD  
 WEST MILWAUKEE, WI 53214  
 TELEPHONE (414) 645-1530  
 FAX (414) 671-8089

Office use only: License #20 \_\_\_/\_\_\_-\_\_\_\_\_

**AMUSEMENT DEVICE LICENSE APPLICATION**

LICENSE PERIOD: JULY 1, 20\_\_\_ THROUGH JUNE 30, 20\_\_\_

Establishments should only apply for licenses on machines that they own. Please pay for the owner operator fee along with the registration fee per machine if you in fact do own the machine. Amusement and Vending companies apply for and pay the Distributor fee along with the registration fee per machine.

Any person maintaining, operating or permitting the operation of a mechanical or electronic amusement device shall obtain a license to operate such device from the village clerk. Mechanical or electronic amusement device means any machine, device or game which, upon the insertion of a coin, slug, token or similar item, permits a person or operator to use the device as a game or contest of skill or amusement, whether or not the device registers a score, and which is not a gambling device. The term shall include but is not limited to, jukeboxes, movie projectors, electronic or mechanical game machines, pinball machines, pool or billiard tables, video machines, bowling machines, darts and electronic dart ball.

FEE SCHEDULE	Description	Amount	Total Amt. Paid
_____	<b>Distributor Fee</b> (Plus registration per machine below) <i>(Distributor means a person who leases or rents or places with others for use or operation, one or more coin-operated devices in the village)</i>	\$250.00	_____
_____	<b>Owner Operator</b> (Plus registration per machine below)	\$50.00	_____
_____	<b>Registration per machine</b> (N/A for Arcade) _____ @ \$50.00 # of machines		_____
_____	<b>Arcade</b> (Applies to 5 or more machines at 1 location- <u>Owner Operator Only</u> ) <i>(This does not apply to Distributors – all 5 or more mechanical or electronic machines have to be owner operated to qualify as an Arcade)</i>	\$500.00	_____
_____	Late fee if not paid by due date \$25.00		
<b>Total Amount Paid</b>		\$ _____	<b>TR#</b> _____

**Please place an X on the appropriate lines above showing the license you are applying for. Please enter the number of machines/devices you are applying for. Machine information needs to be listed on the back side of this application form.**

**ANSWER ALL QUESTIONS FULLY AND COMPLETELY: (PLEASE PRINT)**

**Distributor/Vending Company Name:** \_\_\_\_\_ **Contact Name** \_\_\_\_\_  
**Mailing Address** \_\_\_\_\_ **City** \_\_\_\_\_  
**State** \_\_\_\_\_ **Zip** \_\_\_\_\_ **Phone #** \_\_\_\_\_ **Fax#** \_\_\_\_\_  
**Cell Phone#** \_\_\_\_\_ **E-mail Address** \_\_\_\_\_

**OR**  
**Owner Operator:**  
 Name must match your liquor, wine, beer & food licenses.  Individual  Partnership  Limited Liability Company  Corporation/Non-Profit Organization:  
 \_\_\_\_\_  
**Address** \_\_\_\_\_ **City** \_\_\_\_\_  
**State** \_\_\_\_\_ **Zip** \_\_\_\_\_ **Phone #** \_\_\_\_\_ **Fax#** \_\_\_\_\_  
**Cell Phone#** \_\_\_\_\_ **E-mail Address** \_\_\_\_\_

Doing Business as (Name of business) \_\_\_\_\_ **W. Milwaukee, WI** (414) - \_\_\_\_\_  
**Business name (D/B/A)** **Business address** **Business Phone #**

**Owner Operator/Agent Name** \_\_\_\_\_  
 \_\_\_\_\_ **First** \_\_\_\_\_ **Middle** \_\_\_\_\_ **Last** \_\_\_\_\_  
**Home Address** \_\_\_\_\_ **City** \_\_\_\_\_  
**State** \_\_\_\_\_ **Zip** \_\_\_\_\_ **Phone #** \_\_\_\_\_ **Fax#** \_\_\_\_\_  
**Cell Phone#** \_\_\_\_\_ **E-mail Address** \_\_\_\_\_

**Manager (Person in Charge)** \_\_\_\_\_  
 \_\_\_\_\_ **First** \_\_\_\_\_ **Middle** \_\_\_\_\_ **Last** \_\_\_\_\_  
**Home Address** \_\_\_\_\_ **City** \_\_\_\_\_  
**State** \_\_\_\_\_ **Zip** \_\_\_\_\_ **Phone #** \_\_\_\_\_ **Fax#** \_\_\_\_\_  
**Cell Phone#** \_\_\_\_\_ **E-mail Address** \_\_\_\_\_

**Machine information** – You must list of all types of machines, location where the machine is and also the serial or model number for each machine.

Address (Location of Machine)	Business name where located	Kind of Machine	(Must supply) Serial or Model No.	(Leave Blank) License No.
1)		1		
		2		
		3		
		4		
		5		
		6		
		7		
		8		
		9		
		10		
2)		1		
		2		
		3		
		4		
		5		
		6		
		7		
		8		
		9		
		10		
3)		1		
		2		
		3		
		4		
		5		
		6		
		7		
		8		
		9		
		10		
4)		1		
		2		
		3		
		4		
		5		
		6		
		7		
		8		
		9		
		10		
5)		1		
		2		
		3		
		4		
		5		
		6		
		7		
		8		
		9		
		10		

Applicant agrees to comply with and be bound by all laws, ordinances, rules, regulations and penalties covering the business for which the license(s) is applied for. Licenses expire on June 30, 20\_\_.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date