TOWN OF ORANGETOWN
COMMERCIAL AMUSEMENT APPLICATION FOR VIDEO MACHINES

Local Law No. 9, 1982 Section 1B-2

It shall be unlawful for any person to have in his position or control, or to install, operate, maintain or permit to be placed in any premises, room, space, enclosure or building owned, leased or occupied by him or under his management or control any machine, apparatus or device commonly known as a "pinball machine" or any device or electronic or video game or any other machine or device commonly known as a "pool table", "football table" or "skittle ball" or any other device herein without a license therfor first having been obtained. The fee for such license shall be **$35 per year** or any portion, per device.

This Application contains Three (3) pages as follows:

1. – Applicant and premises and identification.

2.– Listing of Device(s), Serial Number(s) and name of address of owner(s)

3. – Floor Plan

APPLICANT:

Name: _____ Date of Birth: _____/_____/_____

Address: _____ Telephone Number: ( ) _____- _____

PREMISES:

Name: _____ Date of Birth: _____/_____/_____

Address: _____ Telephone Number: ( ) _____ - _____

Days of Operation: _____ Hours of Operation: _____

LANDLORD:

Name: _____ Date of Birth: _____/_____/_____

Address: _____ Telephone Number: ( ) _____ - _____

TENANT:

Name: _____ Date of Birth: _____/_____/_____

Address: _____ Telephone Number: ( ) _____ - _____

POLICE DEPARTMENT:

Applicant's local record checked ____, Date _____/_____/_____, By _____
Has _____ ever been convicted of a crime or of any gambling offense against the laws of the State of New York _____(Yes) _____(No)
If yes, set forth the date and place of each such conviction.
_____

BUILDING/ZONING DEPARTMENT:

Meets Zoning/Building requirements _____(Yes) _____ (No), By _____

FIRE INSPECTOR:

Premises Inspected, Date: _____/_____/_____, By _____
Results_____

TOWN CLERK:

License Issued, Date: _____/_____/_____, By _____
Number: _____ - _____ Expires: _____/_____/_____
Fee: $35.00 Per Machine Number of Devices on Premises: _____