## APPLICATION for a COMMERCIAL AMUSEMENT LICENSE

The applicant hereby applies for a license pursuant to the provisions of Chapter 7, Commercial Amusement License of the Code of the Town of *Orangetown* for the following purposes: NAME of APPLICANT TRADE NAME: \_\_\_ ADDRESS of LICENSED PERMISES: \_\_\_\_\_ TELEPHONE NUMBER: \_\_\_\_\_ CELL NUMBER: \_\_\_\_\_ This Application is to be completed and submitted to the Town Clerk of the *Town of Orangetown* accompanied by the following: 1. Certified check, bank check or money order payable to the *Town of Orangetown* with the required fee. 2. Insurance Policy for Liability in the amount of \$1,000,000 with the *Town of Orangetown* as Certificate Holder 3. Required bond issued by any surety company authorized to execute such bonds in the State of New York, or certified check and obligation form in place of surety bond in the amount of \$1,000.00 for Restoration of property **4.** If applicant is conducting business under a trade name, a certified copy of the certificate. 5. A statement signed and dated from the owner of the Property granting permission to the applicant to use the property. **6.** A plan of the site with the location of all rides, booths enclosures tents, and trailers. Any false answer or statement made by the applicant constitutes perjury and will subject any license issued hereunder to revocation. 1. If applicant is a partnership, attach all partners and their place of residence, or if applicant is a Corporation, attach the names of the president, secretary, treasurer and managing agent and their addresses: 2. List the name of the owner of the building or premises to be licensed: 3. Do you presently have a license issued by the State of New York in force for this trade or occupation? 4. Is a State License required for this trade or occupation?
5. Date: \_\_\_\_\_ State License Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ If State License is required, it must be displayed to Town Clerk prior to issuance of this license and must be kept in force during the entire period of this license. Upon renewal of State License, new license must be displayed to Town Clerk within ten days after receipt thereof. **6.** Has your State License ever been suspended or revoked? \_\_\_ 7. Has the applicant, if an individual, or any of the applicants, if a partnership, or the Corporation, or any officers stockholders, directors, or managing agents thereof ever been Convicted of a felony? \_\_\_\_\_\_\_ if yes, attach details: , declare under the penalty of perjury that all of the foregoing statements Name (Print) are true to the best of my knowledge, information, and belief. **Signature** Date Secure approval of this application from the following departments before returning to the Town Clerk: Name (Print) (Signature) Date BUILDING DEPARTMENT: ORANGETOWN POLICE DEPARTMENT: ROCKLAND COUNTY HEALTH DEPARTMENT: TELEPHONE NUMBER (845) 364-2512 **CHIEF** of the **FIRE PREVENTION BUREAU**: NEW YORK STATE LABOR DEPARTMENT: TELEPHONE NUMBER (845) 364-2515

ORANGETOWN TOWN CLERK: