

## APPLICATION FOR REGISTRATION OF VIDEO GAMING TERMINALS

APPLICANT INFORMATION:

Name of Applicant: Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Business Name: \_\_\_\_\_

If incorporated name and address of principal officer: \_\_\_\_\_

Tax ID Number: \_\_\_\_\_

Physical Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact Phone Number: ( ) \_\_\_\_\_ - \_\_\_\_\_ Alternate Phone Number: ( ) \_\_\_\_\_ - \_\_\_\_\_

\_\_\_\_\_  
(Signature of applicant) \_\_\_\_\_ Date \_\_\_\_\_

Title

**ATTACH LIST OF VIDEO GAMING TERMINAL DESCRIPTIONS.**

Initial Application and Renewal Fee \$250.00 per video gaming terminal/due May 1 each year Date Received \_\_\_\_\_ Accepted by \_\_\_\_\_

VIDEO GAMING TERMINAL INFORMATION:

DESCRIPTION OF DEVICE(S):

Name of device: \_\_\_\_\_ Mechanical Features: \_\_\_\_\_

Name of manufacturer: \_\_\_\_\_ Serial Number: \_\_\_\_\_

Terminal Address Location: \_\_\_\_\_

Name of Business where located: \_\_\_\_\_

Name of device: \_\_\_\_\_ Mechanical Features: \_\_\_\_\_

Name of manufacturer: \_\_\_\_\_ Serial Number: \_\_\_\_\_

Terminal Address Location: \_\_\_\_\_

Name of Business where located: \_\_\_\_\_

Name of device: \_\_\_\_\_ Mechanical Features: \_\_\_\_\_

Name of manufacturer: \_\_\_\_\_ Serial Number: \_\_\_\_\_

Terminal Address Location: \_\_\_\_\_

Name of Business where located: \_\_\_\_\_

Name of device: \_\_\_\_\_ Mechanical Features: \_\_\_\_\_

Name of manufacturer: \_\_\_\_\_ Serial Number: \_\_\_\_\_

Terminal Address Location: \_\_\_\_\_

Name of Business where located: \_\_\_\_\_

Name of device: \_\_\_\_\_ Mechanical Features: \_\_\_\_\_

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Name of manufacturer: \_\_\_\_\_ Serial Number: \_\_\_\_\_

Terminal Address Location: \_\_\_\_\_

Name of Business where located: \_\_\_\_\_

Name of device: \_\_\_\_\_ Mechanical Features: \_\_\_\_\_

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Name of Business where located: \_\_\_\_\_

Name of device: \_\_\_\_\_ Mechanical Features: \_\_\_\_\_

Name of manufacturer: \_\_\_\_\_ Serial Number: \_\_\_\_\_

Terminal Address Location: \_\_\_\_\_

Name of Business where located: \_\_\_\_\_