Owners of coin-operated machines should complete this form.

Rev. 3-24-22

235 Hickory St - Pewaukee WI 53072

Amusement Application

Permit period runs July 1st through June 30th

License Fee - $75

Date of Application: _____

BUSINESS / COIN-MACHINE OWNER / APPLICANT INFORMATION

Business Name: _____ FEIN #: _____

Business Address: _____ Phone #: _____

Business email: _____ ☐ Individual ☐ Partnership ☐ LLC ☐ Corporation

Partnerships - Please list names and addresses of all partners - *use another sheet of paper, if needed.*

LLC & Corporations - Please list names and addresses of all members including officers, directors and agents.

Individuals—Please list the individuals name, address and social security number.

Name	Address	City	State	Zip

WHERE ARE YOUR COIN MACHINES LOCATED?

Business Name	Business Address	Contact Person	Quantity of machines

SIGNATURE OF APPLICANT

The section below needs to be signed in front of a notary.

By signing this form, I hereby acknowledge that I will adhere to the Village of Pewaukee Ordinances and the State of Wisconsin State Statutes regarding coin operated machines. I acknowledge that all coin operated machines are for entertainment only and may only be used for such purposes. At the time that any information on this form changes I acknowledge it is my responsibility to update the information with the Village Clerk.

Are you a citizen of the United States? YES / NO **Have you ever been convicted of a felony? YES / NO**

Print Name: _____ Signature:_____ Date: _____

State of Wisconsin, County of _____. This document was signed before me on the ____ day of _____, _____ by _____.

_____ _____ (seal)

Notary's Signature Commission expiration date

For Office Use Only Registration Form Received: _____ Fee owed =_____

Cash _____ CK#_____ Receipt #_____ Initials of Staff: _____