CITY OF ELLIJAY

Georgia's Apple Capital

AMUSEMENT GAME MACHINES APPLICATION

NAME OF APPLICANT: AGE:
HOME ADDRESS:
LOCATION OF MACHINE(S):
MACHINE(S) OWNER'S NAME:
OWNER'S ADDRESS:
NAME AND ADDRESS OF ANY OTHER BUSINESS OWNED OR OPERATED BY APPLICANT WITHIN THE CORPORA TED LIMITS OF THE CITY:
LIST ALL LICENSES OR PERMITS FROM THE CITY HELD BY THE APPLICANT:
$25 FOR THE FIRST MACHINE & $10 FOR EACH ADDITIONAL MACHINE
OF THE MACHINE(S):

_____ ATTACHED A COPY OF OWNER'S MASTER LICENSE.

_____ I HAVE READ AND UNDERSTSTAND THE CITY ORDINANCE.PERTAINING TO AMUSEMENTS

_____here by certify that I understand my business must conform to the Amusement Game Machine Ordinance, as well as to all City of Ellijay ordinances, rules, and regulations. I acknowledge that I am aware that failure to comply with the requirements may result in penalties and revocation of my license for operating an amusement game room.

_____ _____

APPLICANT SIGNATURE DATE