

**AMUSEMENT LICENSE APPLICATION  
CITY OF PORT WASHINGTON**

1. Name of Licensee \_\_\_\_\_

2. Address of licensed premises \_\_\_\_\_

3. Type of entertainment ( live or machine(s))  
provided \_\_\_\_\_

4. Description of licensed premises (area) where machines are  
located \_\_\_\_\_

5. Description of licensed premises (area) where live entertainment will be  
performing \_\_\_\_\_

6. License date: \_\_\_\_\_

7. Date filed with Clerk \_\_\_\_\_

8. Fee: \$10.00 per machine.  
Number of Machines \_\_\_\_\_ Total \$ \_\_\_\_\_

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STATE OF WISCONSIN  
COUNTY OF OZAUKEE

The undersigned, being first duly sworn on oath, disposes and says that he/she is the applicant named in the foregoing application; that he/she has read and made complete answer to each question, and that his/her answers in each instance are true and correct.

Subscribed and sworn to before me  
The \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ Applicant Signature \_\_\_\_\_

Notary Public \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

License granted on \_\_\_\_\_  
License No: \_\_\_\_\_

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