

**AMUSEMENT LICENSE APPLICATION (ANNUAL LICENSE)
CITY OF PORT WASHINGTON**

1. Name of Licensee _____

2. Address of licensed premises _____

3. Type of entertainment (list all machines)
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: July 1, 2013-June 30, 2014

7. Date filed with Clerk _____

8. Fee: \$10.00 per machine.

Number of Machines _____ Total \$ _____

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: _____
