

TOWN OF TONAWANDA, N.Y.
Building Dept.
Buffalo, N.Y. 14223

NOTE: Proof of insurance must be submitted with application. (Workers Compensation form U-26.3 or C-105.2 and original disability form DB-120.1)

License No. _____

Date Issued _____

APPLICATION FOR LICENSE TO OPERATE AMUSEMENTS UNDER LOCAL LAW 7-81 OF THE TOWN AS AMENDED
(FEE MUST ACCOMPANY APPLICATION-LICENSE VALID FROM JAN 1 TO DEC 31 EACH YEAR)

QUANTITY

TOTAL

_____ Amusement Devices	\$ 50.00 ea	\$ _____	
_____ Pool Tables (coin operated)	50.00 ea	\$ _____	
_____ Pool Tables (non-coin operated)	25.00 ea	\$ _____	
_____ Bowling Lanes (non-coin operated)	25.00 ea	\$ _____	
_____ Miniature Golf Courses	500.00 ea	\$ _____	
_____ Motion Pictures	500.00 ea	\$ _____	
_____ Roller Skating Rinks	250.00 ea	\$ _____	
_____ Musical Concerts & Stage Plays	250.00 ea	\$ _____	
_____ General Amusements	500.00 ea	\$ _____	

Date _____ Total Fee: \$ _____

Name of Applicant _____ Phone _____

Address of Applicant _____ Zip _____

(If a corp., etc., give principal officers' names, addresses & phone on reverse side)

Trade Name of Business where Amusements Operate _____

Address _____ Zip _____

Character of Business Carried on at Such Place _____

Name & Address of Registered Agent of Applicant _____

Owner of Premises _____ Phone _____

Address of Owner _____ Zip _____

Do you request a variance from Sec 60 hrs. requirement of Local Law? Yes _____ No _____

If Yes above 1) Please state proposed hours of operation _____

2) Is this amusement conducted entirely within an enclosed structure? Yes _____ No _____

3) Did such amusement operate previously in this manner? Yes _____ No _____ : How long? _____

STATE OF NEW YORK:

SS

COUNTY OF ERIE : _____ being duly sworn, deposes and says that ___ he is the above applicant; that ___ he has read the foregoing application and knows the content thereof; that the same is true to the knowledge of deponent and ___ he believes it to be true.

Sworn to before me this _____ day of _____, _____ (applicant's signature)

Notary Public

(IF A CORPORATION USE
 CERTIFICATION ON REVERSE SIDE)

