

Application for Possession of Mechanical Devices and Amusements

Name of Applicant _____

Address of Applicant _____

How long at this address _____ Phone _____

Previous Address _____

Present Occupation _____ Previous Occupation _____

Have you been convicted of any crime within the past 5 years? _____

Date of Birth _____ SSN _____

Name and Address where device(s) will be located _____

Name and Address of Owner of above premises _____

_____ Phone _____

If applicant is not owner of premises, length and expiration date of lease _____

Name and Address of owner of devices _____

_____ Phone _____

Please fill out for each device installed at above listed premises

Nature of Machine	Manufacturer
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____
9. _____	_____
10. _____	_____

(For additional machines, please list on attached sheet)

I swear or affirm that the above information is true and correct to the best of my knowledge and belief and made in good faith for the purpose of securing a license from the Township of Butler for the operation of "Mechanical Devices" as provided by Township Ordinance No. 599, amended by Ordinance No. 613.

Signature of Applicant ~ _____

Sworn and subscribed before me this

_____ day of _____, _____

Notary Public – seal

Acknowledgement Form

Pursuant to Section 119-7 of the Codified Ordinances of Butler Township the undersigned applicant, owner, and/or proprietor acknowledge that this license, if granted by the Township of Butler, does not sanction or condone the use of any illegal gambling machine or device, whether illegal per se or as modified, or the making or giving of any payout, compensation, reward or other consideration based on the use of any legal or illegal gambling machine or device could result in criminal prosecution by municipal or other law enforcement authorities.

Signature