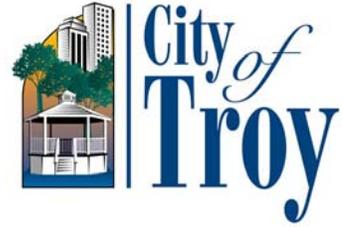


**City of Troy  
City Clerk's Office  
500 West Big Beaver  
Troy, Michigan 48084  
(248) 524-3331**



**APPLICATION FOR AMUSEMENT LICENSE**

**FEE OWED FOR RENEWAL:**

Date \_\_\_\_\_

Name of Troy Business \_\_\_\_\_

Address \_\_\_\_\_ Troy, Michigan Zip \_\_\_\_\_

Business Type \_\_\_\_\_

(Example: Arcade, Bowling Alley, Skating Rink, Coin-Operated Devices, Pool Tables, etc)

Name of Contact Company \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Phone \_\_\_\_\_

Manager \_\_\_\_\_ Date of Birth \_\_\_\_\_

(If Contact Company is different from Troy business, use Manager of Contact Company)

Home Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Length of Residence in Michigan \_\_\_\_\_

Mobile Phone \_\_\_\_\_ Fax Number \_\_\_\_\_

Email Address \_\_\_\_\_

Driver's License # \_\_\_\_\_

Residences for Past 10 Years:

Dates \_\_\_\_\_ Address/City/State/Zip \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you ever been convicted of a crime? \_\_\_\_\_ If yes, state when and where \_\_\_\_\_

\_\_\_\_\_

**REFERENCES:** Five (5) required (list below in addition to Attachment #1 on reverse)

Names \_\_\_\_\_ Address/City/State/Zip \_\_\_\_\_ Phone \_\_\_\_\_

1 \_\_\_\_\_

2 \_\_\_\_\_

3 \_\_\_\_\_

4 \_\_\_\_\_

5 \_\_\_\_\_

I hereby certify that the above statements are true. \_\_\_\_\_

Signature

**ALL ATTACHMENTS LISTED ON REVERSE SIDE MUST BE INCLUDED FOR EVERY RENEWAL**

**SEE REVERSE SIDE OF THIS FORM FOR FEE SCHEDULE**

## REQUIRED ATTACHMENTS:

- 1 Two (2) written references for the Manager
- 2 A **SCALE** drawing of the premise on which the business is conducted, showing the location of each coin-operated amusement device, exit, public restroom, drinking fountain and useable floor area
- 3 A complete list of **ALL** devices placed on the premise, including type (video, pinball, pool table, etc.) and the Name and Address of the owner(s) of the devices
- 4 A statement from the auditor or bookkeeper certifying that the gross receipts from the devices do not exceed five percent (5%) of the gross receipts of the business **(Does not apply to Arcades)**
- 5 A Site Plan indicating the location of the building proposed to contain the arcade, and the distance of said building from residentially zoned land

## PARTNERSHIP/CORPORATION APPLICATION INSTRUCTIONS:

If the applicant is a partnership, each active partner shall join in the application for the license, and shall furnish the information and recommendations required of an individual applicant.

If the applicant is a corporation authorized to do business in this State, the agent of the corporation who will have principal charge of the premises established shall make the application, and the application shall contain all of the facts and recommendations required in the case of an individual. The license issued to a corporation is revocable upon a change in the agent managing the premise, and a new license may be required by the City Council of the City of Troy before a new agent may take charge of the premise.

## FEE SCHEDULE

MAKE CHECKS PAYABLE TO CITY OF TROY

License Type	Annual Fee
Arcade	\$100.00/each device up to 5 devices; \$50.00/each device >5
Bowling Alley	\$50.00/first lane; \$2.00/each additional lane
Coin-Operated Amusement Devices	\$100.00/each device up to 5 devices (First \$100 is a non-refundable application fee); \$50.00/each device >5
Not Specified Facility	\$50.00
Pool Tables (not coin-operated)	\$50.00/first table; \$5.00/each additional table
Skating Rink	\$100.00
Swim Club	\$50.00
Tennis/Racquet Club (indoor)	\$100.00
Theater (indoor)	\$100.00

Approval of this application is determined by the following departments:

**Police, Fire, Treasurer, Building**