



VIDEO GAMING TERMINAL OPERATOR LICENSE APPLICATION

ORDINANCE 8176-2018

Section 111.004 VIDEO GAMING: (A) Any terminal operator of video gaming terminal(s) shall be required to apply for and obtain an annual video gaming terminal operator license for each establishment where such video gaming terminal(s) is/are located. (B)(2) Any terminal operator of video gaming terminal(s) shall apply to the Liquor Control Commissioner for an annual video gaming terminal operator license on an application form provided and pay a fee of \$500 for each establishment where such video gaming terminal(s) is/are located. (B)(3) Each video gaming terminal operator license issued by the City shall expire April 30, next, after date of issue.

TERMINAL OPERATOR BUSINESS

Terminal Operator Business Name: _____
Mailing Address: _____
Contact Person: _____ Contact Title: _____
Phone Number: _____ Email: _____

TERMINAL OPERATOR OWNER(S)

Name of Owner(s) of the Licensed Terminal Operator Business (use separate sheet if necessary):
Name: _____ Phone Number: _____
Name: _____ Phone Number: _____
Name: _____ Phone Number: _____

IGB TERMINAL OPERATOR LICENSE NUMBER (attach copy of license)

Issue Date: _____ Expiration Date: _____

ESTABLISHMENT(s) INFORMATION (VGT Locations) (use separate sheet if necessary)

Name of Establishment: _____
Address of Establishment: _____
Name of Establishment: _____
Address of Establishment: _____
Name of Establishment: _____
Address of Establishment: _____

VERIFICATION

Under penalties as provided by law, the undersigned certifies that the statements set forth in this application are true and correct.

Signature of Applicant

Date

STATE OF ILLINOIS)

COUNTY OF ST CLAIR)

I, the undersigned, a Notary Public in and for said County and State aforesaid, DO HEREBY CERTIFY that _____ personally known to me to be the same person whose name is subscribed to the foregoing instrument, as having executed the same, appeared before me this day in person and acknowledged that they signed and delivered the said instrument as their free and voluntary act for the uses and purposes therein set forth.

GIVEN under my hand and Notarial Seal this _____ day of _____, 20_____.

Notary Public

OFFICE USE ONLY		
Date Received: _____	Amount Paid: _____	License Number: _____