

UPPER CHICHESTER TOWNSHIP

PO BOX 2187, UPPER CHICHESTER, PA 19061
PH: 610-485-5719 FAX: 610-485-3615

TOWNSHIP RECEIVED DATE



MECHANICAL AMUSEMENT DEVICE LICENSE APPLICATION # _____

Any machine, device, or apparatus operated by the insertion of a coin, token, or similar object for the purpose of amusement and/or skill of any kind or description and for the playing of which a fee is charged. This term does not include any coin-operated mechanical musical device and does not include any vending machine which does not incorporate gaming or amusement features.

BUSINESS INFORMATION

BUSINESS NAME	PHONE #			
ADDRESS:				
Street	Apt#	City	State	Zip

APPLICANT INFORMATION

NAME	EMAIL	PHONE		
APPLICANT ADDRESS				
Street	Apt#	City	State	Zip

WOULD YOU LIKE A DIGITAL COPY OF MECHANICAL AMUSEMENT DEVICE LICENSE?

YES NO

PLEASE NOTE: A HARD COPY WILL STILL NEED TO BE VISIBLE IN THE BUSINESS

Please provide email address for digital version of
Business Registration Certificate.

OWNER'S CONTACT INFORMATION

NAME OF AGENCY/BUSINESS (if applicable):	PHONE:			
NAME:	EMAIL:			
ADDRESS:				
Street	Apt#	City	State	Zip

DUE AT TIME OF SUBMISSION

- APPLICATION WITH FEE (\$164.50)
- LIST OF ALL MACHINES/DEVICES W/ DESCRIPTIONS
 - ATTACH ADDITIONAL LIST, IF APPLICABLE
- PLOT/FLOOR PLAN DEPICTING ALL DEVICES with DIMENSIONS OF DEVICES AND THE AREA OF WHERE THEY ARE LOCATED

MACHINE #	MACHINE NAME	DESCRIPTION
MACHINE #1	MACHINE NAME	DESCRIPTION
MACHINE #2	MACHINE NAME	DESCRIPTION
MACHINE #3	MACHINE NAME	DESCRIPTION

The information you have provided on this application is a "public record" as defined by the Right - to - Know Law of the Commonwealth of Pennsylvania, 65 P.S §§ 67.101 - 67.3104. As such, upon proper request of Upper Chichester Township by a third party, this public record shall be accessible for inspection and duplication.

I understand that all licenses issued hereunder shall be posted in a conspicuous place within the public business place where the mechanical amusement devices are installed, operated and/or maintained and shall be nontransferable.

I HEREBY CERTIFY THAT THIS AMUSEMENT DEVICE LICENSE APPLICATION IS AUTHORIZED BY THE OWNER OF RECORD, THAT I HAVE BEEN AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION AS HIS/HER AUTHORIZED AGENT, AND WE AGREE TO CONFORM TO ALL APPLICABLE LOCAL, STATE, AND FEDERAL LEGISLATION.

APPLICANT SIGNATURE: _____

DATE: _____

FEE SCHEDULE

TOWNSHIP USE:

ANNUAL FEE PER DEVICE IS \$164.50.

CHECK _____ CASH
\$164.50 X _____ QTY = AMOUNT \$ _____

PLOT PLAN: Please depict all amusement devices with dimensions of device and the location of each device. You may attach additional sheets of paper if necessary.

A large grid of graph paper for drawing a plot plan. The grid consists of 20 columns and 30 rows of small squares, providing a space for the applicant to draw and label amusement devices and their locations.