

**VILLAGE OF SMITHTON
GAMING LICENSE APPLICATION**

APPLICATION # _____
FEE **per machine** \$125.00
TOTAL AMOUNT DUE _____

DISTRIBUTOR'S NAME AND ADDRESS _____

DISTRIBUTOR'S PHONE NUMBER _____

DISTRUBUTOR'S STATE LICENSE # _____

ESTABLISHMENT'S NAME & ADDRESS _____

ESTABLISHMENT'S PHONE NUMBER _____

ESTABLISHMENT'S STATE LICENSE # _____

NUMBER OF LICENSED TERMINALS _____

TERMINAL SERIAL NUMBERS _____

*ESTABLISHMENT OWNER SIGNATURE _____

*DATE _____ *Email _____

COPIES OF DISTRIBUTOR'S AND ESTABLISHMENT'S STATE GAMING LICENSES ARE **REQUIRED
PRIOR TO ISSUING LICENSES EACH YEAR.**

Application Approved _____

Application Denied _____

Reviewed by: _____ Date: _____

Reviewed by: _____ Date: _____