



CITY OF WAHPETON

1900 4th Street North · PO Box 490 · Wahpeton, ND 58074 · Phone 701-642-8448 · Fax 701-642-1428

AMUSEMENT DEVICES LICENSE APPLICATION

\$15.00 per device license fees effective January 1 through December 31

Application Type: New Renewal Permit Number: _____

1. The building, including street address, for which the license is sought:

Name of Building	Street Address		
City, State, Zip	Phone Number		

2. Business Name of the Person or Organization to hold the license:

Contact Person _____

Address _____

City	State	Zip Code	
Telephone Number	Fax Number	E-Mail Address	

3. The number and type of devices to be licensed for the calendar year*:

*Include number and type of devices for special or one-time events.

4. The name, address and telephone number of the person responsible for the premise for which the license is issued: (If same as #2 check here)

Name of Person	Street Address		
City, State, Zip	Phone Number		

I do hereby make application to license _____ amusement devices at the location described above and agree to abide by all provisions set forth in Ordinance Section 22-132 to 22-135 of the City of Wahpeton, North Dakota.

Include License Fee... _____ (Number of devices) x \$15.00 = \$ _____

License may not be sold, transferred or assigned except by the City Council.

I certify that: the information in this application is true, correct, and complete to the best of my knowledge; a disclosure statement is not required; and, that if this permit is approved, I will comply with the City of Wahpeton ordinances, laws and rules, the conditions noted above, and that I will submit the required \$15.00 per device annual permit fees by December 1st of each year.

Print Name _____ Date _____
Signature _____

(For City Use Only)

Date Application Received _____ Date License Granted _____
Fee Received \$ _____ Date Application Denied _____
Reason for Denial _____