

CITY OF ATLANTIC  
23 EAST 4<sup>TH</sup> STREET  
ATLANTIC, IOWA 50022  
712-243-4810

MECHANICAL AMUSEMENT DEVICE LICENSE APPLICATION  
ANNUAL FEE-\$50.00

Date \_\_\_\_\_

1. Name of applicant: \_\_\_\_\_ Phone: Res: \_\_\_\_\_

2. Residence address: \_\_\_\_\_ Phone: Bus: \_\_\_\_\_

3. Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_

4. List any felony convictions: \_\_\_\_\_

\_\_\_\_\_

5. Business address: \_\_\_\_\_

6. Type of business: \_\_\_\_\_

7. Number of machines to be licensed: \_\_\_\_\_

8. Date license fee paid: \_\_\_\_\_

.....  
ENDORSEMENT OF LOCAL AUTHORITY

Approved \_\_\_\_\_ Denied \_\_\_\_\_

\_\_\_\_\_  
Police Chief Date

\_\_\_\_\_  
City Clerk Date