

**Town of Dekorra**

PO Box 536  
Poynette, WI 53955  
608-635-2014  
townofdekorra@gmail.com

**Coin Machine License Application**

**\*per Dekorra Ordinance 6.05**

License Valid July 1, \_\_\_\_\_ Through June 30, \_\_\_\_\_

New

Minor arcade 4-9 devices

Renewal

Major arcade 10+ devices

Date: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Do you own the machines?  Yes  No

Name of Owner of machines: \_\_\_\_\_

Address of Owner of machines: \_\_\_\_\_

Specify the exact number and type of device being licensed. Attach separate list if necessary.

Quantity	Name/Type of Coin Machine/Amusement Devices
	Jukebox(s)
	Pool Table(s)
	Video Game(s)
	Other (please list name/type of each)
	<b>Total number of coin machine/amusement devices</b>

**FOR OFFICE USE ONLY**

Date Application received: \_\_\_\_\_

Date presented to Town Board: \_\_\_\_\_  Approved  Denied

Date license issued: \_\_\_\_\_  Fee paid – amount \_\_\_\_\_ Check # \_\_\_\_\_

License number: \_\_\_\_\_