



**APPLICATION FOR VIDEO GAMING TERMINAL(S)**

Applicant \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Number of Video Gaming Terminals: \_\_\_\_\_

Location(s) of Terminal(s): Attach diagram of premises showing location(s) of terminal(s)

State-issued License Attach copy of license issued to you by the Illinois Gaming Board

Terminal Operator:

Name \_\_\_\_\_

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

State License for Video Gaming Terminals:

No. \_\_\_\_\_

No. \_\_\_\_\_

No. \_\_\_\_\_

No. \_\_\_\_\_

No. \_\_\_\_\_

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**FOR VILLAGE USE ONLY:**

DATE: \_\_\_\_\_

FEE PAID: \_\_\_\_\_ Terminals x \$25.00 = \$ \_\_\_\_\_

APPROVED: \_\_\_\_\_

Village of Hampshire