



APPLICATION FOR VIDEO GAMING TERMINAL(S)

Applicant _____

Address _____

Telephone Number: _____

E-mail Address: _____

Number of Video Gaming Terminals Requested: _____ (up to six)

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

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

Terminal Operator:

Name _____

Address: _____

State License for Video Gaming Terminals:

No. _____

No. _____

No. _____

No. _____

No. _____

No. _____

Date: _____

I hereby certify that the information contained in this application is true and accurate; and that I have been duly authorized by Applicant to make this application.

Applicant: _____

By: _____

FOR VILLAGE USE ONLY:

DATE: _____

FEE PAID: \$_____ (No. of terminals x \$25.00)

APPROVED: _____

Village of Hampshire