

Don Ryan, Mayor

PATRICIA PEREZ, Village Clerk
DEBRA URBANO-DiSALVO, Village Attorney
RAYMOND J. CALAME, Treasurer



PERRY PETTUS, Deputy Mayor
LaMONT JOHNSON, Trustee
CHARLES E. RENFROE, Trustee
GLADYS RODRIGUEZ, Trustee

APPLICATION FOR COIN OPERATED AMUSEMENT DEVICE

FEE: \$300.00 Biennial License per Device

PLEASE TYPE OR PRINT CLEARLY Applicant should NOT write above this line

Number of Device(s): _____ (As per VCO 86-24, c2 "No more than two amusement devices on any public premise")

Name of Business where device(s) is/are located:

Type of Business:

Address of Business where device(s) is/are located:

Name & Address of Applicant:

Applicant's Date of Birth: _____ Applicant's phone number : _____

Name & Address of the owner of the amusement device:

If owner is a corporation or partnership, provide name of such and principal place of business along with name and addresses of persons composing firm. Papers showing this information may be attached to this application.

Do you agree to comply with the provisions of the Code of Ordinance of the Inc. Village of Hempstead?

_____ Yes _____ No

Criminal History: Whether or not the applicant or, in the case of a corporation, whether any officer or director thereof has been convicted of a crime, offense or violation of any municipal ordinance or law, and if so, the municipality or jurisdiction where the offense occurred, the nature of the same and the penalty assessed therefore.

List any and all previous or pending arrests and/or convictions, stating when, where and Court Disposition:
(Indicate N/A if not applicable)

If needed, attach additional sheets to application

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Have you been denied a license or had a license suspended or revoked by any Federal, State, or Local Government Agency? _____ Yes _____ No

Nassau County Consumer Affairs No.: _____

Designated Agent: (Located in Hempstead and authorized to accept notices and/or summonses in the respect to violations of any laws or regulations)

Name: _____ Telephone No.: _____

Address: _____

STATE OF NEW YORK

SS:

COUNTY OF NASSAU

I _____ hereby declare, under oath, that I fully understand and have answered all of the above questions truthfully, and acknowledge my obligation to provide the village with any changes or additions to the information contained in or annexed hereto. Should I be granted a license to operate within the Incorporated Village of Hempstead, all my employees and I will abide by all Federal, State, Town and Village laws. I understand that this license is non-transferable and will expire two years from date of issuance and that there is no grace period for renewal. I agree to maintain a valid license and insurance as long as I conduct business within the Incorporated Village of Hempstead.

Sworn to before me this _____ day

Signature: _____

Of _____, 20 _____:

Title: _____

(state whether owner agent, officer, etc.)

NOTARY PUBLIC

Except as otherwise specifically provided, every applicant for a license shall have this statement signed and sworn to by the applicant in person if an individual, by all partners if a partnership and by the president or duly authorized officer if a corporation.