



CITY OF NEWARK
Division of Property Maintenance
ELECTRONIC GAMING PARLOR
2021 LICENSE APPLICATION FORM

OFFICE USE ONLY	
DATE REC'D	INITIALS
PMT \$ W/FORM	
MONEY ORDER OR CASHIER CHECK ONLY	

PURSUANT TO ORDINANCE 19-14 ADOPTED 07/15/2019, ELECTRONIC GAMING PARLORS LOCATED WITHIN NEWARK CITY ARE REQUIRED TO APPLY FOR SEMI-ANNUAL LICENSING. SEE ATTACHED CHAPTER 830 GAME ROOMS, BILLIARD ROOMS, AND ELECTRONIC GAMING PARLORS FOR FURTHER INFORMATION REGARDING LICENSING REQUIREMENTS.

BUSINESS OWNER/STATUTORY AGENT INFORMATION

Business Owner Name	Last	First	Middle	Business Owner Telephone () -
Business Owner Address	Street Address	City	State Zip	Social Security Number - -
Trade Name				Federal Identification Number -
Agent/Manager Name	Last	First	Middle	Agent/Manager Telephone () -

PROPERTY OWNER INFORMATION

Rent <input type="checkbox"/>	Property Owner Name	Last	First	Middle	Property Owner Telephone () -
Own <input type="checkbox"/>					
Property Owner Address	Street Address	City	State Zip		

Business operations are contingent upon dwelling safety conformance per Property Maintenance Code 07-03 adopted 1/17/07.

BUSINESS LOCATION AND CONTACT ADDRESS

Electronic Gaming Parlor Business Location	Street Address	City	State Zip	Date Business Began in Newark / /
Correspondence Mail Address (Owner address will be used unless specified below)				
PO Box or Street Address	City	State Zip		

LICENSE APPLICATION

An itemized inventory list showing each machine's serial number, machine owner and a list of games thereon is required.

Application is for Yearly Renewal <input type="checkbox"/> First Time Applicant <input type="checkbox"/> Ownership Transfer* <input type="checkbox"/> *Transfers require Safety Director approval	Please indicate if business owner has been convicted of Misdemeanor <input type="checkbox"/> Felony <input type="checkbox"/> Neither <input type="checkbox"/> Violation of State or City Laws with the exception of minor misdemeanor traffic offenses are grounds for refusal to issue license. Ord 830.05
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CERTIFICATION

I CERTIFY THE ANSWERS PROVIDED ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. BY SIGNING, I AGREE TO A BACKGROUND CHECK AND UNDERSTAND THAT NON-CONFORMITY TO THE RULES AND REGULATIONS AS SET FORTH IN ORDINANCE 19-14 CHAPTER 830 MAY RESULT IN LICENSE REVOCATION AND CRIMINAL CHARGES.

Owner/Statutory Agent Signature

Date