

Town of Rib Mountain
3700 North Mountain Road
Wausau, WI 54401

Amusement Device License Application
Fee \$25.00 each

Date of Application _____ Number of Amusement Devices _____

Name of Business _____

Mailing Address _____

Description of Business _____

Address Where License is to Apply _____

Applicant's Name _____

Applicant's Home Address _____

Telephone _____

I hereby certify the foregoing answers are true and correct. I agree, in consideration of the granting of this license, to comply with the laws of the State of Wisconsin, the Municipal Code and the rules and regulations of the various regulatory agencies and commissions of the Town of Rib Mountain pertaining to the supervision of activities permitted under the license for which this application is made. I understand this license may be revoked by the issuing authority according to law.

Subscribed and sworn to me this _____ day of _____, 200__.

Signature of Clerk or Notary

Signature of Applicant