



CITY OF CARLYLE

**FOR OFFICE
USE ONLY:**

LICENSE NO.

DATE ISSUED

EXPIRATION DATE

Approved	Denied
<input type="checkbox"/>	<input type="checkbox"/>

Mayor - Signature

Date

VIDEO GAMING TERMINAL APPLICATION

New License

Renewal License

Business Information

City Liquor License #: _____

Business Name:

(DBA) Doing Business As _____

Enter the name of the business which will be selling or serving alcoholic beverages at the licensed premises exactly as it should be listed on the license.

Business Address:

Business Location

City

State

ZIP Code

Business Phone #:

() _____

FEIN #:

Mailing Address:

IF different than the physical business location

City

State

ZIP Code

Terminal Provider Information

Terminal Providers

Name:

Terminal Providers

Address:

City

State

ZIP Code

Terminal Providers

Phone #:

() _____

Terminal Information

Number of Video Gaming
Terminals to be operated: _____

Type of Terminals
to be operated: _____

Machine Serial Number	IGB VGT License #

Requirements

Please submit the following requirements with the application:

- A copy of the valid Illinois Gaming Board License. **Date State License Expires:** _____
- A site plan clearly indicating the proposed location of all Video Gaming Terminals and all required video cameras. **If renewing, has the site plan changed since the last submitted plan: YES or NO**
- A signed agreement with the Terminal Provider. **Date Agreement Expires:** _____
- A **One Hundred Dollar (\$100.00)** nonrefundable annual permit fee for each video gaming terminal, payable to the City of Carlyle. The annual fee shall be paid to the City of Carlyle at the time of the establishment’s liquor license renewal or initial application. This fee is not in lieu of any fee or payment payable to the State or the Illinois Gaming Board.

Certification

This application must be signed by an owner, an officer, or partner. PLEASE SIGN BELOW TO AGREE TO THE FOLLOWING: I will not violate any of the laws of the State of Illinois, or of the United States, or any ordinance of the City in the conduct of my place of business. I also, on oath, state that I have completed the foregoing application to the best of my knowledge and belief and that the contents thereof are true and correct. I have obtained proper federal and state licenses and can exhibit proof of said licenses. Further, I agree to notify this commission within 30 working days of changes in any of the above information.

Signature: _____ **Date:** _____

Subscribed and affirmed before this _____ *day of* _____, _____

Notary Public Signature: _____

City Hall Use ONLY

Received Copy of IGB License: _____

Received Site Plan: _____

Received Signed Agreement: _____

Annual Fee Received: \$ _____