

**License Application for
Amusement Device and Jukebox**

Applicant _____

Address _____

Place of Birth _____ Date of Birth _____

Name of Business _____

Business Address _____

Nature of Business _____ Distributor Name _____

Number of Amusement Devices _____ Number of Jukeboxes _____

STATE OF IOWA }
POTTAWATTAMIE COUNTY}

I, _____, being first duly sworn on oath, depose and say that the foregoing information set forth in this license application is true and correct to the best of my knowledge and belief and do further swear and affirm that none of the machines as above described will be used as gambling devices nor will be used for any gambling of any nature whatsoever.

X

Applicant

Subscribed and sworn to before me by the said applicant this ____ day of _____, _____

Notary Public

Number of Amusement Devices _____ Number of Jukeboxes _____ Total: \$ _____

**Amusement Device Fee: \$50.00
Jukebox Fee: \$10.00**

Submit a check or money order to:
City Clerk
209 Pearl Street
Council Bluffs, Iowa 51503