



\$20.00 per machine

Town of Sterling

Board of Selectmen

PERMIT # _____
PERMIT FEE _____
FEE PAID: _____

Automatic Amusement LICENSE RENEWAL APPLICATION

Please PRINT

Name: _____
(Name of Business or Organization or Individual)

Person: _____
(Person Responsible for License)

Address: _____ **Phone:** _____
(Street and Number)

_____ **Cell Phone:** _____
(City or Town and Zip Code) **Email:** _____

Location and Phone Number where license is to be used:

Address: _____ **Phone:** _____
(Street and Number)

(City or Town and Zip Code)

LIST NAME AND TYPE OF EACH DEVICE SEPARATELY:

_____	_____
_____	_____
_____	_____

THIS LICENSE EXPIRES ON DECEMBER 31ST OF EACH YEAR

Signature of Licensee

Print Name

F.I.D OR Social Security Number

Date: