Please attach one sheet for each location.

CITY OF NEWPORT, RHODE ISLAND

Application for Arcade/Juke Box or Mechanical Amusement Device License
(continued)
(provide individual machine identification)

DATE: _____

Applicant: _____
(individual, firm or corporation)

Ownership of Business where machine(s) is(are) located:

_____

D/B/A of Business: _____

Location: _____

Size and Description of Business Premises: _____

_____

Description of Machines: Use additional sheet(s), if necessary.

For Mechanical Features, use Pinball, Video, etc.

Type of Machine/Name	Mechanical Features	Serial Number

NOTES: _____