

**TOWNSHIP OF BRICK  
OCEAN COUNTY, NEW JERSEY  
401 Chambers Bridge Road, Brick, NJ 08723**

**APPLICATION FOR AMUSEMENT GAME LICENSE**

July 1 to June 30

DATE: \_\_\_\_\_

FEE: \$50.00 per machine

NAME OF BUSINESS: \_\_\_\_\_

ADDRESS OF BUSINESS: \_\_\_\_\_

BLOCK & LOT NUMBER OF BUSINESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

PHONE # OF BUSINESS: \_\_\_\_\_

NAME OF APPLICANT: \_\_\_\_\_  
(person, business, corporation, organization or firm)

If partnership, list all partners; if corporation, list any officer or director holding 10% or more outstanding stock. Application to be completed by duly authorized representative.

\_\_\_\_\_  
\_\_\_\_\_  
ADDRESS OF APPLICANT: \_\_\_\_\_

RESIDENTIAL PHONE # OF APPLICANT: \_\_\_\_\_

Has the Applicant(s) ever been convicted of a crime involving moral turpitude? \_\_\_\_\_

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

Are premises owned by applicant? \_\_\_\_\_

If not, name and address of lessor or licensor of premises:

\_\_\_\_\_  
\_\_\_\_\_

Number of Amusement Games (Machines) on Premises: \_\_\_\_\_

Person responsible for the supervision and monitoring of the use of Amusement Games on these premises during normal operating hours:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Residential Phone #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security No. \_\_\_\_\_

Ever been convicted of a crime involving moral turpitude? \_\_\_\_\_

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

**LICENSES ARE NOT TRANSFERABLE**

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_