

Village of Sussex
Email: wisussex@wi.rr.com
N64W23760 Main Street, Sussex WI 53089
Phone 262-246-5200 Fax 262-246-5222

Amusement Device License
Valid for 1 year beginning July 1

APPLICANT INFORMATION

Name _____ Date _____
Street _____ Apt. Number _____
City _____ State _____ Zip Code _____
Email _____ Phone _____

LOCATION ADDRESS (if different from above)

Street _____ Sussex, WI 53089

NUMBER & DESCRIPTION OF AMUSEMENT DEVICES (Space Invaders, Pool Table, etc.)

Total of _____ machines at \$30 each = _____

Arcade License = \$ _____

If you have 15 (fifteen) machines or more, you must apply for an arcade license (Arcade License is \$250) and submit an application to the Plan Commission for a conditional use permit and pay the required \$210 fee.
All Fees are non-refundable.

Please contact this office for further information.

LOCATION OF THE AMUSEMENT DEVICES IN YOUR PLACE OF BUSINESS

The fee for these permits must be paid after your application has been approved.

Signature of Applicant

Date