

Montgomery County Department of Health and Human Services Licensure and Regulatory Services 2425 Reedie Drive, 9th Floor, Wheaton, MD 20902 Phone: 240-777-3986 / Fax: 240-777-3088 or 240-777-4531 www.montgomerycountymd.gov/licensure

VIDEO GAME LICENSE APPLICATION** (ESTABLISHMENT) LICENSES ARE NOT TRANSFERABLE FROM LOCATION TO LOCATION OR PERSON TO PERSON

	TODAY'S DATE:
Name of Facility:	Total No. of Video Games at the Facility
Address of Facility:	
(i	nclude street number, suite number, street name, city, state, and zip code)
Felephone No.: ()	Fax No.: ()
Name of Owner/Corporation:	
· -	(include street number, suite number, street name, city, state, and zip code)
Selephone No.: ()	Email:
Video Game Owners: (Use Revers	e side if necessary to list all Video Game Owners)
4	$\mathbf{T}_{\mathbf{r}}$ is a set $\mathbf{N}_{\mathbf{r}}$ ().
1. Name:	Telephone No. ():
	• • •
	(include street number, suite number, street name, city, state, and zip code)
Address of Video Facility: _ 2. Name:	(include street number, suite number, street name, city, state, and zip code) Telephone No. ():
Address of Video Facility: _ 2. Name:	(include street number, suite number, street name, city, state, and zip code)
Address of Video Facility: _ 2. Name: Address of Video Facility: _	(include street number, suite number, street name, city, state, and zip code) Telephone No. ():
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SIGNATURE OF OWNER OR AGENT: _____

PRINTED NAME AND TITLE OF ABOVE SIGNATORY: _____

The Licensing Fee is **<u>\$125.00</u>** per facility.

Renewal applications received after March 01^{st} must include the <u>\$25.00</u> late application fee.