



**OPERATION OF AN AMUSEMENT CENTER APPLICATION**

**Email** - The completed application can be emailed to [Kathryn.Bowman@wentzvillemo.org](mailto:Kathryn.Bowman@wentzvillemo.org)

**Or can be mailed/dropped off at:**

**City Hall** – 1001 Schroeder Creek Blvd. Wentzville, MO 63385 (636) 327-5101

**New (\$250 Non-Refundable Application Fee)**       **Renewal (\$150 Non-Refundable Application Fee)**

In compliance with Chapter 625 of the Municipal Code of the City of Wentzville, Missouri the undersigned hereby respectfully applies for a license to operate an amusement center in the City of Wentzville.

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

Business Address: \_\_\_\_\_ Local Phone: \_\_\_\_\_

Business Mailing Address: \_\_\_\_\_

Business Email Address: \_\_\_\_\_

Business Owner Name: \_\_\_\_\_

Business Owner Home Address: \_\_\_\_\_

Business Owner Email Address: \_\_\_\_\_

Business Owner Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Business Owner DOB: \_\_\_\_\_ Social Security#: \_\_\_\_\_

If a Partnership, please list the names and addresses of all Partners and if Corporation, please list names and addresses of Corporate Officers:

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

Proposed hours of operation:      Sunday – Thursday:      \_\_\_\_ a.m./p.m. to \_\_\_\_ a.m./p.m.

Friday and Saturday:      \_\_\_\_ a.m./p.m. to \_\_\_\_ a.m./p.m.

**Property Owner(s) Name (if different from above)** \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Property Owners Email: \_\_\_\_\_

Additional items that **must** be submitted with completed application:

1. Accurate scaled and fully dimensioned plans of the premises, showing the proposed location of the machines.
2. The number of machines and the types of machines.

**No guarantee of issuance with payment.**

I hereby consent to a complete criminal record check being made, pursuant to my application for Amusement Center License.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**PLANNING AND ZONING DIVISION USE ONLY**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**POLICE USE ONLY**

Chief of Police investigation did  did not  discover information that requires denial of a license pursuant to Section 625.110 of the Wentzville Municipal Code.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**FOR OFFICE USE ONLY**

Receipt#: \_\_\_\_\_

Business License#: \_\_\_\_\_

Term of License: \_\_\_\_\_ through \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date