



## Arcade Tax Survey Form

Please provide the City of Byron the most current and accurate information on your business regarding amusement arcade and devices. Your arcade license approval will be based on the information given and such forms are subject to audit.

### Section 1:

#### Business Information:

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

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

Business Phone Number: \_\_\_\_\_

### Section 2:

#### Applicant and/or Interested Party Information: Please complete all information on all interested parties.

Applicant Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Cell Number: \_\_\_\_\_ Home Number: \_\_\_\_\_ Social Sec #: \_\_\_\_\_

Have you been convicted of any felony or misdemeanor? \_\_\_\_\_

Are you, your spouse or any household member an employee of the Byron Police Department? \_\_\_\_\_

Interested Party #1: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Cell Number: \_\_\_\_\_ Home Number: \_\_\_\_\_ Social Sec #: \_\_\_\_\_

Have you been convicted of any felony or misdemeanor? \_\_\_\_\_

Are you, your spouse or any household member an employee of the Byron Police Department? \_\_\_\_\_

Interested Party #2: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Cell Number: \_\_\_\_\_ Home Number: \_\_\_\_\_ Social Sec #: \_\_\_\_\_

Have you been convicted of any felony or misdemeanor? \_\_\_\_\_

Are you, your spouse or any household member an employee of the Byron Police Department? \_\_\_\_\_

Interested Party #3: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Cell Number: \_\_\_\_\_ Home Number: \_\_\_\_\_ Social Sec #: \_\_\_\_\_

Have you been convicted of any felony or misdemeanor? \_\_\_\_\_

Are you, your spouse or any household member an employee of the Byron Police Department? \_\_\_\_\_

**Section 3:**

Number of Machines: \_\_\_\_\_

\$10.00 per machine for first 9 machines: \$ \_\_\_\_\_

\_\_\_\_\_  
PRINTED NAME

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

Please return completed form to the Administration Department for signature of the City Clerk. Your application will then be forwarded to the Police Chief for inspection and authorization.

\_\_\_\_\_  
SIGNATURE OF CITY CLERK-TELINA ALLRED

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF POLICE CHIEF-WESLEY CANNON

\_\_\_\_\_  
DATE