

*City of Hickory Hills*

8652 WEST 95th STREET  
HICKORY HILLS, ILLINOIS 60457



**➤ APPLICATION FOR BUSINESS REGULATION CERTIFICATE  
FOR COIN OPERATED AMUSEMENT DEVICES  
WITHIN THE CITY OF HICKORY HILLS**

Please note any misrepresentations or falsification of the information sought below may result in revocation of the certificate as granted.

DATE \_\_\_\_\_

1. Applicant (Owner of Machines) \_\_\_\_\_

2. Address \_\_\_\_\_

Phone \_\_\_\_\_ After Hours  
Emergency No. \_\_\_\_\_

3. Illinois Retailers Occupation Tax No. \_\_\_\_\_

4. Federal Employers Identification No. (FEIN) \_\_\_\_\_

5. List the names, home addresses, home phone numbers, date of birth, social security number, and driver's license number of any person owning more than 10% legal, equitable, or beneficial interest in the Applicant, and of the officers denoted below of the Applicant:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

President \_\_\_\_\_

Secretary \_\_\_\_\_

Treasurer \_\_\_\_\_

6. If the Applicant is a corporation, list the names of all persons who are members of the Board of Directors:

\_\_\_\_\_

7. Number, type and location of machines to be operated: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
8. Is any law enforcing public official, police officer, mayor, alderman, member of the City Council or commission, or any president or member of a county board directly or indirectly interested in the Applicant or premises for where the machines are to be located, if so, list the name, address and position of said person (an indirect interest includes a spouse with one of the above positions or a person owning the land with one of the above positions)? \_\_\_\_\_  
 \_\_\_\_\_
9. Has Applicant (or any person identified in #5 or 6 above) ever had a business license suspended or revoked? \_\_\_\_\_
10. Has Applicant (or any person identified in #5 or 6 above) ever had a business license application denied? \_\_\_\_\_
11. Has Applicant (or any person identified in #5 or 6 above) ever been convicted of any felony under State or Federal law? \_\_\_\_\_
12. Has Applicant (or any person identified in #5 or 6 above) ever been convicted of being the keeper of a house of ill fame, of pandering, or any other crime involving decency or morality?  
 \_\_\_\_\_
13. Has Applicant (or any person identified in #5 or 6 above) every been convicted of any violation of a Federal or State law concerning liquor or gambling? \_\_\_\_\_
14. Does Applicant (or any person identified in #5 or 6 above) possess a current Federal Wagering or Gaming Device? \_\_\_\_\_
15. Does Applicant (or any person identified in #5 or 6 above) hold any state or local liquor licenses? \_\_\_\_\_
16. Is Applicant (or any person identified in #5 or 6 above) delinquent in payment of retailer's occupational tax (sales tax) for this or any other business? \_\_\_\_\_
17. The yearly fee of \$100.00 per coin oprated amusement device to be paid by:
- (a) Owner of Hickory Hills business \_\_\_\_\_
- (b) Owner of coin operated device \_\_\_\_\_

It is understood that no business may be commenced unless and until approval has been granted by the City of Hickory Hills.

I agree to comply with all state statutes and city ordinances and regulations relating to the above business.

\_\_\_\_\_  
 Name of Applicant (print)

\_\_\_\_\_  
 Signature of Owner/Manager