



**City
of
Milwaukee**

ccl-105 (6-09)

DISTRIBUTORS APPLICATION FOR COIN-OPERATED MACHINE PERMITS (TAGS)

OFFICE OF THE CITY CLERK LICENSE DIVISION
200 E. WELLS ST. ROOM 105, MILWAUKEE, WI 53202
(414) 286-2238 EMAIL: LICENSE@MILWAUKEE.GOV
WWW.MILWAUKEE.GOV/LICENSE

LICENSEE NAME _____
(Individual, Partner, or Agent, if Corporation or Limited Liability Company)

BUSINESS ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

MAILING ADDRESS (IF DIFFERENT THAN ABOVE) _____

CITY _____ STATE _____ ZIP CODE _____

Number of Amusement Tags Needed _____ @ \$25 PER MACHINE = \$ _____

Number of Phonograph Tags Needed _____ @ \$25 PER MACHINE = \$ _____

Subscribed and Sworn to before me this:

_____ day of _____, 20 _____

_____ Print name of licensee

Notary public, State of Wisconsin

► _____
Signature of licensee

My commission expires: _____

Date: _____

NOTARY SEAL MUST BE AFFIXED

OFFICE USE ONLY

Filed: _____ Initials _____

ADIST # _____ TAGA # _____ Issued _____

PDIST # _____ TAGP # _____ Issued _____