



BOROUGH OF APOLLO

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APPLICATION FOR MECHANICAL DEVICE/AMUSEMENT PERMIT

Effective Date From : _____ To: _____

Name of Business/Organization: _____

Address: _____ Phone No. (____) _____

Owner of Business/Responsible Party: _____

DEVICE	NUMBER OF DEVICES	COST PER DEVICE	TOTAL
<input type="checkbox"/> Pinball Machine	_____	\$ _____	\$ _____
<input type="checkbox"/> Video Game	_____	\$ _____	\$ _____
<input type="checkbox"/> Dart Games	_____	\$ _____	\$ _____
<input type="checkbox"/> Crane Machine	_____	\$ _____	\$ _____
<input type="checkbox"/> Pool Table	_____	\$ _____	\$ _____
<input type="checkbox"/> Jukebox	_____	\$ _____	\$ _____
<input type="checkbox"/> Other _____ <i>Please specify machine</i>	_____	\$ _____	\$ _____
TOTAL COST: \$			_____

** Fees are prorated on a six month basis; all permits expire at the end of the fiscal year.*

FOR OFFICIAL USE ONLY

FEE PAID: _____ CHECK NO.: _____ DATE PAID: ____/____/____

FEE RECEIVED BY: _____

DATE PERMIT ISSUED: ____/____/____