ENTERTAINMENT DEVICE LICENSE

Information included in this application is PUBLIC INFORMATION and will be provided to the public upon request.

PLEASE FULLY COMPLETE THE APPLICATION AND PRINT LEGIBLY.

Required Documentation: Applications cannot be accepted without the following attachments and payment.

- Copy of Current Photo I.D.
- SP:C1 Tax Clearance Form
- Worker’s Compensation Form
- If Applicable, Supplemental Details Sheet

CHOOSE APPROPRIATE TYPE OF YOUR APPLICATION

- New Applicant:
  - Payment of Investigation Fee $25.00
  - Payment of $30.00 per machine
  - Payment of $75.00 Annual Fee (1 thru 5 machines)
  - Payment of $15.00 Annual Fee (for each machine in excess of five)

- Renewal Applicant:
  - Payment of $30.00 per machine
  - Payment of $75.00 Annual Fee (1 thru 5 machines)
  - Payment of $15.00 Annual Fee (for each machine in excess of five)

If you have a license that has lapsed or you are submitting your application past it’s due date, you must pay an additional $25.00 or 10% of the total licensing fee (whichever is greater).

If your license has lapsed and is being submitted over thirty (30) days past it’s expiration date or due date, you must apply as a new license and pay all applicable fees related to a new license.

PERSONAL INFORMATION

Individual Submitting Application (Full First, Middle, Last Name)

Home Street Address       City/State       Zip

Home Phone (including area code)       Cell Phone (including area code)

Date of Birth:              Drivers License #

State of Issuance:                      

(COMPLETE BOTH SIDES OF THIS FORM)
BUSINESS LOCATION INFORMATION

Business Name

Business Street Address  City/State  Zip

Business Phone (including area code)  Alternate Phone (including area code)

PLEASE ANSWER ALL QUESTIONS TRUTHFULLY AND TO THE BEST OF YOUR KNOWLEDGE
(attached additional sheets as necessary)

1. Have you ever been convicted of any misdemeanor or felony violation of local ordinances (with the exception of misdemeanor traffic violations)?
   
   Yes ☐  No ☐

   If yes, provide details of convictions (date of offense, date of conviction, location, charge):

   ____________________________________________________________

2. Have you ever been denied a license to conduct a like or similar activity or had such license suspended, revoked, or canceled, in any City/State?

   Yes ☐  No ☐  If yes, provide details: _____________________________________________

3. List all names, nicknames and aliases by which you have been known:

   ____________________________________________________________

4. List two (2) of your previous addresses, immediately prior to your present address:

   Street Address  City/State  Zip

   Street Address  City/State  Zip

(I) do hereby swear that the answers in this application are true and correct to the best of my knowledge. I do authorize the City of Anoka, its agents, and employees, to obtain any necessary information and to conduct an investigation, if necessary, into the truth of the statements set forth in this application and my qualifications for said license. I do understand that providing false information shall be grounds for denial of my license. I fully understand that it is my responsibility to be familiar the requirements of the City, which is detailed in the pertinent section of the Anoka City Code, which was provided to me with my original application, and of which I may request additional copies of by contacting the office of the City Clerk.

Signature of applicant:

Date: ___________________  Signature: ___________________

(for office use only)

Date Received: ___________________  Received By: ___________________  Complete ☐  Incomplete ☐:
SUPPLEMENTAL DETAILS

LICENSE TYPE: ENTERTAINMENT DEVICE LICENSE

Additional Documentation: Applications cannot be accepted without the following:

➢ There is a limit of 8 devices as a secondary use. There is a limit of 10 devices in an arcade (which requires a separate license).

➢ Vendor Information, providing company name, full address and phone number.

Vendor (Company Name)

Address     City/State    Zip

Address     City/State    Zip

Phone (including area code)

☐ YES  ☐ NO  I am renewing my license with the same amount of entertainment devices that I licensed in the previous year. That amount is ______________.

If no, how many additional devices are you requesting be licensed _____.

☐ YES  ☐ NO  I am the owner of the property premises for which this license will be granted.

If no, you must provide the name, address and phone number of the property owner.

☐ YES  ☐ NO  I am NOT the property owner of the premises for which this license will be granted; however, I am authorized by lease or other means to conduct business on these premises.

☐ YES  ☐ NO  I am the sole owner of the business for which this license will be granted.

If jointly owned or partnership, you must provide the full name, address and home phone number of all joint owners and/or partners on a separate sheet of paper.
AUTHORIZATION AND CONSENT FOR RELEASE OF INFORMATION
FOR CITY OF ANOKA BACKGROUND CHECK
PLEASE ATTACH A COPY OF YOUR DRIVERS LICENSE.

License you are applying for: ________________________________________________________________

Full Name: _______________________________________________________________________________

First                                        Middle                                            Last

Home Address: ___________________________________________________________________________

House #               Street                           City                              State & Zip

Home Phone Number:______________________________________________________________________

Include Area Code

If applicable, complete the following:

Business Name __________________________________________________________________________

Business Address: _________________________________________________________________________

Building #            Street                       City                          State & Zip

Business Phone Number: ___________________________________________________________________

Include Area Code

Date of Birth: ____________________________________________________________________________

Drivers License Number (copy of DL attached):_________________________________________________

DL/State of Issuance: ______________________________________________________________________

I understand that the above-mentioned information about me may be protected under state and /or federal privacy laws or City policy and may not be disclosed without my prior written consent unless otherwise required by law.

I hereby release the City of Anoka from any and all liability for its receipt and use of information and records received pursuant to this consent. I further acknowledge that I have carefully read this release, fully understand its terms and legal significance, and execute it voluntarily.

____________________________________________________________________________________

Signature of Individual Authorizing Release                                                        Date
Pursuant to Minnesota Statute 270C.72 Tax Clearance; Issuance of Licenses, the licensing authority is required to provide to the Minnesota Commissioner of Revenue your Minnesota Business Tax Identification Number and the Social Security Number of each license applicant.

Under the Minnesota Government Data Practices Act and the Federal Privacy Act of 1974, we are required to advise you of the following regarding the use of this information:

1. This information may be used to deny the issuance, renewal, or transfer of your license in the event you owe the Minnesota Department of Revenue delinquent taxes, penalties, or interest.

2. Upon receiving this information, the licensing authority will supply it only to the Minnesota Department of Revenue. However, under the Federal Exchange of Information Agreement, the Department of Revenue may supply this information to the Internal Revenue Service.

3. Failure to supply this information may jeopardize or delay the processing of your licensing issuance or renewal application.

Please supply the following information and return along with your application to the agency issuing the license. **DO NOT RETURN TO THE DEPARTMENT OF REVENUE.**

Licensing Authority:  City of Anoka
License Year Applying for:  

**PERSONAL INFORMATION:**

Applicant name:  
Applicant address:  
Social Security No:  

**BUSINESS INFORMATION:**

Business name:  
Business address:  

Minnesota Tax Identification No.:  
Federal Tax Identification No.:  

If a **Minnesota Tax Identification Number is not required, you must explain on the reverse side.**

DATE  APPLICANT’S SIGNATURE AND TITLE (if any)
Minnesota Statute Section 176.182 requires every state and local licensing agency to withhold the issuance or renewal of a license or permit to operate a business OR engage in an activity in Minnesota until the applicant presents acceptable evidence of compliance with the workers’ compensation insurance coverage requirement of Section 176.181 Subdivision 2. The information required is: the name of the insurance company, the policy number, the dates of coverage or the permit to self-insure. This information will be collected by the licensing agency and put in their company file. It will be furnished, upon request, to the Department of Labor and Industry to check for compliance with Minnesota Statute Section 176.181, Subdivision 2.

This information is required by law. Licenses and permits to operate a business or engage in an activity may not be issued or renewed if it is not provided and/or is falsely reported. Furthermore, if this information is not provided and/or falsely reported, it may result in a $2,000 penalty assessed against the applicant by the Commissioner or the Department of Labor and Industry payable to the Special Compensation Fund.

Provide the information specified above in the spaces provided, or certify the precise reason your business is excluded from compliance with the insurance coverage requirement for workers’ compensation.

Insurance Company Name: ______________________________________________________________
(NOT the Insurance Agent)

Policy Number or Self-Insurance Permit Number: ____________________________________________

Dates of Coverage: ________________________________  to  _________________________________

**********    (OR)    **********

I am not required to have workers’ compensation liability coverage because:

(____) I have no employees.
(____) I am self-insured (you must include the permit to self-insure)
(____) I have no employees who are covered by the workers’ compensation law
    (these include: Spouse, Parents, Children, and certain farm employees)
(____) Other (must specify): ____________________________________________________________

APPLICANTS MUST COMPLETE AND SIGN BELOW:
I HAVE READ AND UNDERSTAND MY RIGHTS AND OBLIGATIONS WITH REGARD TO BUSINESS LICENSES, PERMITS AND WORKER’S COMPENSATION COVERAGE. I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS ACCURATE AND COMPLETE AND THAT A VALID WORKERS’ COMPENSATION POLICY WILL BE KEPT IN EFFECT AT ALL TIMES AS REQUIRED BY LAW.

Name: _______________________________________________________________________________
    Last Name                             First Name                     Middle Name

Doing Business As: ____________________________________________________________________
(If applicable)                               (Business Name if different than your name)

Business/Home Address: ________________________________________________________________
Business/Home Phone: _________________________________________________________________
Signature: ________________________________    Date: ___________________________
CHAPTER 14. LICENSING; AMUSEMENTS AND ENTERTAINMENT

ARTICLE IV. ENTERTAINMENT DEVICES

Section 14-131. Definition.

The term “entertainment device,” as used in this article shall include foosball, air hockey, or pigeon hole tables, pinball machines, shooting gallery machines, any electric or electronic device or game patterned after table tennis, hockey, and similar games, including electric rifle or gun ranges, and any other mechanical or electrical device which is designed to be played by a contestant or contestants and upon which the contestants receive a score or rating based upon their performance.

Sections 14-132 thru 14-150. Reserved.

Section 14-151. License Required; exception.

No person shall maintain, keep or sell, within the City, an entertainment device without a license therefrom the City. This section shall not apply to electronic devices held or kept in storage or for sale, and which are not actually in use or displayed for use, or to electronic devices located in a private dwelling and used exclusively for private entertainment.

Section 14-152. Entertainment devices; license approval; annual license fee; location fee.

(a) Licenses for entertainment devices shall be issued for an annual period from January 1 through December 31 for each year, provided, however that the initial license fee for each applicant shall be prorated as of the date of the application. The application for a license shall be submitted for approval to the City manager and, if approved, the City shall thereafter issue the license upon payment of appropriate fees. The applicable fees shall be:

(1) An annual fee for each business location regardless of the number of machines in the amount established by the City council;

(2) An annual license fee for any of each machine.

State law reference--Limitation on license fee on amusement machines, Minn. Stats. § 449.15.

Section 14-153. Contents; display.

Each license shall accurately describe the entertainment device, shall show the name of the owner, address where such machine is located, the license fee and the period for which a license is granted, such license shall at all times be conspicuously displayed where such entertainment device is operated.


(a) Issuance and retention of licenses shall be subject to each of the following conditions:

(1) All entertainment devices shall be located within the confines of the licensee's primary business premises but shall not be located in entryways, hallways, or in areas which are not directly supervised by the licensee nor shall they be located in any area separated from the licensee's principal business activity;

(2) The licensee shall be responsible for maintaining order on all parts of the premises;

(3) No wagering or betting for consideration or any other gambling shall be permitted on the premises;
(4) All entertainment devices shall be located and their use shall be supervised in such a manner that personal injury or property damage is not likely to result from the location or use of the devices;

(5) All entertainment devices shall be located and their use supervised such that the location and use of the devices does not annoy or disrupt persons in the neighborhood or patrons of other businesses located in the area;

(6) No more than eight amusement devices shall be allowed on any one-business premises.

Section 14-155. Revocation.

The license provided in this article may be revoked by the City Council for any violation of any provision of this article, but only after reasonable notice and an opportunity to be heard.

Sections 14-156 thru 14-180. Reserved.