COIN-OPERATED AMUSEMENT LICENSE

DEVELOPMENT SERVICES DEPARTMENT

Planning and Development Division
3015 Market Street, Galveston, TX 77550
409/797-3660
planning@galvestontx.gov
www.galvestontx.gov

Applicant's Full Name: ______________________________ Phone: ________________________

Business Name: ___________________________________ Email: _________________________

Business Address: ____

Print Name and Signature: _______________________________________ Date: ______________

* *A- Phonographs, Jukeboxes* *B- Pool Tables* *C- Pinball Machines* *D- Arcade Video Games*

E- 8-Liners *F- All Others*

Note: Does not include food and drink vending machines.

Location of Machine & Business Name	Machine Make & Model	Machine Serial Number	Machine Type *	City Permit Number