

**TOWN OF BRIDGEWATER  
APPLICATION FOR AUTOMATIC AMUSEMENT DEVICES**

LICENSE NO. \_\_\_\_\_

DATE: \_\_\_\_\_

NEW \_\_\_\_\_ RENEWAL \_\_\_\_\_

FEE: Weekdays \_\_\_\_\_  
Sundays \_\_\_\_\_

**TO THE LICENSING AUTHORITY:**

The undersigned hereby applies for Automatic Amusement Devices in accordance with the provisions of the Statutes relating thereto:

\_\_\_\_\_  
**Full name of person, firm or corporation making application**

ADDRESS: \_\_\_\_\_

Number

AUTOMATIC AMUSEMENT DEVICES  
(Pinball Machine, Skee Ball, etc.)

\_\_\_\_\_

VIDEO GAMES

\_\_\_\_\_

POOL TABLES

\_\_\_\_\_

HOURS OF OPERATION: Weekdays: \_\_\_\_\_

Sundays: \_\_\_\_\_

*I certify under the penalties of perjury that I, to the best of my knowledge and belief, have filed all state tax returns and paid all state taxes required under law.\**

\_\_\_\_\_  
**Signature of Individual or Corporate Name**  
(Mandatory)

\_\_\_\_\_  
**By Corporate Officer**  
(Mandatory, if applicable)

\_\_\_\_\_  
**\*\* Social Security**

\_\_\_\_\_  
**Federal Identification Number**

\* This license will not be issued unless this certification clause is signed by the applicant.

\*\* Your social security number will be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing or tax payment obligations. Licensees who fail to correct their non-filing or delinquency will be subject to license suspension or revocation. This request is made under the authority of MGL C.62C, Sec. 49A.

\_\_\_\_\_  
*Signature of Applicant*

\_\_\_\_\_  
*Address*

\_\_\_\_\_  
*Phone Number*

**PLEASE SEE ATTACHED PAGE**

