



New City Video Gaming License Application

This Application is required as set forth in Chapter 7, Article VIII of the City Code. See <https://ecode360.com/34404251> for additional information.

Important to consider prior to beginning this Application:

- The applying Establishment must already have been issued an Illinois State Video Gaming License.
- The applying Establishment must have been in business in the applying location for at least 12 months unless the applying Establishment wishes to replicate the business model of another location that has the same majority owner as the applying Establishment.
- The applying Establishment must be in good standing with the State of Illinois and the City of Bloomington. This includes having no outstanding bills, taxes, or other violations.
- As of August 26, 2019, no more than sixty (60) Establishments may be licensed to operate video gaming terminals in the City at any given time. License applications will be processed on a first come, first served basis.
- City Video Gaming Licenses are valid for a twelve-month period (May 1 to April 30).
- Each Establishment receiving a City Video Gaming License may have no more than five (5) video gaming terminals.
 - Each Establishment is required to pay the per terminal fee upon first issuance of a license and annually upon renewal. Terminal fees are as follows (per terminal):
 - Fraternal or Veterans organizations: \$250.00
 - All other Establishments: \$500.00

In order for this application to be accepted, it must be completed in full and all of the following items must be attached:

- _____ A copy of the applying Establishment’s State of Illinois Video Gaming License
- _____ A copy of the applying Establishment’s Illinois Secretary of State Certificate of Good Standing
- _____ A computer-generated, drawn-to-scale, floor plan of the Establishment meeting the requirements detailed in Ch.7, Sec 123(E) Application Requirements (*Paper copy must be at least 11x17 AND an electronic version must be provided on CD or emailed; USB flash drives not accepted.*)
- _____ Documentation substantiating that the Establishment has been in operation for at least 12 months (i.e. tax statements, etc.) (*N/A if applying to replicate another existing business model*)

The items below are ONLY APPLICABLE IF applying to replicate the business model of another existing business location:

- _____ Documentation detailing the business model and operations of the Existing Business that is intended to be replicated at the proposed Establishment
- _____ Documentation substantiating that the Existing Business location intended to be replicated has been in operation for at least 12 months
- _____ Documentation substantiating the Applicant and majority owner of the proposed Establishment is also the majority owner of the Existing Business location intended to be replicated
- _____ Documentation that gross receipts from video gaming at the Existing Business location have not exceeded 50% of the total gross receipts at the Existing Business during the prior 12 months

The items below are ONLY APPLICABLE IF applying as a fraternal or veterans establishment:

- _____ Documentation that the Establishment is solely owned by a fraternal or veterans organization



Time and Date Stamp

Standard City Video Gaming License Application

*This Application contains a Notary Acknowledgement.
Please do not sign this Application unless in the presence of a Notary Public.*

1. Establishment:

Legal Name of Establishment: _____	Establishment DBA (if applicable): _____
Establishment Address: _____	City/State/Zip: _____
Mailing Address (if different): _____	City/State/Zip: _____
Phone #: _____	Email: _____
Applicant's Name: _____	Applicant's Title: _____
Applicant's Email: _____	Applicant's Phone #: _____

2. Type of Establishment (See City Code Ch. 7, Sec. 120 for Definitions):

<input type="checkbox"/> Retail Liquor Establishment (Restaurant / Tavern)	<input type="checkbox"/> Truck Stop	<input type="checkbox"/> Fraternal Organization
	<input type="checkbox"/> Large Truck Stop	<input type="checkbox"/> Veteran Organization

3. List All Persons or Entities Owning More Than Five Percent (5%) Interest in the Establishment:

Please attach an additional page if necessary.

Applicant's Name: _____	Applicant's Percent Interest: _____
Applicant's Address: _____	Applicant's City/State/Zip: _____
Name: _____	Percent Interest: _____
Address: _____	City/State/Zip: _____
Name: _____	Percent Interest: _____
Address: _____	City/State/Zip: _____
Name: _____	Percent Interest: _____
Address: _____	City/State/Zip: _____
Name: _____	Percent Interest: _____
Address: _____	City/State/Zip: _____

4. If a Corporation/LLC, list the Registered Agent for the Establishment:

Name: _____	Title: _____
Address: _____	City/State/Zip: _____

5. Number of Intended Video Gaming Terminals on Premise:

(OR # of actual terminals on premise. Not to exceed 5 terminals.) _____

6. Amount of Time the Establishment Has Been in Operation at the Location Requesting the License:

Years _____ Months _____

Establishment must have been in operation at the requesting location for at least 12-months.

EXCEPTION: *Establishment intends to replicate the business model of an existing business location that has the same majority owner as the intended Establishment. If the exception applies, please complete 6A below.*

6A. If Applicant is Seeking to Replicate the Business Model of an Existing Location Complete Below:

Business Name: _____

Business Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Business Email: _____

Type of Business: _____

Detailed Business Model / Plan for the Existing AND Proposed Businesses
have been attached: YES _____ NO _____

Length of time the existing business has been operational:
(Supporting documentation must be attached) Years _____ Months _____

In the last 12-months, has the business' video gaming gross receipts exceeded
50% of the business' total gross receipts?
(Supporting documentation must be attached) YES _____ NO _____

7. Terminal Operator/Distributor Information:

Proposed Terminal Operator/Distributor Owning, Servicing, and/or Maintaining the Video Gaming Terminals

Business Name: _____

Business Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____

Business Email: _____

Contact/Representative: _____



8. Affirmation of Information

I, the undersigned, Applicant for the above referenced Establishment, do hereby state and affirm the following:

1. The Establishment holds a valid Illinois State Video Gaming License for the premises to be licensed.
2. The Establishment is in good standing with the State of Illinois.
3. The Establishment is not in arrears on any tax, fee, or bill due to the City of Bloomington.
4. The Establishment is not in arrears on any tax, fee, or bill to the State of Illinois.
5. The Establishment agrees to abide by all State and Federal laws.
6. The Establishment agrees to abide by all local ordinances.
7. The Establishment and its premises are not currently in violation of any state or local law.
8. No owner with more than five percent (5%) interest or manager of the Establishment has ever been convicted of a felony, a gambling offense, or a crime of moral turpitude.
9. All information in this application is true and correct.

I, _____, _____ of _____,
Name of Applicant Relationship to Establishment Name of Establishment

do hereby swear and affirm the above statements are true and correct this ___ day of _____, 20__.

Signature of Applicant

NOTARY ACKNOWLEDGEMENT

The above statement has been subscribed and sworn to before me, a Notary Public in and for the County of _____ and State of _____, on this ___ day of _____, 20__.

Notary Public

(Notary Seal)

City Clerk Application Acceptance Process:

- _____ State of Illinois Video Gaming License Attached
- _____ State of Illinois Certificate of Good Standing Attached
- _____ Computer-Generated, Drawn-to-Scale, Floor Plan Attached
(Paper Copy must be at least 11x17 AND an electronic version must be provided on CD or emailed.)
- _____ Documentation the Establishment has been in operation for at least 12 months *(N/A if 6A is completed)*
- _____ Detailed Business Model / Plan for the Existing AND Proposed Businesses *(N/A if 6A is blank)*
- _____ Documentation the Existing Business listed in 6A has been in operation for at least 12 months
(N/A if 6A is blank)
- _____ Documentation the Applicant is the majority owner in the Existing Business listed in 6A *(N/A if 6A is blank)*
- _____ Documentation that video gaming gross receipts from the Existing Business listed in 6A have not exceeded
50% of total gross receipts in the last 12 months *(N/A if 6A is blank)*
- _____ Documentation that the Establishment is solely owned by a fraternal or veterans organization
(Only applicable if applying as fraternal or veterans establishment)

Staff Initials: _____ Application Accepted: Yes _____ No _____ If No, Explain: _____

<p align="center">If Approved:</p> <p>Date of Approval: _____</p> <p align="center">_____ Signature of City Clerk</p>	<p align="center">If Denied:</p> <p>Date of Denial: _____</p> <p>Reason for Denial: _____</p> <p>_____</p> <p>_____</p> <p align="center">_____ Signature of City Clerk</p>
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