



Village of Spring Grove  
7401 Meyer Road, Spring Grove, Illinois 60081  
815-675-2121

# VIDEO GAMING LICENSE APPLICATION

*All Licenses Expire on April 30*

## Section 1: Business Information

Name of Business \_\_\_\_\_

Doing Business As \_\_\_\_\_

Business Address \_\_\_\_\_ Spring Grove, IL 60081

Mailing Address (if different from above) \_\_\_\_\_

Business Phone \_\_\_\_\_ Email \_\_\_\_\_

State Liquor License Number \_\_\_\_\_ Hours of Operation \_\_\_\_\_

## Section 2: Video Gaming Company Information

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Business Phone \_\_\_\_\_ Email \_\_\_\_\_

## Section 3: Illinois State Gaming License and Regulations

- Please attach a copy of the Illinois State Gaming Board Video Gaming License.
- Video gaming terminals **MUST** be located in an area restricted to persons over 21 years of age, the entrance to which is within the view of at least one employee of the establishment who is over 21 years of age.
- All video gaming terminals **MUST** be located in an area of the licensed establishment with restricted visibility from areas outside the business.
- An owner, manager or employee over the age of 21 shall be present during all hours of operation when video gaming terminals are available for use by the public.
- Video gaming terminals **MUST** not be used when the establishment is not open.
- Video gaming is **ONLY** to be operated during normal Liquor hours.

## Section 4: Number of Terminals and Fees

Number of Terminals \_\_\_\_\_ Fee: \$ \_\_\_\_\_  
*(Maximum number of terminals is 6) (\$250.00 per terminal)*

### FOR OFFICE USE ONLY

Date Application Received: \_\_\_\_\_

Terminal Fee Received: \$ \_\_\_\_\_

License # \_\_\_\_\_

Date Paid: \_\_\_\_\_

Police Department Official: \_\_\_\_\_

Police Sign Off Date: \_\_\_\_\_

Additional Comments: \_\_\_\_\_

## Affidavit and Acknowledgement

I, the undersigned applicant or authorized agent thereof, swear or affirm under penalties of perjury that the matters stated in the forgoing application are true and correct, are made upon my personal knowledge and information, and are made for the purpose of requesting the Village of Spring Grove to issue the license herein applied for. I further swear or affirm that I have not omitted any information which is required to be made in these disclosures, that the matters stated herein are not misleading in light of the purposes for which application is made, and that the applicant is qualified and eligible to obtain the license applied for.

I further swear or affirm that the applicant will not violate any of the laws of the United States of America, the State of Illinois or the Village of Spring Grove relating to or regulating said business.

I have read and understand the requirements stated in Section 2610, Video Gaming, Chapter 26, of the Village Code as it pertains to video gaming. I agree to comply with all conditions stated in Section 2610 including license requirements, and indemnify and hold harmless the village from all liability lawsuits and costs.

Applicant hereby acknowledges and agrees that the Village retains the right under the Illinois Video Gaming Act (230 ILCS 40/1 et. seq.) to terminate all licenses and ban video gaming within the corporate boundaries of the Village of Spring Grove. Applicant further acknowledges that Applicant is proceeding with this application and the investment in machines, physical restructuring of premises and all other modifications necessary or helpful in establishing his, her or its video gaming business at its own risk without reliance on the part of the Village or commitment therefrom to continue licensing of such machines or the video gaming business generally.

_____ Signature of Applicant or Authorized Agent	_____ Signature of Applicant or Authorized Agent
_____ Title or Position	_____ Title or Position
_____ Date Signed	_____ Date Signed

*Note: If the license is to be issued to a partnership, two partners must sign. If the license is to be issued to a corporation, the president and secretary of the corporation must sign.*

STATE OF ILLINOIS        )  
  ) SS  
COUNTY OF MCHENRY    )

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

(Seal)

*Note: This application is valid only for the fiscal year noted below. All license renewals for consecutive fiscal years must be accompanied by a new completed application, or at the discretion of the Village, a statement under oath the factual statements in the application previously filed have not changed in the past year.*

Period for which license application is made:    May 1, 20\_\_\_\_ to April 30, 20\_\_\_\_\_.