



TOWNSHIP OF MANTUA

Gloucester County, New Jersey

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www.mantuatownship.com

GAMING APPLICATION MANTUA CODE CHAPTER 60-3

For license to be issued on _____ and to expire March 1, _____
=====

Name of Applicant: _____

Address of Applicant: _____

Telephone Number: _____

Description of Games Proposed: (provide information for each amusement game to be used, number of games to be used, location of game and time of use) Use additional paper if needed.

State which type of license application is being submitted:

- A. Class One: Those issued to premises licensed for the consumption of alcoholic beverages in which three (3) or more amusement games are located.

Yes _____ No _____

(If yes, attach a true copy of your current valid license for the sale and consumption on premises of alcoholic beverages.)

- B. Class Two: Licenses are those issued to any other premises in which three (3) or more amusement games are located.

Yes _____ No _____

C. Individual Amusement Games are issued for all amusement games not located in game rooms. (No more than two (2) individual amusement game licenses may be issued for the same premises.)

Yes _____ No _____

Hours of Operation: _____

Location of Operation: _____

Current Zoning Classification: _____

Owner of Location in which Operation is Located: _____

Address of Owner if different from Applicant: _____

Is the Amusement Game for which this application is filed located within a room or space licensed for on-premises consumption of alcoholic beverages or within a connected room or appurtenant space?

Yes _____ No _____

Has the Applicant ever been convicted of a crime? Yes _____ No _____

If yes, please provide details of the crime and dates of conviction, setting forth the penalties invoked and current status of the matter.

For any corporation, partnership or association filing an application, has the entity or any member, officer, director or holder of ten percent (10%) or more of stock ever been convicted of a crime?

Yes _____ No _____

If yes, please provide details of the crime and dates of conviction, setting forth the penalties invoked and current status of the matter.

Set forth a description of how the operation will be managed, indicating in particular the persons employed by you or acting as agents who will manage the operation, setting forth as to each person the current age and birth date of the person.

If you are the owner and operator of a game room containing more than thirty (30) amusement games, indicate whether you have at least one supervisory employee for each thirty (30) amusement games. Describe what additional personnel you have provided to supervise the games, particularly noting as to each supervisor whether he/she is at least eighteen (18) years of age:

I certify that the statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

Applicant

Witness

For Municipal Use Only:

Recommendation by Zoning Officer: _____

Recommendation by Chief of Police: _____

Determination by Township Committee: _____

Conditions: _____

Determination by Township Clerk:

Has license fee been paid? Yes _____ No _____ Amount \$ _____

(See Chapter 60-8 for listing of fees)

Number of Amusement Games permitted in the game room at any time: _____

Maximum number of persons permitted in the game room at any time: _____

Other conditions or restrictions imposed: _____

Class of License to be issued: _____