



**Town of New Tecumseth  
Places of Amusement Application**  
Under By-Law #2002-177 as amended.

1. Registered Name of Business: \_\_\_\_\_

2. Operating Name of Business: \_\_\_\_\_

3. Address of Place of Amusement: \_\_\_\_\_

4. Name of Operator/Supervisor(s): \_\_\_\_\_

5. Address: \_\_\_\_\_

\_\_\_\_\_

7. Phone Number: (Home) \_\_\_\_\_

(Bus.) \_\_\_\_\_

8. Email: \_\_\_\_\_

9. Number of Games (i.e. pool tables, pinball, etc.)

\$30.00 license fee per game x number of games = \$

I \_\_\_\_\_ hereby declare that the above information is correct, that I have read and understood the provisions of By-Law #2002-177, as amended, of the Town of New Tecumseth and agree to abide by these and any other applicable by-laws.

As a result of making this application, the undersigned acknowledges, covenant and agrees to adhere to all Provincial Public Health Restrictions as of the date of this application and indemnify and save harmless the Town of New Tecumseth from any liability for medical issues arising from the process of issuing the said License howsoever arising.

\_\_\_\_\_  
Date (yyyy/mm/dd)

\_\_\_\_\_  
Signature

**Note:**

Personal information is being collected under the authority of the Municipal Act 2001, Chapter 25, as amended and Police Services Act RS01990, 20 as amended and will be used by the Town of New Tecumseth to process this application for administration of this license and to ensure I comply with all applicable statutes, regulations, and by-laws. Questions regarding the collection of this information should be directed to the Clerk/Director of Administration Services, Town of New Tecumseth, 24 Tupper Street West, Alliston, Ontario, L9R 1H1. Email: [clerk@newtecumseth.ca](mailto:clerk@newtecumseth.ca) or Telephone: 705-435-3900