



Return to:
City of Concord
Code Administration
Health Services Division
37 Green Street
Concord, NH 03301
603-225-8580

Permit #: _____

Fee: \$330.00/year

Make Checks payable to:
CITY OF CONCORD

APPLICATION TO OPERATE AN AMUSEMENT CENTER

Name of Applicant: _____ Phone: _____

Address: _____ State: _____ Zip Code: _____

Owner's Name: _____ Phone: _____

Owner's Address: _____ State: _____ Zip Code: _____

Manager's Name: _____ Phone: _____

Manager's Address: _____ State: _____ Zip Code: _____

If a firm, corporation, partnership or association, please list names and address of principal officers:

ALL LICENSES EXPIRE ON APRIL 30TH

A "Management Plan" **must** be submitted along with this application which sets forth the following:

1. **Actual** hours of operation;
2. **Minimum** number of employees on duty at any time and minimum age and qualifications of employees;
3. **Maximum** number of persons permitted on premises, which number shall not exceed the limits established by the Fire Prevention Code;
4. **Plan** designated to avoid nuisance and insure compliance with City Ordinance;
5. **Rules** for governing the presence of minors accompanied by an adult;
6. **Rules** and regulations to be posted on the premises governing the operation of the center and conduct of its patrons. These rules should include, but not be limited to such matters as dress codes, consumption or possession of alcoholic beverages or controlled drugs, loitering, presence of minors during school and evening hours, and maximum occupancy.

Applicant's Signature: _____ Date: _____ Phone: _____

Applicant's Name – PRINT: _____

Approved: _____ Date: _____

Health and Licensing Officer