

TMC 709 (m)
Code 6633

City of Toledo – License Bureau
One Government Center Suite 2000
Toledo, Ohio 43604
(419) 245-1651

Lic. No. _____
Date Iss. _____
For Year _____
License Fee: \$300.00

APPLICATION
ROLLER/ICE SKATING RINK LICENSE

Name of Applicant _____ Home Phone _____

Home Address _____

Name of Business _____ Business Phone _____

Business Address (Location) _____

Is business Individual, Partnership or Corporation? _____

List Names and Addresses of all partners and/or officers:

Name _____ Address _____

Name _____ Address _____

Name _____ Address _____

List Names and Addresses of manager or person in charge of rink:

Name _____ Address _____ Date of Birth _____

Has applicant/manager ever been engaged in operating a Roller/Ice Rink? _____

When _____ Where _____ How Long _____

Date

Signature of Applicant, Manager, Principal Officer