

TMC 739  
CODE 6621

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

Lic. No. \_\_\_\_\_  
Date Iss. \_\_\_\_\_  
For Year \_\_\_\_\_

FEE: \$50.00 per machine

**APPLICATION**

**MECHANICAL MUSICAL INSTRUMENT LICENSE**

Name of Applicant \_\_\_\_\_ Home Phone \_\_\_\_\_

Address of Applicant \_\_\_\_\_

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

Address of Business \_\_\_\_\_

Nature of Business where device is maintained? \_\_\_\_\_

Is business Individual, Partnership or Corporation? \_\_\_\_\_

List Names and Addresses of all Partners and/or Officers:

Name \_\_\_\_\_ Address \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

Name, Model and Serial Number of Device:

Name \_\_\_\_\_ Model \_\_\_\_\_ Serial No. \_\_\_\_\_

I agree, if a license is issued to me to fully comply with all the provisions of the Toledo Municipal Code 739.  
I also understand that if I violate any terms and provisions of the rule so promulgated the City Manager may revoke this license after having heard the alleged violations on such rules.

Date \_\_\_\_\_ Signature of Applicant \_\_\_\_\_

**Statement of Owner of Musical Device**

Name of Owner \_\_\_\_\_

Address of Owner \_\_\_\_\_

List names and addresses of all persons having interest in ownership of Musical Device and percentage of interest.

Name \_\_\_\_\_ Address \_\_\_\_\_ % \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_ % \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_ % \_\_\_\_\_

Date \_\_\_\_\_ Signature of Owner \_\_\_\_\_