

**BRIDGEPORT POLICE  
DEPARTMENT**

**APPLICATION FOR A  
ARCADE/BILLIARD  
LICENSE**

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APPLICATION FOR: \_\_\_\_\_ ARCADE                      \_\_\_\_\_ BILLIARD                      \_\_\_\_\_ BOTH

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City and State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_ HEIGHT: \_\_\_\_\_ WEIGHT: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Business Telephone: \_\_\_\_\_ Hours of Operation: \_\_\_\_\_

Number of Arcade Machines: \_\_\_\_\_ Number of Billiard Tables: \_\_\_\_\_

Owned or Rented By: \_\_\_\_\_

Zoning Official: \_\_\_\_\_ Date: \_\_\_\_\_

Town Clerk: \_\_\_\_\_ Date: \_\_\_\_\_  
(Proof of Trade Name from Town Clerk or, if incorporated, from Secretary of State)

Fire Marshall: \_\_\_\_\_ Date: \_\_\_\_\_

Narcotics & Vice: \_\_\_\_\_ Date: \_\_\_\_\_

Chief of Police: \_\_\_\_\_ Date: \_\_\_\_\_

License Numbers: Arcade \_\_\_\_\_ Billiard \_\_\_\_\_