



TOWN OF DERRY

MECHANICAL AMUSEMENT DEVICE APPLICATION

I, _____ residing at _____
Applicant Home Address

Do hereby make application to the TOWN OF DERRY for a Mechanical Amusement Device License.

I do business under the name _____
Business

Located at _____
Business Address

And desire a license to cover _____ such devices.

Home Telephone Number _____

Business Telephone Number _____

I acknowledge receipt of a copy of the Town of Derry Ordinance, Chapter 16,
Amusement Devices revised August 15, 2023
Pertaining to such devices – (\$40.00 per device)

Signature of Applicant

Effective Date: 09.15.2023