



BOWLING LICENSE APPLICATION

Code Section 6.08.010

January 1st through December 31st

Number of Lanes: _____
\$5.00 per lane

Total Fee: \$5.00

Please print clearly

Business Name: _____

Business Address: _____

Agent Name: _____

Agent Email: _____

Agents Phone Number: _____ Business Phone: _____

AUTHORIZED AGENT SIGNATURE

Applicant may mail or drop off the application and fee to the Ripon City Hall, 100 Jackson St., Ripon, WI 54971. Questions may be emailed to the City Clerk at nmiller@cityofripon.com or call 920-748-4915.

Date received and filed with Municipal Clerk:	Cash, Check or Credit Card (Circle One)	Receipt Number:
License Number:	Date Issued:	Initial of Clerk/Deputy Clerk: