



CITY OF PORTSMOUTH, NEW HAMPSHIRE
OFFICE OF THE CITY CLERK

BILLIARD & BOWLING LICENSE APPLICATION

INSTRUCTIONS: Please print or type all information clearly. Please ensure this application is signed when it is returned to the office along with the total payment due.

APPLICANT INFORMATION

Applicant Name: _____ Telephone: _____

Mailing Address: _____

Business Name/Location: _____

FEE

\$20.00 per pool table, billiard table, or bowling lane.

Number of Billiard Tables: _____

Number of Pool Tables: _____

Number of Bowling Lanes: _____

Total Due = # _____ @\$20 = \$ _____

CERTIFICATION

I, the undersigned, have complied with Chapter 6, Article II of the Billiards and Bowling Ordinance, completed this application accurately, and enclosed:

_____ Fee of \$ _____

Signature/Date: _____ Print Name: _____