

City of Streator
 204 S. Bloomington Street
 Streator, Illinois 61364
 815/672-2517 Fax 815/672-7566



**APPLICATION FOR
 ANNUAL BILLIARD AND POOL TABLE PERMIT**

Reference: Streator Municipal Code Chapter 5.08

PLEASE PRESENT THIS APPLICATION WHEN PAYING FOR THIS PERMIT

Commencement date is May 1, _____ with an ending date of April 30, _____.

Applicant's Name: _____ Phone: _____

Applicant's Address: _____

Occupation: _____

Location of tables: _____

Number of Billiard Tables

Number of Pool Tables

Total Number of Tables Times \$50.00 equals Permit Fee ==> \$

The premise is not situated within one hundred feet of any school, church, hospital, rest home, or premises that has a license to sell alcoholic liquor.

APPLICANT'S SIGNATURE AND INFORMATION	
	Date:
Signature of Applicant	
Local Contact (if not the applicant):	
Address:	
Phone:	

VERIFICATION OF DEVICES
Date:
Signature of Police Officer
Comments:

Permit Fees: For each table there is a \$50.00 permit fee.

Paid on: _____ Received by: _____ Permit Nbr: _____