

Today's Date:	
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Lubbock County Tax Assessor-Collector New or Renewal Game Room Application

	000) Renewal (\$1,000)	These fees are non-refundable.			
If application is for a renewal, please fu	wal fee (\$500 per month) Irnish current Game Room Perr	mit Number: <u>GR</u>			
Application is filed by: Individua Partnersh	Limited Partnership Corporation	Other Limited Liability Company			
Date on which the business began ope		, , , , , , , , , , , , , , , , , , ,			
		II be located			
Describe the Corporate interest the ap	plicant has in the Game Room,	as defined in Section 1.4(h) of the			
Ordinance.					
Number of amusement redemption ma	achines will be located in the ga	ame room?			
Names of individuals in this application	who own other game rooms c	urrently operating in Lubbock County or			
seeking a permit to operate in Lubbock	County.				
Attach a photo of the	building where the busir	ness is physically located.			
	_	ssumed Name Certificate, etc. showing trade name.			
Game Room Physical Address:		Precinct #: 1 2 3 4 Zip:			
City:	State:	Zip:			
Applicant Address: City:		Zip:			
		e Telephone No.:			
		t Email:			
Federal Tax Identification No.:	Texas Cor	mptroller License No.:			
Charter Number (If corporation or LLC):	Corporati	on Name:			
nature of their ownership below (see Ordinance profits. A Partner, director, shareholder, officer of	Section 1.4(h) for detailed definitions). To a business, company, or corporation with	porations that have ownership of the business and identify the This includes anyone who has an ownership interest, received ownership interest. Holds assumed name certificate, signs ance, pays for advertising and/or signs an alarm permit.			
1. Full Legal Name (Last, First, Middle)	Date of Birth (MM/DD/YY)	Title/Nature of Ownership			
Social Security Number	Driver License N	e Number O			
Residential Add	#it	Otate –ip			
2. Full Legal Name (Last, First, Middle)	Date of Birth (MM/DD/YY)	Title/Nature of Ownership			
Social Security Number	Driver License Nu	umber O			
Residential Address	#ity	Otate –ip			

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3. Full Legal Name (Last, First, Middle)	Date of Birt	Date of Birth (MM/DD/YY) Title/Nature of Ownership			
Social Security Number		Driver License Number O			
Residential Address	#ity	Otat	е	.– р	
				d SOCIAL SECURITY	
Have you ever applied for this type of If yes, what was the outcome of that a	permit before?	Yes ued, please provid	No	ne and permit number.)	
Certifications (initial each applicable line): I am the applicant for a permit for a Game I hereby certify that the business for which 1. at least 1,000 feet from the premises of 2. at least 300 feet from the premises of a	n I am making an appli f a school, the premise public swimming poo	es of a public or private of or video arcade facil	e youth center, ity	or a playground	
 at least 1,000 feet from any premises of treatment center at least 1,000 feet from a residential ne at least 1,000 feet from any school; at least 1,000 feet from any playground on property having frontage to a state h within the boundary of Lubbock County at least 1,000 feet from a regular place 	ighborhood; ; nighway or interstate r Commissioner Precin	highway and/or direct			
I hereby certify that the business for which location and under the same ownership since N 3.4(b) of the Lubbock County Game Room Ordir I have paid the proper permit fee. I have attached a certified copy of the assured the business is operated under an assume the same that the business is operated under an assume the same that the business is operated under an assume the same that the business is operated under an assume the same that the business is operated under an assume the same that the business is operated under an assume that the business is operated under an assume that the business for which location and under the same ownership since N is a same that the business for which location and under the same ownership since N is a same that the business for which location and under the same ownership since N is a same that the business for which location and under the same ownership since N is a same that the business is operated under the business is a same that t	I am making an applic farch 1, 2025. I apply nance. med name certificate	for an exemption to th	ne distancing res	strictions set forth in Subsection	
I have attached a copy of the articles of inco amendments, if the applicant is a domestic corp certificate of authority to transact business in To amendments; the names and residential address shareholder who has more than 5% of the share	orporation (or similar poration or other artifi exas (or similar docun sses of the current offi	icial business entity fo nents) on filed with the icers and directors; an	rmed under the e Texas Secretar	laws of the State of Texas, a ry of State, together with all	
I have attached a copy of the certificate of a of State, together with all amendments, if the a addresses of the current officers and directors; shares in the entity.	authority to transact b pplicant is a foreign co	ousiness in Texas (or si orporation or other ar	tificial business	entity; the names and residential	
I have attached the names and residential a partnership, together with the information set fartificial business entity.	forth above for corpor	rate applicants if one o	or more of the p	artners is a corporation or similar	
I have attached a copy of the certificate of I the applicant is a limited partnership formed un corporate applicants if one or more of the partr	nder the laws of the St	ate of Texas, together	with the inform		
I have attached the names and residential a unregistered entities, together with the informa or similar artificial business entity.					
Each owner or applicant listed on this form I hereby certify that by signing this applicati inspect the game room to verify compliance wit	ion I am giving my wri				
Signature of Applicant:			Date:		

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STATE OF TEXAS COUNTY OF LUBBOCK

BEFORE ME, the undersigned Notar	y Public, or	n this day personally	appeared by me duly s	sworn,	
, an "	'Owner" an	d "Applicant" of		_ Game	
Room located at	, and on his/her oath deposed, said that he/she				
swears that 1) he/she has read the above ce swears that the above certifications are true Application, 2) the information provided in t all pertinent information has been disclosed	rtifications and correc he Game R in making	, fully understands to t as they pertain to oom Permit Applica this Game Room Pe	the above certifications, this Game Room Permition is true and correct	, and it	
	"Owner" a	nd "Applicant of			
			_ Game Room.		
SUBSCRIBED AND SWORN TO BEFORE ME or witness my hand and official seal.	n the	day of	, 20, to cer	tify with	
	NOTARY P	UBLIC IN AND FOR			