

## CITY OF BALTIMORE DEPARTMENT OF FINANCE BUREAU OF REVENUE COLLECTIONS



## Miscellaneous Tax/License Unit 200 Holliday Street, 1<sup>st</sup> Floor, Room 3 Baltimore, MD 21202

410-361-9690**★**COBBusinessLicense@baltimorecity.gov

## SIMULATED SLOT MACHINE REGISTRATION FORM

FEE TYPES (PER MACHINE)	COST MACI		NUMBER OF MACHINES	TOTAL AMOUNT DUE	
MASTER LICENSE FEE (flat fee)	\$5,00	0.00			
ANNUAL REGISTRATION TAX (1-5)	\$2,25	0.00			
ANNUAL REGISTRATION TAX (6-20)	\$1,75	0.00			
ANNUAL REGISTRATION TAX (21+)	\$1,25	0.00			
LICENSE TRANSFER FEE (IF APPLICA	.BLE) \$10	.00			
PAYMENT PLAN SERVICE CHARGE F	EE \$48	.00			
TOTAL AMOUNT DUE					
AMOUNT PAID					
BALANCE					
Pay Quarterly (Payment Plan Service Charge will be assessed)		Pay Annually			
location, device or a transfer of a registered device place. By signing you hereby certify, under penal further understand that any violation of the Baltin confiscation, or non-renewal of the license(s). An rule or regulation adopted under this Part 3 is gumore than \$1,000.00 for each offense. Each day	Ities of perjury, that the info more City Code, Article 15, ny person, who violates any uilty of a misdemeanor and	rector of ormation may resu provision on conv	Finance prior to the supplied is true and lt in suspension, revon of Part 3 of this a iction, is subject to a	event-taking correct. You ocation, rticle or of a	
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All information is required before licenses are issued.

Applicant's Name Address & Phone Number	Description of Device	Location of Device (Name and Address)	Square Footage of location	Serial Number of Device	Amusement Device Number