

Checklist for Amusement Device Provider-Exhibitor

Investigator _____

DBA name and address _____

Date application assigned _____ Date case completed _____

The following requirements will be completed by the investigator working on your case

___ **Investigator requirement** – Verification the business has a current license (**attach a copy**) – **sale only**

___ **Investigator requirement** – The zoning of the premises and a map of the zoning overlay of the area immediately surrounding the proposed premise

___ **Investigator requirement** – With the exception of contingency items, once all required documents have been submitted by the applicant you must send an email to the Fire Marshal’s office asking if they object to an amusement device provider-exhibitor permit being issued at the location – *Form email on server.*

___ **Investigator requirement** – With the exception of contingency items, once all required documents have been submitted by the applicant you must send an email to the Health Department asking if they have any objection to a amusement device provider-exhibitor being issued at the location – *Form email on server.*

___ **Investigator requirement** – A copy of the final invoice showing all outstanding permit/license fees

___ **Investigator requirement** – Before submitting the case for final approval, *except for the application, any drivers’ licenses, and schedules P’s*, upload all documents into the software system for digital record keeping. Upload the application once it has been signed and approved/disapproved by management.

___ **Investigator requirement** – *After the case has been granted final approval*, upload all schedule P’s and/or drivers licenses to the server in the file titled “Drivers Licenses & Schedule P’s” (titled: last name first and document name such as “Kent, Clark – Schedule P”). Shred paper documents once this has been done.

All of the following information must be submitted by the applicant

Have Need

___ ___ A copy of the zoning clearance from the **City Planning and Development Department** – City Hall, 414 E. 12th St., (816) 513-1500

Have Need

___ ___ Amusement application – **Form provided by Regulated Industries Division**
(<http://www.kcmo.org/CKCMO/Depts/NeighborhoodAndCommunityServices/Regulated/>)

Have Need

___ ___ Consultant consent form signed by the applicant (only applicable if a consultant is used) – **Form provided by Regulated Industries Division**
(<http://www.kcmo.org/CKCMO/Depts/NeighborhoodAndCommunityServices/Regulated/>)

Have Need

___ ___ Schedule P from anyone who owns **more than 10 percent** of the stock in the location or who owns **more than 10 percent** of the business. **Form provided by Regulated Industries Division**
(<http://www.kcmo.org/CKCMO/Depts/NeighborhoodAndCommunityServices/Regulated/>)

Have Need

___ ___ A statement of tax clearance dated within the preceding 90 days from the date of application – from the **Finance Department** at 1118 Oak Street, KCMO (816) 513-1135.