

**~ 2016 Fee Schedule ~**

**Part 1**

| <u>Square Footage</u> | <u>Fees</u> |
|-----------------------|-------------|
| 0 - 2,000             | \$ 160.00   |
| 2,001 - 4,000         | \$ 320.00   |
| 4,001 - 6,000         | \$ 480.00   |
| 6,001 - 8,000         | \$ 640.00   |
| 8,001 - 10,000        | \$ 800.00   |
| 10,001 - 12,000       | \$ 960.00   |
| 12,001 - 14,000       | \$1120.00   |
| 14,001 - 16,000       | \$1280.00   |
| Over 16,000           | \$1440.00   |

**Part 2**

| <u>Inspection Fees</u>                  | <u>Amt Each</u> | <u>Number Inspections</u> | <u>Total Due</u> |
|---|-----------------|---------------------------|------------------|
| Elevator Inspections                    | \$150.00        | _____                     | \$ _____         |
| Health Inspections                      | \$300.00        | _____                     | \$ _____         |
| RPZ                                     | \$50.00         | _____                     | \$ _____         |
| Ground Sign                             | \$50.00         | _____                     | \$ _____         |
| Wall Sign                               | \$50.00         | _____                     | \$ _____         |
| <b>2. *** Total Inspection Fees Due</b> |                 |                           | <b>\$ _____</b>  |

**1. Total Sq Ft Fees Due** \$ \_\_\_\_\_

**Part 3**

Vending & Amusement Fees

Amusement Device \$200.00      Tobacco Vending Machine \$150.00  
 Video Gaming Terminals \$25.00      All Other Vending Machines \$75.00

**VENDING MACHINE & AMUSEMENT DEVICE REGISTRATON**

| <u>Type/name of device</u> | <u>Serial Number</u> | <u>Fee</u> | <u># Issued OFFICE ONLY</u> |
|----------------------------|----------------------|------------|-----------------------------|
| _____                      | _____                | _____      | _____                       |
| _____                      | _____                | _____      | _____                       |
| _____                      | _____                | _____      | _____                       |
| _____                      | _____                | _____      | _____                       |

**3. Total vending Fees Due \*\*\$** \_\_\_\_\_

**Part 1 – Square Footage Fee:** \$ \_\_\_\_\_

**NOTE:** Add Parts 1, 2 and 3 for total amount due

**Part 2 – Inspection Fee:** \$ \_\_\_\_\_

**Part 3 – Vending Fee:** \$ \_\_\_\_\_

**Total Amount Due:** \$ \_\_\_\_\_

I hereby state that all of the above information is true to the best of my knowledge and belief. I agree to comply with all Village and state codes, ordinances, and laws. I will not alter any of the conditions as so stated on this application without Village approval. Misrepresentation and/or failure to comply with the requirements of this license can result in late charges, additional fees, penalties, citations, and possible revocation of license.

**Signature of Owner/Manager** \_\_\_\_\_ **Date:** \_\_\_\_\_

|                             |   |
|-----------------------------|---|
| OFFICE USE ONLY             |   |
| <b>Date Received:</b> _____ | <b>Cash/Check#</b> _____                  |
| <b>Date Approved:</b> _____ | <b>By:</b> _____ <b>License No:</b> _____ |