

LGCCC 2R.A

Application for Raffles License

Application No. RA: _____

Identification No. _____

Insert name

of Municipality ----- Prepare 4 copies of application. One copy will be returned

Part A General

1 Name of applying organization _____

2 a. Street address of headquarters _____

b. Mailing address (if different) _____

3 A license is requested to conduct raffles of the kind stated on the date, or on each of the dates, and during the hours listed (use a separate application for each type of raffle).

Date	Hours	Date	Hours
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

4 Address of place where raffles will be played _____

a. Does the applicant own the premises or regularly occupy them for its general purposes? _____ Yes ___ No

5. If raffles equipment is rented. attach statement of raffles equipment lessor to application on Form 13.

Part B Qualification of Applicant

1 Is this the first time the applicant has applied for a license in this municipality? _____ Yes ___ No

2 If not. has there been any change in the applicant's certificate of incorporation, charter, constitution or by-laws since the latest application was made ? _____ Yes ___ No

3 If applicant is unincorporated, state number of members: _____ members.

