

New Jersey Office of the Attorney General
Division of Consumer Affairs
Legalized Games of Chance Control Commission
124 Halsey Street, 6th Floor, P.O. Box 46000
Newark, New Jersey 07101
(973) 273-8000

Application No. BA _	
dentification No.	

	ubmit four (4) copies of this application t	o the Municipal Clerk's off	ce in the municipality where the	games will be conducte
lease	orint clearly.	o the mumerpur elerks on	ce in the intimerpant, where the g	paines will be conducte
	me of municipality:			
Part	A - General			
	Name of applying organization:			
3.	List date(s) and hours for games: Date	Hours	Date	Hours
-				
-				
4.	Address of place where bingo will be	e played:		
a. b.	Does the applicant own the premises If "No," from whom will the applicant	9 , .,	n for its general purposes?	□ Yes □ No
	Name	Addres	S	
с.	If premises are to be rented, attach Fo	orm 10, "Statement of La	ndlord."	
Part	B - Schedule of Expenses			
	tems of expense intended to be incurr			
		n is to be paid, and the p	urpose for which each item is to	a ha naid ara:

Га	t C - Schedule of Purposes
1.	The specific purpose(s) to which the entire net proceeds of the games listed in this application are to be devoted, and the manner in which they are to be so devoted, are:
2.	If any part of the net proceeds are to be devoted to a purpose allowed by the Bingo Licensing Law by turning the sam over to another organization which is exclusively devoted to such purposes, secure the signature of its president or other executive officer to the following certificate:
	"It is hereby certified that
	Name of organization
	will accept from the licensee any part of the net proceeds of the games listed in this application to be turned over to it."
	Date: Signature:
Pai	t D - Schedule of Prizes
stat	escription of all prizes to be offered and given in all of the games listed in this application is as follows. (For cash prize a the amount; for merchandise, describe the article and state the retail value; if prizes are to be donated, indicate that fa estimate as accurately as possible the information requested below.)
	Description of Prize Amount (for cash prizes) or Article (Additionally, please attach a schedule of the games to be conducted.)
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Cart E - Officers of Applicant Office	Name of officer	Residence	addrass	Age
	- Table of officer			
art F - Members of Applicant who w	ill be in charge of the games			
Name of member in charge	Residence address		elephone No. (include area code)	Age
art G - Members of Applicant who w	rill assist in conducting the game	S		
Name of member		Residence address		Age
art H - Names of other organizations	s whose members will assist in co	onducting the games		
Name and address of o	organization	How related	Identificatio	on No.

If more space is needed in any section of this application, insert extra sheets of paper.

	te of New Jersey unty of	} ss.		
We	e do hereby each make the following statement, u	ınder oath	, wi	th respect to the foregoing application:
 The applicant (is) (is not) limited in its activities furtherance of one or more authorized purposes as d in the Bingo Licensing Law. Prior to the issuance of any license to it to conduct of chance, the applicant was actively engaged in sone or more "authorized purposes." The applicant has received and used, and in good expects to continue to receive and use, to further of more authorized purposes, funds from sources other games of chance. The conduct of the games on the occasion or occasion which this application is made will be to raise and of the entire net proceeds to the authorized purpose desin the application. 		as defined act games in serving good faith er one or other than asions for and devote		For each occasion for which a license is sought, one or more of the members listed who are familiar with the Bingo Licensing Law and the Rules and Regulations, will be in full charge of, and primarily responsible for, the conduct of the games. No commission, salary, compensation, reward or recompense will be paid to any person for holding, operating or conducting or assisting in the holding, operation or conducting, of the games, except to bookkeepers or accountants for professional services not exceeding the amounts fixed by the Schedule of Fees, as well as the compensation for the Licensed Compensated Workers pursuant to N.J.A.C. 13:47-6A. All prizes offered for games conducted on a single occasion will not exceed the limit on the sum or retail value of prizes as provided by the Bingo Licensing Law (N.J.S.A. 5:8-25 et seq.) and N.J.A.C. 13:47-6.16 and 13:47-7.2. All statements in the foregoing application are true.
Sw	orn and subscribed to before me this		Signs	uture of Officer and Title
	day of , 20		Signe	ture of Officer and file
			Signa	tture of Member-in-Charge
	Notary Public (Print name)		Signa	ture of Member-in-Charge
	Signature of Notary Public		Signa	uture of Member-in-Charge
	AFFIX SEAL HERE		Signa	nture of Member-in-Charge

Part I - Statement of Applicant and member(s) in charge

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_	pplication for		LICENSE Identification	No. <i>RA</i>
	ubmit four (4) copies of this applica	tion to the Municipal Clerk	's office in the municipality where the	games will be conducted.
	,			
Part	A - General			
1. 2a. b.	1. 7 0 0			
3.	A license is requested to conductive a separate application for e	ct raffles of the kind stated each type of raffle).	on the date, or on each of the date:	s, and during the hours listed
	Date	Hours	Date	Hours
-				
-				
-				
4a.	Address of place where raffles v			
b. 5.	Does the applicant own the pre-	, ,	them for its general purposes? the raffles equipment lessor to this	☐ Yes ☐ No application on Form 13.
Part	B - Schedule of Expenses			
			ction with the games listed in this he purpose for which each item is	
dare	Item of Expense	•	dress of supplier	Purpose
	item of Expense	Name and ad	aress of supplier	rurpose

Га	rt C - Schedule of Purposes			
1.	The specific purpose(s) to which the entire net proceeds of manner in which they are to be so devoted, are:	the games listed	d in this appl	ication are to be devoted, and the
2.	If any part of the net proceeds are to be devoted to a purp			
	over to another organization which is exclusively devoted executive officer to the following certificate:	to such purpose	es, secure the	signature of its president or other
	"It is hereby certified that	Name of orga	pnization	
	will accept from the licensee any part of the net proceeds of			lication to be turned over to it."
	Date:	Signature:		
Par	rt D - Schedule of Prizes			
	description of all prizes to be offered and given in all of the g	sames listed in t	his applicatio	on is as follows. For merchandise
des	scribe the article and state the retail value; if prizes are to be le the information requested below.			
	Description of Prize	Donated ((Yes or No)	Retail value
_		\(\square\) Yes	□ No	- <u></u>
_		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	□ No	
_		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	□ No	
_		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	□ No	
_		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	□ No	
_		\textsquare Yes	□ No	
_		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	□ No	
-		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	□ No	
-		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	□ No	
-		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	□ No	
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-		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	□ No	
-		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	□ No	
-		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	□ No	
-		\(\square\) Yes	□ No	
-			□ No	
-		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	□ No	
		☐ Yes	□ No	

☐ Yes ☐ No☐ Yes ☐ No

□ No

☐ No

☐ Yes

☐ Yes

(1) Office	Name of officer	Name of officer Telephone No. (include area code)				
Residence address	Telephone No. (inc					
	Day	Evening				
(2) Office	Name of officer		Age			
Residence address	Telephone No. (inc	Telephone No. (include area code)				
	Day	Evening				
(3) Office	Name of officer	Name of officer Telephone No. (include area code)				
Residence address	Telephone No. (inc					
	Day	Evening				
(4) Office	Name of officer	Name of officer				
Residence address		Telephone No. (include area code)				
	Day	Evening				
art F - Members of Applicant who will b	e in charge of the games					
Name of member in charge	Residence address	Telephone No. (include area code) Day / Evening	Age			
		/				
		/				
art G - Members of Applicant who will a Name of member		Residence address	Age			
art H - Names of other organizations wl	hose members will assist in condu	cting the games				
Name and address of orga	anization	How related Identification	ı No.			

Pa	rt I - Statement of Applicant and member(s) in o	charge		
Sta	te of New Jersey	l cc		
Со	County of			
We	e do hereby each make the following statement,	under oath,	wi	th respect to the foregoing application:
 2. 3. 	 The applicant (is) (is not) limited in its activities to the furtherance of one or more authorized purposes as defined in the Raffles Licensing Law. Prior to the issuance of any license to it to conduct games of chance, the applicant was actively engaged in serving one or more "authorized purposes." The applicant has received and used, and in good faith expects to continue to receive and use, to further one or more authorized purposes, funds from sources other than games of chance. 		6.	For each occasion for which a license is sought, one or more of the members listed who are familiar with the Raffles Licensing Law and the Rules and Regulations, will be in full charge of, and primarily responsible for, the conduct of the games. No commission, salary, compensation, reward or recompense will be paid to any person for holding, operating or conducting or assisting in the holding, operation or conducting, of the games, except to bookkeepers or accountants for professional services not exceeding the amounts fixed by the Schedule of Fees, as well as the compensation for the Licensed Compensated Workers pursuant to N.J.A.C. 13:47-6A. No prize may be offered and given in cash, except as otherwise provided by the Raffles Licensing Law (N.J.S.A. 5:8-50 et seq.). If a cash prize under certain circumstances is permitted by the law, the amount of the cash prize may not exceed the limits prescribed by the Raffles Licensing Law. All statements in the foregoing application are true.
Sw	orn and subscribed to before me this		Signs	shure of Offices and Title
	day of , 20		Signa	ature of Officer and Title
			Signa	ature of Member-in-Charge
	Notary Public (Print name)		<u></u>	Washing Chara
	C (Alt. D.I.)		Signa	tture of Member-in-Charge
	Signature of Notary Public		Signa	ature of Member-in-Charge
	AFFIX SEAL HERE		Signa	ature of Member-in-Charge

If more space is needed in any section of this application, insert extra sheets of paper.