

## RAFFLE LICENSE APPLICATION

PER ORDINANCE 85-3-1  
PASSED AND APPROVED MARCH 11, 1985

Sponsoring Organization \_\_\_\_\_

Address \_\_\_\_\_

Type of Organization \_\_\_\_\_

Is the Organization incorporated? \_\_\_\_\_ Date of incorporation \_\_\_\_\_

List the **name, address, telephone number and birth date** of the organization's (1) President (2) Secretary (3) Treasurer (4) Raffle Manager

(1) \_\_\_\_\_

(2) \_\_\_\_\_

(3) \_\_\_\_\_

(4) \_\_\_\_\_

I attest that:

- a.) The above named officers of the organization have never been convicted of a felony.
- b.) The above named organization is a not-for-profit organization and has for the entire five year period preceding this date of application maintained a membership engaged in carrying out the organization's objective.
- c.) The above named officers have never been a professional gambler or gambling promoter.
- d.) The above named officers have not been convicted of a crime involving moral turpitude within the last five years.
- e.) The organization will maintain separate records of its raffle, with the responsibility therefore being delegated to a person different from the person who accounts for other revenues for the organization. The City of Marengo reserves the right to request copies of these records.

President: \_\_\_\_\_  
Print

\_\_\_\_\_  
Signature

Secretary: \_\_\_\_\_  
Print

\_\_\_\_\_  
Signature

The location and description or the premises of place of business upon which the raffle will be held:

\_\_\_\_\_

The area or areas within the City in which raffle chances will be sold or issued:

\_\_\_\_\_

The time period during which raffle chances will be sold or issued \_\_\_\_\_

The date the winning chance will be determined \_\_\_\_\_

The method by which the winning chance will be determined \_\_\_\_\_

The retail value of each prize awarded (cannot exceed \$25,000) \_\_\_\_\_

The price to be charged for each raffle chance (cannot exceed \$150) \_\_\_\_\_

I do hereby certify that the information contained in this application is true and correct

\_\_\_\_\_  
President Date

\_\_\_\_\_  
Secretary Date

Please note: This application must be submitted at least 30 days prior to date of raffle. The Marengo City Council meets the Second and Fourth Monday of each month. Please be aware of this and submit your application in a timely manner.

**Permit Fee Schedule**

<u>Aggregate retail value of prize</u>	<u>Fee</u>
Less than \$500	\$5
\$500- \$999	\$15
\$1,000-\$9,999	\$25
\$10,000-\$99,999	\$35
More than \$100,000	\$50

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**OFFICE USE ONLY BELOW**

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Date application was received: \_\_\_\_\_ ( ) Application Approved on \_\_\_\_\_

Approved by \_\_\_\_\_

Received by: \_\_\_\_\_ ( ) Application denied: Reason \_\_\_\_\_

Denied by \_\_\_\_\_

Fee Collected: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_