

# 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.





**Part H Members of Applicant Who Will Assist in Conducting the Games**

Name of Member	Residence Address	Age
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....

**Part I Names of Other Organizations Whose Members Will Assist in Conducting the Games**

Name and Address of Organization	How Related	Identification Number
.....	.....	.....
.....	.....	.....

**Part J Statement of Applicant and Member(s) in Charge**

State of New Jersey }  
 County of } ss.:

We do hereby each make the following statement, under oath, with respect to the foregoing application:

- 1 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.
- 2 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."
- 3 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.
- 4 The conduct of the games on the occasion or occasions for which this application is made will be to raise and devote the entire net proceeds to the authorized purpose described in the application.
- 5 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.
- 6 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, no prize will be offered and given in cash, except as otherwise provided by the Raffles Licensing Law, or of greater value than is provided in said Law.
- 7 All statements in the foregoing application are true.

Sworn to and subscribed before me this  
 ..... day of ..... 19.....

Notary Public

(SEAL OF NOTARY)

.....  
 Signature of Officer, and Title

.....  
 Member in Charge

.....  
 Member in Charge

.....  
 Member in Charge

.....  
 Member in Charge

Applicant's registration slip from the Control Commission must be presented to the Municipal Clerk with this application

NOTE: Please list all individuals mentioned in sections F & G of this application including dates of birth and social security numbers for each. Information **must** be printed or typed.

	<u>NAME</u>	<u>DOB</u>	<u>SOCIAL SECURITY #</u>
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

# Sample Ticket

## Off Premises Raffle Awarding Cash

### N.J.A.C. 13:47-8.8

Stub	Ticket
<p>Name _____</p> <p>Address _____</p> <p>City _____</p> <p>State _____</p> <p>ZIP code _____</p> <p>Telephone Number _____</p> <p>NJ LGCCC Identification# _____</p> <p>Municipal RL # _____</p>	<p>Municipal RL # _____</p> <p>Name of Organization _____</p> <p style="text-align: center;"><b>50/50</b></p> <p style="text-align: center;">This is a 50/50 cash raffle and the winner will receive 50% of the amount received for all tickets or rights to participate</p> <p>Location of Drawing _____</p> <p>Date of Drawing _____</p> <p>Time of Drawing _____</p> <p>Purpose to which entire proceeds will be devoted "No substitution of the offered prize may be made." _____</p> <p>Price of Ticket _____</p> <p>Ticket # _____</p>

This illustration is provided for your convenience. While the form of the ticket may vary, the information listed above must be contained on your printed ticket. If you require assistance with your ticket, please contact the office of Legalized Games of Chance Control Commission at (973) 273-8000. This sample ticket must be attached to the Application for Municipal Raffle License and submitted to the municipality.

# Sample Ticket

## Off Premises Merchandise Raffle

### N.J.A.C. 13:47-8.7

Stub	Ticket
<p>Name _____</p> <p>Address _____</p> <p>City _____</p> <p>State _____</p> <p>ZIP code _____</p> <p>Telephone Number _____</p> <p style="text-align: right;">Municipal RL # _____</p>	<p style="text-align: right;">Municipal RL # _____</p> <p>Name of Organization _____</p> <p>_____</p> <p>_____</p> <p>List of Prizes _____</p> <p style="text-align: right;">Retail Values _____</p> <p>_____</p> <p>Location of Drawing _____</p> <p>Date of Drawing _____</p> <p style="text-align: right;">Time of Drawing _____</p> <p>Purpose to which entire proceeds will be devoted            "No substitution of the offered prize may be made            and no cash will be given in lieu of the prize."</p> <p>Price of Ticket _____</p> <p style="text-align: right;">Ticket # _____</p>

This illustration is provided for your convenience. While the form of the ticket may vary, the information listed above must be contained on your printed ticket. If you require assistance with your ticket, please contact the office of Legalized Games of Chance Control Commission at (973) 273-8000. This sample ticket must be attached to the Application for Municipal Raffle License and submitted to the municipality.