

INSTRUCTIONS FOR COMPLETION OF AN APPLICATION FOR BINGO PERMIT

1. **Do NOT fill-in a permit number.** A new permit number is assigned to each organization annually.
2. Print or type the name of the sponsoring organization, the complete organization address (**number, street, town, state, zip**), and a complete mailing address. If renewing a permit, please use **exactly the same organization name** given on previous applications.
3. List the WPD (8) digit organization Identification Number previously assigned by the Department.
4. Provide the complete date (month, day, year) the organization was organized.
5. Print the telephone number of the sponsoring organization.
6. List the complete name (last, first, middle) and the title of each officer of the sponsoring organization. An additional sheet may be attached, if necessary.
7. List the complete name (last, first, middle) and Personal Identification Number (PIN) of **all members** of the sponsoring organization assigned to assist in the operation or conduct of bingo. Additional sheets may be attached, if necessary. **Please Note: Members who desire to apply for and receive a PIN should submit an application along with this application form and should also be listed under the section titled Holders of Personal Identification Numbers. A notation must be made beside their name that an Application for Personal Identification Number (PIN) Bingo form is also attached and submitted for approval.**
8. Designate **only ONE individual** as Member In Charge of the bingo sessions. **In order to designate the Member In Charge, an asterisk (*) must be placed beside the name of one of the individuals listed in the section titled Holders of Personal Identification Numbers.** Please take note that the designated Member In Charge must have previously applied for and received a PIN for the organization that he/she will be the Member In Charge of, or an Application for Personal Identification Number (PIN) Bingo form must be submitted for this individual along with this application form.
9. Answer the question in regard to the Member In Charge by indicating whether or not the Member In Charge is a bona-fide, active member of the organization and a member in good standing for at least six months.
10. Check the type of permit for which your organization is applying. 'Class A' bingo permits allow bingo sessions to be conducted one day per week for the current calendar year, (Jan 1 through December 31); 'Class B' bingo permits allow an organization to conduct bingo up to ten successive days; and 'Class C' bingo permits allow bingo sessions to be conducted one day per month for the current calendar year. (Jan 1 through December 31); If applying for a 'Class A' bingo permit, the day of the week the

Instructions For Completion Of Bingo Permit Application

sessions will be conducted must be provided along with the commencing time and the terminating time (including a.m. or p.m.) of the sessions. If applying for a 'Class B' bingo permit, the commencing date and the terminating date (month, day, year) the sessions will be held must be provided along with the commencing time and the terminating time (including a.m. or p.m.) for each day the sessions are to be conducted. If applying for a 'Class C' bingo permit, the complete date (month, day, year) the sessions will be held for each month must be provided, along with the commencing time and the terminating time (including a.m. or p.m.) for each date the sessions are to be conducted.

11. Print the complete address (**number, street, town, state, zip**) of the location where the bingo sessions will be held, and indicate who owns these premises by providing a complete name and address (**name, number, street, town, state, zip**).
12. Print the maximum seating capacity according to law, and answer the question in regard to renting or leasing the premises where the sessions are to be conducted.
13. Have the application signed and dated by one of the ranking officers of the organization. **Please take note that only individuals listed on the application in the section titled Officers Of The Organization qualify as ranking officers.**
14. The application form must be signed and dated by an authorized Notary Public. Please be sure that the notary seal and/or the date the Notary Public's commission expires are used on this document. Applications will not be accepted without this important information.
15. **Attach a check, made payable to the " Wallingford Police Department " for the appropriate permit fee. Please take note that checks must be drawn from the sponsoring organization's "Special Bingo Bank Account" when applying for a 'Class A' or 'Class C' bingo permit.**
 - a) 'Class A' bingo permit fee - \$ 75.00
 - b) 'Class B' bingo permit fee - \$ 5.00 per day (maximum of ten consecutive days)
 - c) 'Class C' bingo permit fee - \$ 50.00

Please Note:

Organizations applying for a Class B bingo permit need to understand that due to the nature of the activity to be conducted (a special event bingo game), the member in charge of the organization may be required to attend a pre-bingo meeting as a prerequisite of obtaining a permit.

Timely submittal of applications for bingo permits is imperative. Applications should be submitted at least ten days prior to the date of an event in order to provide enough time for the processing and issuance of a permit.

**INSTRUCTIONS FOR COMPLETION OF THE BINGO APPLICATION
SUPPLEMENTAL FORM AND RELATED INFORMATION**

1. Print the WPD (8) digit organization Identification Number previously assigned.
2. Clearly print the complete name (first, middle, last) of the designated Member In Charge, and provide a home and work telephone number where we may reach this individual, if necessary.
3. The designated Member In Charge must sign his/her name and date the form in the space provided in order to signify that he/she has read the Bingo law and the administrative regulations governing Bingo, and understands he/she will be responsible for conducting Bingo in accordance with the terms of the permit and the provisions of the Bingo law and administrative regulations.
4. Provide the time (including a.m. or p.m.) the doors open to the public.
5. Provide the time (including a.m. or p.m.) the sale of cards or sheets begin.
6. Provide the time (including a.m. or p.m.) balls will be drawn for the bonanza game (if any).
7. Provide the time (including a.m. or p.m.) the bingo games will commence.
8. Provide the complete checking account number of the sponsoring organization's "Special Bingo Bank Account", if applying for a 'Class A' or 'Class C' bingo permit.
9. In the space provided, staple a **voided** (not cancelled) check from the sponsoring organization's "**Special Bingo Bank Account**", if applying for a 'Class A' or 'Class C' bingo permit.
10. Attach **one original** identifiable admission card, sheet or ticket.

INSTRUCTIONS FOR COMPLETION OF THE BINGO PRIZE SHEET

- Complete the Bingo Prize Sheet in duplicate. The name and address of the sponsoring organization must be printed on each page. This information must be listed exactly as it was on the organization's approved bingo registration. Page numbers should be printed in the upper left-hand corner of each page. The Organization I.D. # and type of permit (BA, BB, BM) should be printed in the upper right-hand corner of each page.
- **In order to complete the Bingo Prize Sheet, first list each game number to be played. An organization may play a minimum of 15 games or a maximum of 40 games per permitted bingo session. Please bear in mind that a multiple-part Winner-Take-All game (WTA) is considered only one game. On the prize sheet, a WTA game is a one line entry, where the winning arrangement must be listed as "Caller's Choice" and the prize must be listed as "TBA". Only two WTA games are allowed per bingo session.**
- Print the name of the game in the "Game Description Type" column for all games other than regular bingo games.
- For each game, print the number of faces, the color of the sheet and the type (border, solid, tint, shaded, sealed, pre-printed or striped) to be used in the "Number of Faces per Cards/Sheets and Color" column.
- A winning arrangement must be provided for each game played. Please bear in mind that "To Be Announced" (TBA) is not allowed as an acceptable winning arrangement. "Callers Choice" is acceptable as a winning arrangement **only** for WTA games.
- List the prize amounts for each game while keeping in mind the allowable prize limits for each type of game to be conducted.
 - **Regular game prizes** – Prizes may be up to \$200 each.
 - **Special game prizes** – Prizes may range from \$201 up to \$750 each, provided that the total doesn't exceed \$2,500 on any one day.
 - **Special Grand Prize** – The rollover amount for a Special Grand Prize may not exceed \$500, and the maximum prize that may accumulate for up to sixteen weeks is \$5,000.
 - **Winner-Take-All (WTA) Game Prizes** – Ninety percent (90%) of all receipts from the sale of bingo cards for the WTA game or series of games must be awarded as prizes, and each prize awarded may not exceed \$500 in value.
- If there are different prize schedules based on attendance, the column headings should be listed as in the following example:

Prizes
80 or More
Players

Prizes
79 – 70
Players

Prizes
69 or Less
Players

Instructions for Completion of the Bingo Prize Sheet

- If the last attendance column has an ending number of players instead of the words “or less”, the following statement must appear on the last line of the prize sheet: **Bingo will be cancelled if attendance is ## or less.** Example:

Prizes	Prizes	Prizes
80 or More	79 – 70	69 – 50
Players	Players	Players

Bingo will be cancelled if attendance is 49 or less.

- A maximum of two progressive games are allowed per session. If conducting a progressive game, certain wording is required to be listed on the line(s) below the progressive game information. The name of the winning arrangement and the words “in ?#’s or less wins jackpot, plus game prize” must be listed, along with the special grand prize/rollover amount, as in the following example:

***cover all in ?#’s or less wins jackpot, plus game prize.
*special grand prize/rollover amount \$500.00**

- If your organization intends to conduct a 50/50 game, a maximum payout amount must be listed, as in the following example:

“50/50 max. \$75.00”

- Both copies of the Bingo Prize Sheet must be signed and dated by the designated Member In Charge. Keep one copy for the organization’s internal records, and attach one of the signed and dated copies to the application for the permit.
- If any information must be changed after the Bingo Prize Sheet has been approved as part of the organization’s application, an Application to Amend – Bingo must be completed and submitted for consideration of approval. The last original prize sheet that was approved must be also be submitted with the desired changes noted in either red or blue ink, and it must contain the **original** signature of the member in charge. Changes may not be implemented prior to receiving an approved amend form, aside from two exceptions. Winning arrangements and paper colors may be changed on the Bingo Prize Sheet without an approved amendment to the permit. All other changes require approval.

IMPORTANT INFORMATION

Please Remember:

- A winner-take-all game (WTA) is the **ONLY** game that can be played in parts. The progressive jackpot game must say “**JACKPOT, PLUS GAME PRIZE**”. The game prize must be paid with the jackpot! Example: If the jackpot is worth \$2,000.00, the winner will receive \$2,100.00 (\$2,000.00 plus the game prize of \$100.00).
- **In the event an admission coupon or ticket is part of an admission package, the price of the admission coupon or ticket, if any, must be noted separately.**
- **ONCE A BINGO PERMIT HAS BEEN ISSUED, AN “APPLICATION TO AMEND” MUST BE APPROVED BEFORE ANY CHANGE CAN TAKE PLACE!**

Please Note: Bingo cards or sheets must be sold at a uniform unit price, and when a specific color sheet with the same number of faces is sold for a particular game or games, that same color sheet with the same number of faces may not be sold again during the same bingo occasion or session. Also, you may change the color of your sheets without having to file an Application to Amend – Bingo; however, if you are going to change the price of admission, sheets of paper, or add or delete any games, you must submit and receive an approved amendment application before any changes can be implemented. **Each organization desiring to amend the price of admission, sheets of paper, the number of games being played or change its bingo prizes or pricing must provide an Application to Amend - Bingo form, and a copy of the approved bingo prize and/or price sheet(s) with the desired change(s) marked in red or blue ink. In addition, each prize or price sheet submitted with changes must be signed by the bingo member in charge.**

- **Organizations applying for a Class B bingo permit need to understand that due to the nature of the activity to be conducted (a special event bingo game), the member in charge of the organization may be required to attend a pre-bingo meeting as a prerequisite to obtaining a permit.**
- **TIMELY SUBMITTAL OF APPLICATIONS FOR BINGO PERMITS IS IMPERATIVE. APPLICATIONS SHOULD BE SUBMITTED AT LEAST TEN DAYS PRIOR TO THE DATE OF AN EVENT IN ORDER TO PROVIDE ENOUGH TIME FOR THE PROCESSING AND ISSUANCE OF A PERMIT.**

**APPLICATION FOR PERMIT
TO CONDUCT BINGO
CHARITABLE GAMES**

SAMPLE

INSTRUCTIONS:

1. Print or type and, if necessary, use additional sheets. Have application notarized.
2. The completed form must be mailed to:

TO:		PERMIT NUMBER	
NAME OF ORGANIZATION St. John's Church - Men's Club			IDENTIFICATION NUMBER 1700005
ADDRESS OF ORGANIZATION (No. and Street) 263 Cedar Mountain Road,		(City or Town) Anytown, CT 06000	(State) (Zip Code) DATE ORGANIZED 06/20/65
MAILING ADDRESS (No. and Street) c/o Reverend Smith, 261 Cedar Mountain Road,		(City or Town) Anytown CT 06000	(State) (Zip Code) TELEPHONE NUMBER 860 555-1000

OFFICERS OF THE ORGANIZATION			
NAME (Last, First, Middle)	TITLE	NAME (Last, First, Middle)	TITLE
1. Couto, William E.	President	3. McDonald, Edward T	Treasurer
2. Smith, Trevor J.	Vice President	4.	

ORGANIZATION MEMBERS WHO ARE HOLDERS OF PERSONAL IDENTIFICATION NUMBERS (Designate Member-In-Charge's Name With An Asterisk)			
NAME (Last, First, Middle)	P.I.N.	NAME (Last, First, Middle)	P.I.N.
1. ** Boudreau, Alan**	016275B	5. McDonald, Edward T.	016162B
2. Cuoto, William E.	015327B	6. Rogers, Leonard A.	016277B
3. Levesque, Henry	016276B	7. Thom, Ned (applying for no.)	
4. Markow, Brian M.	014412B	8. Yas, John (applying for no.)	

MEMBER IN CHARGE: Is the Member in Charge a bona-fide, active member of the organization and a member in good standing for at least six months? YES NO

Check Type of Permit Applied for and Indicate Day(s) and Date(s):

CLASS A (One day each week from issue date to 9/30) (Fee: \$.00)
 DAY OF WEEK: Monday TIME: 7:00 pm TO: 10:00 pm

CLASS B (Maximum of ten successive days) (Fee: \$.00 per day)
 DATE: _____ TO: _____ TIME: _____ TO: _____

CLASS C (One day each month from issue date to 9/30) (Fee: \$.00)

JAN ___/___/___ FROM: ___:___ am TO: ___:___ pm	JUL ___/___/___ FROM: ___:___ am TO: ___:___ pm
FEB ___/___/___ FROM: ___:___ am TO: ___:___ pm	AUG ___/___/___ FROM: ___:___ am TO: ___:___ pm
MAR ___/___/___ FROM: ___:___ am TO: ___:___ pm	SEP ___/___/___ FROM: ___:___ am TO: ___:___ pm
APR ___/___/___ FROM: ___:___ am TO: ___:___ pm	OCT ___/___/___ FROM: ___:___ am TO: ___:___ pm
MAY ___/___/___ FROM: ___:___ am TO: ___:___ pm	NOV ___/___/___ FROM: ___:___ am TO: ___:___ pm
JUN ___/___/___ FROM: ___:___ am TO: ___:___ pm	DEC ___/___/___ FROM: ___:___ am TO: ___:___ pm

ADDRESS WHERE BINGO WILL BE PLAYED (No. and Street) 263 Cedar Mountain Road, Anytown CT 06000		(City or Town) Anytown CT 06000	(State) (Zip Code)	MAXIMUM SEATING CAPACITY ACCORDING TO LAW: 250
WHO OWNS THESE PREMISES? (Name) St. John's Church 263 Cedar Mountain Road, Anytown CT 06000		(No. and Street) Anytown CT 06000	(City or Town) (State) (Zip Code)	RENTING/LEASING? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
I, the undersigned ranking officer of subject organization, do hereby state that all Bingo sessions operated by subject organization under this permit will be conducted in compliance with the Connecticut General Statutes and with all Administrative Regulations concerning Bingo Games.			FOR OFFICE USE ONLY	

Personally appeared the signer of the foregoing statement and made oath before me to the truth of matters contained therein.	SIGNED (Notary Public) Frank Smead	SIGNED (Ranking Officer) William E. Cuoto
	DATE (Mo., Day, Yr.) 08/28/11	DATE (Mo., Day, Yr.) 08/28/11
Application for Bingo Permit is approved	DATE (Mo., Day, Yr.)	MY COMMISSION EXPIRES: 04/03/15

SAMPLE

INSTRUCTIONS:

- 1. Print or type, and attach all required material.
- 2. The completed form must be mailed to:

TO: DEPARTMENT OF CONSUMER PROTECTION	IDENTIFICATION NUMBER 1700005
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MEMBER IN CHARGE

Name (please print): Alan Boudreau

Home telephone number: (860 555-3200

Work telephone number: (860 555-3750

I, the undersigned Member In Charge of the subject organization, do hereby state that I have read the Connecticut General Statutes governing Bingo and the Administrative Regulations, Operation Of Bingo Games, and that I will be responsible for the holding, operation and conduct of all Bingo sessions in accordance with the terms of the permit, and the provisions of the Bingo law and the administrative regulations governing Bingo.

Alan Boudreau	08/28/11
SIGNED (<i>Member In Charge</i>)	DATE (<i>Mo., Day, Yr.</i>)

BINGO SESSION

Provide the time the doors open to the public: 5:00 pm

Provide the time the sale of cards or sheets begins: 5:30 pm

Provide the time balls will be drawn for the bonanza game (if any): 6:45 pm

Provide the time the bingo games will commence: 7:00 pm

SPECIAL BINGO BANK ACCOUNT

Account number: 10 0003629900

Attach a voided (not cancelled) check from the special bingo bank account in the space provided below:

Special Bingo Bank Account I.D. #1700005 St. John's Church – Men's Club 263 Cedar Mountain Road, Anytown, CT 06000	Class A	<u>51-3849</u> <u>3204</u>	1016
PAY TO THE ORDER OF: _____ \$ _____		DATE: _____	
_____ DOLLARS		SIGNED _____	
THE FIRST NATIONAL BANK			
MEMO _____			
:320438491 :10 0003629900 ' 1016			

ATTACHMENT

Attach one **original** identifiable admission card, sheet or ticket. A photocopy is **not** acceptable.

**APPLICATION FOR PERMIT
TO CONDUCT BINGO
CHARITABLE GAMES**

SAMPLE

INSTRUCTIONS:

1. Print or type and, if necessary, use additional sheets. Have application notarized.
2. The completed form must be mailed to:

TO:		PERMIT NUMBER	
NAME OF ORGANIZATION St. John's Church - Men's Club			IDENTIFICATION NUMBER 1700005
ADDRESS OF ORGANIZATION (No. and Street) 263 Cedar Mountain Road,	(City or Town) Anytown,	(State) (Zip Code) CT 06000	DATE ORGANIZED 06/20/65
MAILING ADDRESS (No. and Street) c/o Reverend Smith, 261 Cedar Mountain Road,	(City or Town) Anytown	(State) (Zip Code) CT 06000	TELEPHONE NUMBER (860) 555-1000

OFFICERS OF THE ORGANIZATION

NAME (Last, First, Middle)	TITLE	NAME (Last, First, Middle)	TITLE
1. Couto, William E.	President	3. McDonald, Edward T	Treasurer
2. Smith, Trevor J.	Vice President	4.	

ORGANIZATION MEMBERS WHO ARE HOLDERS OF PERSONAL IDENTIFICATION NUMBERS

(Designate Member-In-Charge's Name With An Asterisk)

NAME (Last, First, Middle)	P.I.N.	NAME (Last, First, Middle)	P.I.N.
1. ** Boudreau, Alan**	016275B	5. McDonald, Edward T.	016162B
2. Cuoto, William E.	015327B	6. Rogers, Leonard A.	016277B
3. Levesque, Henry	016276B	7. Thom, Ned (applying for no.)	
4. Markow, Brian M.	014412B	8. Yas, John (applying for no.)	

MEMBER IN CHARGE: Is the Member in Charge a bona-fide, active member of the organization and a member in good standing for at least six months?

YES NO

Check Type of Permit Applied for and Indicate Day(s) and Date(s):

CLASS A (One day each week from issue date to 9/30) (Fee: \$.00)

CLASS B (Maximum of ten successive days) (Fee: \$.00 per day)

DAY OF WEEK: Monday TIME: 7:00 pm TO: 10:00 pm

DATE: _____ TO: _____ TIME: _____ TO: _____

CLASS C (One day each month from issue date to 9/30) (Fee: \$.00)

JAN ____/____/____	FROM: _____	TO: _____	JUL ____/____/____	FROM: _____	TO: _____
FEB ____/____/____	FROM: _____	TO: _____	AUG ____/____/____	FROM: _____	TO: _____
MAR ____/____/____	FROM: _____	TO: _____	SEP ____/____/____	FROM: _____	TO: _____
APR ____/____/____	FROM: _____	TO: _____	OCT ____/____/____	FROM: _____	TO: _____
MAY ____/____/____	FROM: _____	TO: _____	NOV ____/____/____	FROM: _____	TO: _____
JUN ____/____/____	FROM: _____	TO: _____	DEC ____/____/____	FROM: _____	TO: _____

ADDRESS WHERE BINGO WILL BE PLAYED (No. and Street) 263 Cedar Mountain Road,	(City or Town) Anytown	(State) (Zip Code) CT 06000	MAXIMUM SEATING CAPACITY ACCORDING TO LAW: 250
WHO OWNS THESE PREMISES? (Name) St. John's Church	(No. and Street) 263 Cedar Mountain Road,	(City or Town) (State) (Zip Code) Anytown CT 06000	RENTING/LEASING? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

I, the undersigned ranking officer of subject organization, do hereby state that all Bingo sessions operated by subject organization under this permit will be conducted in compliance with the Connecticut General Statutes and with all Administrative Regulations concerning Bingo Games.

SIGNED (Ranking Officer)
William E. Cuoto
DATE (Mo., Day, Yr.) **08/28/11**

Personally appeared the signer of the foregoing statement and made oath before me to the truth of matters contained therein.

SIGNED (Notary Public)
Frank Smead

MY COMMISSION EXPIRES:

DATE (Mo., Day, Yr.)
08/28/11

04/03/15

Application for Bingo Permit is approved

INSTRUCTIONS:

1. Print or type, and attach all required material.
2. The completed form must be mailed to:

TO: DEPARTMENT OF CONSUMER PROTECTION	IDENTIFICATION NUMBER 1700005
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MEMBER IN CHARGE

Name (please print): Alan Boudreau

Home telephone number: (860) 555-3200

Work telephone number: (860) 555-3750

I, the undersigned Member In Charge of the subject organization, do hereby state that I have read the Connecticut General Statutes governing Bingo and the Administrative Regulations, Operation Of Bingo Games, and that I will be responsible for the holding, operation and conduct of all Bingo sessions in accordance with the terms of the permit, and the provisions of the Bingo law and the administrative regulations governing Bingo.

Alan Boudreau
SIGNED (Member In Charge)

08/28/11
DATE (Mo., Day, Yr.)

BINGO SESSION

Provide the time the doors open to the public: 5:00 pm

Provide the time the sale of cards or sheets begins: 5:30 pm

Provide the time balls will be drawn for the bonanza game (if any): 6:45 pm

Provide the time the bingo games will commence: 7:00 pm

SPECIAL BINGO BANK ACCOUNT

Account number: 10 0003629900

Attach a voided (not cancelled) check from the special bingo bank account in the space provided below:

Special Bingo Bank Account I.D. #1700005 St. John's Church – Men's Club 263 Cedar Mountain Road, Anytown, CT 06000	Class A	<u>51-3849</u> 3204	1016	
PAY TO THE ORDER OF: _____ \$ _____		DATE: _____		
THE FIRST NATIONAL BANK		_____ DOLLARS		
MEMO _____		SIGNED _____		
:320438491 :10 0003629900 ' 1016				

ATTACHMENT

Attach one **original** identifiable admission card, sheet or ticket. A photocopy is **not** acceptable.

Wallingford Police Department
Records Division
135 North Main Street
Wallingford, CT 06492
(203) 294-2810



**APPLICATION FOR PERMIT
TO CONDUCT BINGO
CHARITABLE GAMES**

INSTRUCTIONS:

1. Print or type and, if necessary, use additional sheets. Have application notarized.
2. The completed form must be mailed to: **Wallingford Police Department**

TO: Wallingford Police Department			PERMIT NUMBER		
NAME OF ORGANIZATION			IDENTIFICATION NUMBER		
ADDRESS OF ORGANIZATION (No. and Street)		(City or Town)	(State)	(Zip Code)	DATE ORGANIZED
MAILING ADDRESS (No. and Street)		(City or Town)	(State)	(Zip Code)	TELEPHONE NUMBER

OFFICERS OF THE ORGANIZATION			
1.	NAME (Last, First, Middle)	TITLE	2.

ORGANIZATION MEMBERS WHO ARE HOLDERS OF PERSONAL IDENTIFICATION NUMBERS <small>(Designate Member-In-Charge's Name With An Asterisk)</small>			
1.	NAME (Last, First, Middle)	P.I.N.	2.

MEMBER IN CHARGE: Is the Member in Charge a bona-fide, active member of the organization and a member in good standing for at least six months? YES NO

Check Type of Permit Applied for and Indicate Day(s) and Date(s):

<input type="checkbox"/> CLASS A (One day each week from issue date to 9/30) (Fee: \$75.00) DAY OF _____ WEEK: _____ TIME: _____ TO: _____	<input type="checkbox"/> CLASS B (Maximum of ten successive days) (Fee: \$5.00 per day) DATE: _____ TO: _____ TIME: _____ TO: _____
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CLASS C (One day each month from issue date to 9/30) (Fee: \$50.00)

JAN	____/____/____	FROM: _____	am	pm	TO: _____	am	pm	JUL	____/____/____	FROM: _____	am	pm	TO: _____	am	pm
FEB	____/____/____	FROM: _____	am	pm	TO: _____	am	pm	AUG	____/____/____	FROM: _____	am	pm	TO: _____	am	pm
MAR	____/____/____	FROM: _____	am	pm	TO: _____	am	pm	SEP	____/____/____	FROM: _____	am	pm	TO: _____	am	pm
APR	____/____/____	FROM: _____	am	pm	TO: _____	am	pm	OCT	____/____/____	FROM: _____	am	pm	TO: _____	am	pm
MAY	____/____/____	FROM: _____	am	pm	TO: _____	am	pm	NOV	____/____/____	FROM: _____	am	pm	TO: _____	am	pm
JUN	____/____/____	FROM: _____	am	pm	TO: _____	am	pm	DEC	____/____/____	FROM: _____	am	pm	TO: _____	am	pm

ADDRESS WHERE BINGO WILL BE PLAYED (No. and Street)			(City or Town)	(State)	(Zip Code)	MAXIMUM SEATING CAPACITY ACCORDING TO LAW:
WHO OWNS THESE PREMISES? (Name)		(No. and Street)	(City or Town)	(State)	(Zip Code)	
RENTING/LEASING?					FOR OFFICE USE ONLY	
<input type="checkbox"/> YES <input type="checkbox"/> NO						

I, the undersigned ranking officer of subject organization, do hereby state that all Bingo sessions operated by subject organization under this permit will be conducted in compliance with the Connecticut General Statutes and with all Administrative Regulations concerning Bingo Games.

Personally appeared the signer of the foregoing statement and made oath before me to the truth of matters contained therein.	SIGNED (Notary Public)	SIGNED (Ranking Officer)
	DATE (Mo., Day, Yr.)	DATE (Mo., Day, Yr.)
	DATE (Mo., Day, Yr.)	MY COMMISSION EXPIRES:

Application for Bingo Permit is approved

Wallingford Police Department
 Records Division
 135 North Main Street
 Wallingford, CT 06492
 (203) 294-2810



**APPLICATION TO AMEND
 BINGO**

REV. 02/19

INSTRUCTIONS:

1. Print or type. Have the application notarized.
2. The completed form must be mailed to **135 North Main Street, Wallingford, CT 06492.**

No Bingo Permit, no Certificate of Registration, and no Certificate of Personal Identification Number issued under the Connecticut General Statutes, or Administrative Regulations issued pursuant thereto, may be amended except upon application through use of this form.

TO: WALLINGFORD POLICE DEPARTMENT	IDENTIFICATION NUMBER
NAME OF SPONSORING ORGANIZATION	
TELEPHONE NUMBER	
ADDRESS OF ORGANIZATION <i>(No. and Street)</i>	
<i>(City or Town)</i>	<i>(State)</i> <i>(Zip Code)</i>

APPLICATION IS MADE TO:
 (Check all that apply)

Amend the bingo permit

PERMIT NUMBER

Amend the certificate of registration

Amend the certificate of personal identification number

PERSONAL IDENTIFICATION NUMBER

Please provide the details of the proposed amendment(s):

PRINTED NAME of person preparing this form	SIGNED <i>(Person preparing form)</i>	TELEPHONE NUMBER
--	---------------------------------------	------------------

SIGNED <i>(Organization Ranking Officer)</i>	TITLE of Ranking Officer	DATE <i>(Mo., Day, Yr.)</i>
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Subscribed and sworn to before me.	SIGNED <i>(Notary Public)</i>	My Commission Expires:	DATE <i>(Mo., Day, Yr.)</i>
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<input type="checkbox"/> AMENDMENT DISAPPROVED	<input type="checkbox"/> MAY REMAIN IN FULL FORCE AND EFFECT IN ACCORDANCE WITH CHANGE(S) SET FORTH ABOVE	DATE <i>(Mo., Day, Yr.)</i>
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