## **RAFFLES APPLICATION INSTRUCTIONS**

**Three (3)** copies, original signatures on all copies, of the application for Raffles must be submitted at least **14 days** before the approval of the Municipal Clerk. Once received a background check of Part F & G applicants will be conducted by the Manasquan Police Department and the applicants must be fingerprinted by the state licensed vendor at their own cost. The background check process is approximately 14 days once the fingerprint scan is conducted.

One original of the Manasquan Raffle Applicant Information form for **all** individuals listed in Parts F, G, H and I must be completed.

According to the Raffles Law, your raffle application and the Findings and Determination of the Governing Body is mailed to LGCCC after it is approved by the Municipal Clerk. The Clerk's office must wait 15 days after approval & remittance to LGCCC of an application to issue a license. You can call the Clerk's Office on the 15<sup>th</sup> day for your raffle number and your license will be mailed or may be picked up at this time.

**TOP RIGHT CORNER OF THE APPLICATION:** Please print Organizations Registration Identification Number in the identification no. section. (second line)

The Organization's **ORIGINAL** Registration Identification number card, which is issued by LGCCC, must be presented at the time of filing the application. **NO APPLICATION WILL BE PROCESSED WITHOUT THIS.** Please contact LGCCC at 973-273-8000 for details of renewing or obtaining your registration card.

Print "Borough of Manasquan" as the host municipality.

#### PART A - GENERAL

1 & 2a:Name and address of organization as it appears on LGCCC ID registration card.

- 2b: the mailing address should reflect the name and address of person who is to receive license, report form and any other pertinent information regarding the raffle.
- 3. Date, time and type of raffle (on or off premise, 50/50, etc.)
- 4. Address of place where raffle will be conducted (must be in Borough of Manasquan)
- 5. Answer question.
- 6. Answer question.

## PART B – QUALIFICATION OF APPLICANT

1-4 Answer all questions.

## PART C – SCHEDULE OF EXPENSES

Complete list of expenses.

#### PART D- SCHEDULE OF PURPOSES:

- 1. State the specific purpose of the Raffle.
- 2. Complete only if another organization will be accepting proceeds.

**<u>PART E - SCHEDULE OF PRIZES:</u>** List prizes and values as they will appear on ticket. If you are unaware of retail value you may put to be determined or unknown at this time. (For 50/50 please put "50% of gross proceeds").

**<u>PART F – OFFICERS OF APPLICANT</u>**: There must be at least two (2) officers listed, with all information completed.

#### PART G - MEMBERS OF APPLICANT WHO WILL BE IN CHARGE OF THE

**<u>GAMES</u>**: There must be at least one (1) member in charge listed, with information completed.

PART H - MEMBERS OF APPLICANT WHO WILL ASSIST IN CONDUCTING THE GAMES: Complete if applicable

### <u>PART I – NAMES OF OTHER ORGANIZATIONS WHOSE MEMBERS WILL</u> <u>ASSIST IN CONDUCTING THE GAMES</u>: Complete if applicable

**PART J - STATEMENT OF APPLICATION & MEMBERS IN CHARGE:** First and last names should be used. Responsible persons must be "Over age 21". Officer original signature and member-in-charge original signature must be from two separate individuals. Signatures must be originally notarized.

**<u>SAMPLE TICKET FORM:</u>** Two copies of a sample ticket form must be submitted with all off-premise raffles where tickets are printed.

**DEFINITION & FEES:** Please see attached.

#### **RAFFLES REPORT INSTRUCTIONS**

Prepare report form and file **directly with the Legalized Games of Chance Control Commission** (LGCCC, PO BOX 46000, NEWARK, NJ 07101 no later than the 15<sup>th</sup> day of the month following the games(s) of chance. Also, file a copy with the Municipal Clerk

If there is an additional fee owed to the LGCCC, the same fee amount will apply payable **to the Borough of Manasquan.** 

For further information or questions - the NJLGCCC website is: <a href="http://www.state.nj.us/lps/ca/lgccc.htm">www.state.nj.us/lps/ca/lgccc.htm</a>

#### LGCCC Fee Increases Effective 10/02/06

- 1. **<u>Bingo</u> \$20.00** for each occasion.
- 2. <u>On-Premise draw raffle for cash (50/50) or merchandise</u> (Exceeding \$400.00 total prize value) - **\$20.00** for each day on which a drawing is to be conducted under license.
- 3. <u>On-Premise draw raffle for cash (50/50) or merchandise</u> (Not exceeding \$400.00 total prize value) – No licensing fee. If the raffle should exceed \$400.00, then submit \$20.00 at the time of filing report of operations.
- 4. <u>Off-Premise draw raffle</u> awarding merchandise as a prize (for each \$1,000 or part thereof)- **\$20.00**
- 5. <u>Off-Premise (50/50) raffle</u> **\$20.00** fee application. If more than \$1,000 in awarded prizes, then \$20.00 per \$1,000 in awarded prizes or part thereof.
- 6. <u>Carnival games or wheel</u> **\$20.00** for each game or wheel held on any one day, or any series of consecutive days not exceeding 6 at one location
- 7. <u>Special door prize raffle</u> no fee and no license, provided the merchandise is wholly donated and has retail value of less than \$50.00. NOTE: cannot be conducted when other games of chance are being conducted, held or operated.
- 8. <u>Calendar Raffle</u> \$20.00 (for each \$1,000 or part thereof of the retail value of the prize)
- 9. <u>Instant Raffle</u>: 1. **\$20.00** for each day on which instant raffle tickets are sold or offered for sale or
  - 2. **\$750.00** for a one year license
- 10. <u>Golf Hole-In-One</u> \$20.00 (for each \$1,000 or part thereof of retail value of ancillary prizes)
- 11. Armchair Race (Nite at the Races)- \$50.00 per licensed day of operation
- 12. Casino Night \$100.00 per occasion

Please submit correct fee in the form of two separate checks, with matching amounts, one to NJ Legalized Games of Chance (NJ LGCCC) and one to the Borough of Manasquan. You must come in person to the Borough Clerk's office, and bring along with you your VALID REGISTRATION IDENTIFICATION CARD ISSUED BY THE STATE (NJLGCCC).

Application for Raffles License	Application No. RA: Identification No				
approximation and and and and and and and and and an					
Insert name of Municipality	Prepare 4 copies of application. Or	ne copy will be retarned			
Part A GENERAL					
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 kinduring the hours listed (use a separate application Date Hours	nd stated on the date, or on ea				
4 Address of place where Raffles will be played					
5 Does the applicant own the premises or regular	ly occupy them for its general j	purposes?YesNa			
6 If raffles equipment is rented, attach statement of	raffles equipment lessor to applic				
Part B QUALIFICATION OF APPLICANT					
I is this the first time the applicant has applied for	or a license in this municipality?	YesNe			

- 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 <u>No</u>
- 3 If applicant is unincorporated, state number of members: \_\_\_\_\_\_ members.

#### Part B QUALIFICATION OF APPLICANT (Continued)

4 If the answer to either of questions 1 or 2 is "Yes," attach to this application an exact copy of the provisions of the certificate of incorporation, or of the written charter, constitution or by-laws of the applicant, showing (1) that the applicant is a qualified organization, and (2) that it is empowered to further one or more authorized purposes, all as defined in the Raffles Licensing Law.

#### Part C SCHEDULE OF EXPENSES

The items of expense intended to be incurred or paid in connection with the games listed in this application, the names and addresses of the persons to whom each item is to be paid, and the purpose for which each item is to be paid, are:

Item	of Expense	Name and Address of Supplier	Purpose
			· · · ·
Part D Sc	HEDULE 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 Raffles Licensing Law by turning the same 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 Organisation) 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\_\_\_\_\_

A description of all prizes to be offered and given in all the games listed in this application is as follows: (for merchandise, describe the article and state the retail value; if prizes are to be donated, so indicate and estimate as accurately as possible the information called for).

Descript		Description of Prize	Donated (yes or no)	Ret	Retail Value		
-			· · · · · · · · · · · · · · · · · · ·				
	_						
-							
Part	F	OFFICERS OF APPLICANT					
	Office Name of Of		er Reside	nce Address	008		
Part	G	MEMBERS OF APPLICANT WHO	WILL BE IN CHARGE OF THE GAMES				
		ne of Member in Charge	Residence Address	Tel. No.	DOB		

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

Part	H	MEMBERS	OF	Applicant	WHO WI	ILL Assu	st in Cond	UCTIN	g the Ga	MES		
			Nan	ne of Member		Resi	Residence Address			DOB		
Part	I	Names of	От	ner Organ	IZATIONS	Weose	Members	WILL	Assist i	n Condu	CTING THE	Games
		Name and Address of Organization					How Related			Identification Number		
Part	J	STATEMEN	TO	OF APPLICAN	T AND N	iember(	(s) in Cha	RGE				
STAT		OF NEW IN	Der	v	>							

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

 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.

} 88.:

- 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.

Sworn to and subscribed before me this

\_\_\_\_\_day of \_\_\_\_\_\_\_20\_\_\_

Notary Public

COUNTY OF

(SEAL OF NOTARY)

- 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.

Member in Charge

Signature of Officer, and Title

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.

P.O. BOX 430 201 E. MAIN ST.



Incorporated December 30, 1887

732-223-1000 FAX 732-223-0587

CLASS 187

#### Department of Police

BOROUGH OF MANASQUAN COUNTY OF MONMOUTH NEW JERSEY 08736

> DANIEL SCIMECA, Chief of Police ELLIOTT A. CORREIA, Captain of Police

# Manasquan Raffle Applicant Information

Information must be supplied on each person listed on the raffle application. Failure to supply complete information will result in application not being processed.

Organization Name and Mailing Address:

Listed Officer/ Member Name:

Address:

Date Of Birth: Social Security Number:

Drivers License Number and State of Issue:

Listed Officer/ Member Name:

Address:

Date Of Birth: Social Security Number:

Drivers License Number and State of Issue:

(Fill out additional sheet(s) if more than two Officers/Members are listed on application)

