

**BOROUGH OF DUMONT, 50 WASHINGTON AVENUE, DUMONT, N.J. 07628**

**IN ORDER TO HOLD A RAFFLE YOU MUST HAVE A CHARITIES  
CERTIFICATE ISSUED BY THE LEGALIZED GAMES OF CHANCE CONTROL  
COMMISSION.**

**RAFFLE APPLICATIONS WILL NOT BE APPROVED WITHOUT PRESENTATION OF YOUR ORIGINAL REGISTRATION CERTIFICATE. ORGANIZATIONS RENEWING THEIR REGISTRATION, MUST BRING IN THE NEW CERTIFICATE.** If you do not have a Charities Registration No. please go on their website <http://www.state.nj.us/lps/ca/lgccc> to find the application form or check with Legalized Games of Chance (973)648-2710 if you have any questions.

Raffle applications must be received in the office of the Borough Clerk ten days prior to the first Tuesday of the month. Approval will be made by the Mayor and Council at the regular meeting scheduled for the third Tuesday of the month. Legalized Games of Chance will take fifteen business days to process the application after approval by the Mayor and Council. Therefore, please **allow at least 2 months** prior to your event. Licenses will not be issued until approval by Legalized Games of Chance Control Commission!

**Complete the following information:**

1. Four copies of the application and have them notarized. **At least two officers must sign each copy of the application.** The application may be found on the Borough website: [www.dumontnj.gov](http://www.dumontnj.gov) under downloadable forms.
2. Fill in all four sections of the ticket information sheet. Fill in your **ID number** in the upper right corner. Do not fill in the **application number**; it will be assigned by the Borough.

**Raffle Fees:** one check payable to the **Borough of Dumont** and one check payable to **Legalized Games of Chance Control Commission** for each raffle.

**Return the completed application and both checks to the Borough Clerk's office.**

PLEASE BE ADVISED THAT LEGALIZED GAMES OF CHANCE CONTROL COMMISSION WILL NOT ACCEPT FAX TRANSMITTAL OF APPLICATIONS FOR APPROVAL. BE SURE TO HAVE ALL PAPERWORK IN TO THE BOROUGH CLERK'S OFFICE LEAVING YOURSELF ENOUGH TIME FOR APPROVAL BEFORE THE EVENT.

The **Report of Operations** is due by the 15<sup>th</sup> day of the month immediately following the month in which the activity was conducted and is prepared in duplicate. Mail **one** copy to **Legalized Games of Chance Control Commission**, P.O. Box 46000, Newark, New Jersey 07101 along with any additional fees and a **second** copy along with the **original license to the Borough Clerk** and any additional fees.

# 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 \_\_\_\_\_

5 Does the applicant own the premises or regularly occupy them for its general purposes? \_\_\_\_\_ Yes  
\_\_\_\_\_ No

6 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. 1

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 \_\_\_\_\_ 20\_\_\_\_.

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.