

Police Department
Baltimore, Maryland
APPLICATION FOR GAMING PERMIT
(Please Type or Print, Press Firmly)

Date of Application _____

Type of Permit Requested: Regular Bingo Annual Bingo
 Raffle Paddle/Wheel Carnival/Bazaar

Fee Enclosed: \$10.00 Check Money Order

Sponsoring Organization _____

Address _____ Telephone _____

Type of Organization _____ Tax Exempt No. _____

Name of Applicant _____

Address _____ Telephone _____

Title or position with sponsoring organization _____

List three officers of the organization (include their addresses and telephone numbers):

1. _____
2. _____
3. _____

Location (Address) of Event _____

Type of Premises _____

Date(s) of Event _____ Hours of operation _____

Describe value and type of prize(s): _____

Name, address and telephone number of person conducting the event:

State in detail the financial arrangements with the person/organization conducting the game. If a written Agreement exists, attach a copy of same:

State in detail the method by which the organization making this application determines the monies it will receive as a result of the bingo game applied for:

All permits are priced at \$10 per day per permit
Make all check or money orders out to Director of Finance

State in detail the anticipated expenses of the organization applying for this permit to be deducted from the gross receipts from the bingo patrons: _____

Has the organization previously applied for a Gaming Permit in Baltimore City?

Yes No Date of Last Application _____ Type of Permit _____

I DO HEREBY CERTIFY THAT THE INFORMATION CONTAINED ON THIS APPLICATION IS TRUE AND CORRECT UNDER THE PENALTIES OF PERJURY OF THE STATE OF MARYLAND

(Signature of Applicant)

Date

For Baltimore Police Department Use Only

Date Application Received _____

Delivered: By Mail In Person

Received by _____

Fee Received: \$10.00 \$5.00

Investigated by _____

Recommendation (Attach report, if necessary) _____

Approved:

Permit No. _____

Disapproved

By _____

Date _____

APPLICANTS

MISREPRESENTED INFORMATION EITHER KNOWINGLY OR UNKNOWINGLY SUBMITTED IN THIS APPLICATION COULD RESULT IN CRIMINAL PROSECUTION OF THE APPLICANT WHOSE SIGNATURE APPEARS ON ITS FACE.

1. ALL BOXES MUST CONTAIN THE REQUIRED INFORMATION. BE SURE TO INCLUDE NAME, ADDRESS, PHONE NUMBER AND ZIPCODE OF APPLICANT AND OFFICERS OF YOUR ORGANIZATION. NON-PROFIT EXEMPT NUMBER MUST BE INCLUDED ON APPLICATION AS PROOF OF NON-PROFIT NAME.
2. ONLY CHECKS DRAWN ON THE ORGANIZATION OR MONEY ORDERS WILL BE ACCEPTED. ABSOLUTELY NO PERSONAL CHECKS OR CASH WILL BE ACCEPTED.
3. PLEASE INCLUDE SELF ADDRESSED STAMPED ENVELOPE WITH YOUR APPLICATION.

Mail To:

Check Payable to: Director of Finance
Baltimore Police Department
Gaming Permit Unit
242 W. 29th St.
Baltimore, MD 21211
(410)396-2130