

Quick Checklist

DO

1. Make sure that the current I.D. certificate from State is brought in when submitting application for a raffle and that the I.D. number appears on application.
2. Submit 4 original applications at least three (3) weeks prior to the scheduled Township Committee Meeting (see attached list of Township Committee Meeting dates).
3. Complete Background Check Application (attached) for each name indicated on application.
4. Submit four (4) copies of sample ticket for off-premise raffles (see attached form).
5. Complete separate set of (4) raffle applications for each On-Premise draw, Off-Premise draw, and On-Premise 50/50 and Off-Premise 50/50.
6. Have an officer of the organization as well as the member in charge of the game sign all applications before a notary.
7. You may advertise or publicize raffle games of chance in any form, e.g. newspapers, radio, T.V., posters, billboards, handbills, etc. pursuant to N.J.A.C. 13:47-6.14.

DON'T

1. Offer as a prize: real estate or any interest therein, bonds, shares of stock, securities or evidence of indebtedness, weapons, live animals (except gift certificate redeemable for live, edible seafood), foreign or domestic coins (except collector pieces or sets that are marketed as such and are clearly not intended for use as legal tender), tobacco products, motor vehicle leases, cash (including American Express Gift Certificates) or and merchandise refundable in any of the foregoing or as money or cash (cash prize only allowed when a 50/50 raffle is being held).
2. Print tickets before license has been approved by the Pennsauken Township Committee and Legalized Games of Chance Control Commission.

AFTER COMPLETION AND SUBMISSION OF APPLICATION

Raffle License must be approved by resolution of the Township Committee. Therefore , the application must be received by the Township Clerk's Office a minimum of THREE WEEK PRIOR to the Township Committee Meeting (see list of dates attached). The date(s) of raffles must be at least fifteen (15) business days after Township Committee approval (Township Committee Meeting date) Raffles can not take place until the license is approved by Township Committee and issued by the Township Clerk's Office. This 15 BUSINESS DAY WAITING PERIOD after approval by the Township Committee is required by the State of New Jersey Legalized Games of Chance Control Commission to review the application.

REGULATIONS REGARDING CONDUCT OF RAFFLES

1. Each registered organization shall establish, keep and maintain a bank account in a State or Federal chartered banking institution to which only the proceeds derived from the conduct of games of chance shall be deposited and from which only payments for authorized expenses and utilization of net proceeds for authorized purposes shall be made.
2. License(s) issued must be conspicuously displayed at the place where the game of chance is being conducted at all times during the conduct of the games.
3. When a game is not held on any date when a licensee authorized it to be held, a Report of Operations to that effect shall nonetheless be filed with Legalized Games of Chance Control Commission.
4. Whenever an organization shall conduct a game of chance it shall display, adjacent to the allotment of prize(s) by chance, a sign as follows: " Is gambling a problem for you or someone in your family ? Dial 1-800-GAMBLER."

FIFTEEN (15) BUSINESS DAYS AFTER TOWNSHIP COMMITTEE MEETING

Call the Township Clerk's Office to see if raffles application has been approved by the Township Committee and Legalized Games of Chance Control Commission.

REPORT OF RAFFLES OPERATIONS

The Report of Operations must be completed and signed before a Notary and submitted to the Legalized Games of Chance Control Commission, P.O. Box 46000, Newark, NJ 07101 within 15 days of the Raffle. If Off-Premise Raffle was held, a copy of the printer's certificate together with a copy of the ticket must be attached and submitted with this report.

State of New Jersey
LEGALIZED GAMES OF CHANCE CONTROL COMMISSION
 PO BOX 46000
 Newark, NJ 07101
 973-273-8000

www.state.nj.us/lps/ca/lgccc.htm

(All state forms and applications are available on this website)

RAFFLES LICENSING FEES

OFF-PREMISE DRAW RAFFLES FOR MERCHANDISE – (“Off-premise” is one in which tickets are printed and sold in advance of the occasion of the drawing.)

<u>Amount of retail value of prizes</u>	<u>Fee to Licensing Municipality</u>	<u>Fee to Legalized Games of Chance</u>	<u>Total</u>
0 - \$1,000	\$ 20.00	\$20.00	\$40.00
\$1,000.01 - 2,000	40.00	40.00	80.00
2,000.01 - 3,000	60.00	60.00	120.00
3,000.01 - 4,000	80.00	80.00	160.00
4,000.01 - 5,000	100.00	100.00	200.00
5,000.01 - 6,000	120.00	120.00	240.00
6,000.01 - 7,000	140.00	140.00	280.00
7,000.01 - 8,000	160.00	160.00	320.00
8,000.01 - 9,000	180.00	180.00	360.00
9,000.01 - 10,000	200.00	200.00	400.00

To continue the above schedule, add a \$20.00 fee for the licensing municipality and \$20.00 fee for the State of N.J. for each additional \$1,000 retail value.

OFF-PREMISE 50/50 CASH RAFFLES – Two checks are to be submitted - \$20.00 payable to **Legalized Games of Chance Control Commission** and \$20.00 payable to the **Township of Pennsauken** at time application is submitted.

If the cash award exceeds \$1,000, the balance of the fees, according to the schedule above, is to be sent payable to **LGOCC** with Report of Raffles that must be filed and a check in the same amount sent and payable to the Township of Pennsauken.

ON PREMISE DRAW 50/50 VALUED UNDER \$400 No Fee

ON PREMISE DRAW 50/50 VALUED OVER \$400 \$20.00 to Township and \$20.00 to Legalized Games of Chance Control Commission for each day raffle held.

NON-DRAW RAFFLE \$20.00 to township and \$20.00 to Legalized Games of Chance Control Commission for each wheel or game conducted on any day or a series of six consecutive days in one week.

ON PREMISE DRAW CASINO NIGHT \$100.00 to Township and \$100.00 to Legalized Games of Chance Control Commission.

The payment of State fees is by check or money order, payable to the **Legalized Games of Chance Control Commission**.

Application for Raffles License

Application No. RA:

Insert name
of Municipality

Identification No.

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

Sample Ticket

Off Premises Merchandise Raffle

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

Stub

Ticket

<p style="text-align: center;">Name _____</p> <p style="text-align: center;">Address _____</p> <p style="text-align: center;">City State ZIP code</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Telephone Number</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">NJ LGCCC Identification# Municipal RL #</p>	<p style="text-align: center;">NJ LGCCC Identification # _____ Municipal RL # _____</p> <p style="text-align: center;">Name of Organization _____</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">List of Prizes Retail Values</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Location of Drawing _____</p> <p style="text-align: center;">Date of Drawing _____ Time of Drawing _____</p> <p style="text-align: center;">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 style="text-align: center;">_____</p>
<p>Ticket # _____</p>	<p>Price of Ticket _____ 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

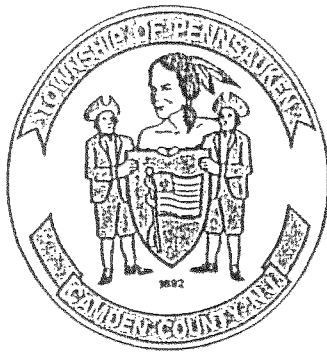
Stub

Ticket

Name _____	
Address _____	
City _____	State _____ ZIP code _____
Telephone Number _____	
NJ LGCCC Identification# _____	Municipal RL # _____
NJ LGCCC Identification # _____ Municipal RL # _____	
Name of Organization _____	

List of Prizes _____	Retail Values _____
_____	_____
_____	_____
Date of Drawing _____	Time of Drawing _____
Location of Drawing _____	
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."	
_____	_____
Price of Ticket _____	Ticket # _____

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LICENSE APPLICATION / BACKGROUND CHECK

TOWNSHIP OF PENNSAUKEN
5605 N. CRESCENT BLVD.
PENNSAUKEN, NEW JERSEY 08110

NAME _____ DATE OF BIRTH _____

ADDRESS _____

PHONE # _____ SS # _____ SEX _____ AGE _____

HAIR COLOR _____ EYE COLOR _____ WEIGHT _____ HEIGHT _____

PLACE OF BIRTH _____ U.S. CITIZEN-YES/NO _____

DRIVER LICENSE # _____	LICENSE STATE _____
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PREVIOUS ADDRESS _____

(LAST 3 YEARS) _____

BUSINESS NAME, ADDRESS, PHONES # _____

NAME OF OWNER _____ TYPE OF BUSINESS _____

LOCATION WHERE LICENSE WILL OPERATE _____

HAVE YOU EVER BEEN CONVICTED OF A CRIME, OR DISORDERLY PERSONS OFFENSE		YES _____	NO _____
IF YES, LIST	DATES _____	WHERE _____	
OFFENSE _____			

I HEREBY AUTHORIZE THE PENNSAUKEN POLICE DEPT. TO CONDUCT AN INVESTIGATION INTO MY BACKGROUND AND ACTIVITIES. ALL FACTS CONTAINED IN THE FOREGOING APPLICATION ARE TRUE AND COMPLETE.

APPLICANT SIGNATURE _____ DATE _____

APPROVED _____ DENIED _____

CHIEF OF POLICE _____