

## DIVISION OF PLANNING AND PERMITTING FREDERICK COUNTY, MARYLAND

Department of Permits and Inspections
30 North Market Street • Frederick, Maryland 21701
Phone (301) 600-2313 • Fax (301) 600-2309

### RAFFLE PERMIT APPLICATION PROCEDURES

This is an application for a permit to conduct a raffle according to Frederick County Ordinance 1-2-101 through 112. The organization operating the raffle completes the application.

Before this application will be accepted in the Frederick County Department of Permits and Inspections, the applicants must:

- 1. Fill out the application completely. Any missing items will prevent this application from being processed in a timely manner.
- 2. Attach prior record affidavits for all persons directly responsible for operating a raffle.
- 3. Attach a copy of the organization's current approved 501(c), (1), (3), (4), (5), (7), (8), (10), (19) or 501(d) Internal Revenue Tax Exempt Form.
- 4. Attach a copy of evidence of charitable purpose (i.e. organization charter, by-laws).
- 5. Attach a copy of drivers' license for each individual **directly responsible** for the operation of a raffle.
- 6. Tender the proper issuance fee at the time the application is submitted. The issuance fee for a raffle is \$58.00 per annual permit.

False, omitted, or misleading, information provided on this form will constitute grounds for voiding an issued permit.

Please type or print the application information in ink.

The completed application should be submitted to the Frederick County Department of Permits and Inspections, 30 North Market Street, Frederick, MD 21701. Our office hours are 8 AM - 4 PM. Permit applications are accepted between the hours of 8 AM -3:30 PM, Monday through Friday, except Holidays. Please allow 5-10 working days for processing. If you should have any questions concerning this application, please contact this office at 301-600-2313.

NOTE: This is an application for a permit only, NOT an approved permit!



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Permit #
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## **RAFFLE PERMIT APPLICATION**

Name of Organization					
Address		<del></del>		P.O. Box_	
Town			State	Zip Code_	
Organization Phone No.	*****	******	 ******	******	*****
CONTACT PERSON:	A copy of Driv	ver's License mu	st be attac	hed to application	
Name					
Home Address					
Town		State		_ Zip Code	
Home PhoneAre you a member of this	s Organization	Ema ?	il Address		
driver's license, must supply to Felony Convictions.  Complete name	he following info	rmation so that the S  Iale or Female	heriff's Depar	rtment can perform the r	affle permit, who does not have a required verification of Misdemeanor (last)
Date of Birth(month)	(day)	(year)			
A report, indicating all rathe year following the excomply with the Ordinan  Permit Fee of \$58.00 is r	(3) (a) & (b) al affles held during piration date of the cerequirement equired. Make	ng a calendar yea f this permit. You ts.	r and the to n must sign Si o <b>Frederick</b>	tal value of the prize that you are aware o	ith value of \$5000.00 or more. es, is due by <b>February 15</b> <sup>th</sup> of of this requirement and will
Name of Distributor you A copy of the organizatio *********	on's IRS tax Ex	kempt Determinat	tion Letter <u>i</u>		this application.
For office use only:	Fee paid	C	'heck #	Receint #	

### **RAFFLE PERMIT APPLICATION**

#### **Prior Recorded Affidavit**

I understand that I must give the Permits Office a yearly report on the raffles held under this permit. I understand that this report must be submitted on or before **February 15**<sup>th</sup> of the year following the expiration of this permit. I understand that my organization is allowed unlimited raffles in a calendar year. I understand that only **four (4)** raffle can have a value of the prize of \$5000.00 and over.

I understand that no individual may personally benefit from a raffle except for prizes awarded to participants; only one (1) major prize may be awarded at each raffle.

I do solemnly affirm under the penalties of perjury, that I have never been convicted of a felony, nor have I been convicted within the past five (5) years of a misdemeanor related in anyway to gaming or gambling. I understand this information will be verified by a representative of the Frederick County Sheriff's Office.

I also understand that I will be taking responsibility for complying with the provisions of the Gaming Ordinance. This may include, but is not limited to, annual raffle reports.

I solemnly affirm under the penalties of perjury that the contents of this application are true and correct.

		-
	Signature	
Notary Seal	Print Name	-
	Date	-
STATE OF MARYLAND, COUNTY OF FE	REDERICK, TO WIT:	
I HEREBY CERTIFIY that on this the	day of _	, 20,
before me, the Subscriber, a Notary Public in	day of and for the State and County aforesaid, personally	-,,
	known to me (or satisfactorily proven) to b	
* /	within instrument, and acknowledged the foregoing ap	plication to be
his/her act for the purposes therein contained		
Witness my hand and Seal		
	Notary Public	
	Printed Name	
	My Commission Exp	