



VILLAGE OF MOUNT PROSPECT
50 South Emerson Street Mount Prospect, IL 60056 (847) 392-6000

APPLICATION FOR RAFFLE LICENSE
(\$25.00 Application Fee)

1. Name of Applicant _____

2. Address of Applicant _____

3. If a corporation, State and Date of Incorporation:

4. Names and addresses of officers and directors of applicant (attach additional pages if necessary):

<u>Name</u>	<u>Title</u>	<u>Address</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

5. Names and addresses of all persons with a proprietary, equitable or credit interest in the applicant:

<u>Name</u>	<u>Address</u>
_____	_____
_____	_____

6. Name and address of raffle manager: _____

7. Area(s) within the Village of Mount Prospect in which raffle chances will be sold or issued:

8. Time period raffle chances will be sold or issued:
From: _____ through _____

9. Winning chance to be determined at the following location:

on the _____ day of _____ at the hour of _____.

10. Cost of each chance: _____

11. What is being raffled? What is the approximate cost of items being raffled?

12. Attach to application a copy of the fidelity bond or certification as required by Sec.11.3004.B.7 of the Village Code of Mount Prospect.

13. Two notarized signatures of organization members are required below:

STATE OF ILLINOIS)
) ss
COUNTY OF COOK)

The undersigned, _____, being duly sworn on oath states that above information is true and correct to the best of his/her knowledge and belief, the applicant is a not-for-profit organization, that it has been in existence continuously for a period of 5 years immediately to the submission of this application, that during that entire five year period it has had a bona fide membership engaged in carrying out its objectives and, that it is not ineligible for a license under section 3(5) of An Act to provide for licensing and regulating certain games of chance of the State of Illinois as it may be amended from time to time.

SUBSCRIBED and SWORN to before me

this _____ day of _____, 20____.

Notary Public

STATE OF ILLINOIS)
) ss
COUNTY OF COOK)

The undersigned, _____, being duly sworn on oath states that above information is true and correct to the best of his/her knowledge and belief, the applicant is a not-for-profit organization, that it has been in existence continuously for a period of 5 years immediately to the submission of this application, that during that entire five year period it has had a bona fide membership engaged in carrying out its objectives and, that it is not ineligible for a license under section 3(5) of An Act to provide for licensing and regulating certain games of chance of the State of Illinois as it may be amended from time to time.

SUBSCRIBED and SWORN to before me

this _____ day of _____, 20____.

Notary Public

FOR OFFICIAL USE

Application received by Village

By: _____ Application Fee: _____

Date: _____ Bond Waived: Yes No

License Granted or Denied (circle one)

By: _____

Date: _____