



Brookfield Police Department

63 Silvermine Road
Brookfield, CT 06804
203-740-4100



Application for Charitable Gaming Event: Class 3 Bazaar and Raffle

Instructions:

1. The completed form shall be submitted to Brookfield Police Department, Records **at least fifteen (15) days prior** to the start of the bazaar/raffle.
2. Applying organization must be a qualifying non-profit functioning for a minimum of six (6) months.
3. Your application must be completed, signed, and accompanied by a check or money order made payable to "Town of Brookfield," **per fees noted within the application.**

| | | | |
|---|--------------------------|---|------------------------------------|
| Name of Sponsoring Organization | | | |
| If this organization previously held a bazaar permit, list permit number: | | Federal ID Number | IRS Exempt Status Code 501(c) - |
| Street Address | City | State | Zip Code |
| Mailing Address (if different than above) | City | State | Zip Code |
| Telephone Number (with area code) | Email Address | | |
| Contact Person for this Application | Contact Telephone Number | Contact Email Address | |
| Organization Category (check only one): | | | |
| <input type="radio"/> An educational or charitable organization | | <input type="radio"/> An officially recognized organization or association of veterans of any war in which the U.S. was engaged | |
| <input type="radio"/> A civic, service, or social club | | <input type="radio"/> An officially recognized volunteer fire company | |
| <input type="radio"/> A fraternal or fraternal benefit society | | <input type="radio"/> A political party or town committee of the municipality in which the raffle is to be held | |
| <input type="radio"/> A church or religious organization | | | |

Give the names of the three (3) Designated Active Members of the sponsoring organization under whom the bazaar is to be conducted. These individuals will affix their signature to form CGR-1A. The three (3) Designated Active Members must be residents of the state of Connecticut.

| | | | |
|------------|-----------|-----------------------------------|----------------------------|
| First Name | Last Name | Telephone Number (with area code) | Date of Birth (mm/dd/yyyy) |
| First Name | Last Name | Telephone Number (with area code) | Date of Birth (mm/dd/yyyy) |
| First Name | Last Name | Telephone Number (with area code) | Date of Birth (mm/dd/yyyy) |

| | | | |
|--------------------------|-------|----------------------------|----------|
| Ranking Officer Name | Title | Date of Birth (mm/dd/yyyy) | |
| Residence Street Address | City | State | Zip Code |

Bazaar Description: Complete this section only if applying to host a bazaar. Fee is \$30 per day.

Provide the date(s) and starting and ending time(s) for each day the bazaar will be conducted:

Place Where Bazaar is to be Held:

Name of Place

Street Address

City

State

Zip Code

Types of Games and Total Number to be Operated:

Blower Ball/Cage Ball Total: _____

Teacup Raffle Total: _____

50/50 (up to 3 drawings/day) Total: _____

Other: Total: _____

If applicable, from whom are the games of chance equipment to be obtained:

Registered Dealer Name

Dealer Registration Number

Equipment Rental Fee Paid

Complete this section if hosting a raffle. Submit a sample raffle ticket.

Raffle Classification:

Class I \$ 75.00

·Max. aggregate prize total of \$15,000

·Max. time 3 months

·Allowed 1 per year

Class II \$ 25.00

·Max. aggregate prize total of \$2,000

·Max. time 2 months

·Allowed 3 per year

Class IV \$ 10.00

·Max. aggregate prize total of \$100

·Max. time 1 month

·Allowed 1 per year

Class V \$ 100.00

·Max. aggregate prize total of \$50,000

·Max. time 9 months

·Allowed 5 per year

Class VI \$ 125.00

·Max. aggregate prize total of \$100,000

·Max. time 12 months

·Allowed 5 per year

Raffle Description:

Winner Need Not Be Present

Winner Must Be Present

Cash Prize (dedicated bank account info required)

Bank Name: _____

Dedicated Bank Account #: _____

Special Tuition (bank account info required)

Bank Name: _____

Dedicated Bank Account #: _____

Other: _____

Starting Date of Sales

Drawing Date

Time of Drawing

AM
 PM

Number of Tickets to be Printed

Unit Price of Tickets to be Sold (only one price)

Place Where Drawing is to be Held:

Name of Place

Street Address

City

State

Zip Code

List the items of expense intended to be incurred or paid in connection with the holding, operating, and conducting of such bazaar, raffle or other charitable game and the names and addresses of the persons to whom, and the purposes for which, they are to be paid.

*Attach additional sheets as necessary.

| Expense (\$) | Name | Street Address | City | State | Purpose |
|--------------|------|----------------|------|-------|-------------------------|
| | | | | | Municipality Permit Fee |
| | | | | | |
| | | | | | |
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| | | | | | |

Separately list in detail all items offered as prizes in connection with such bazaar, indicate whether or not the items were donated, list the price to be paid by the organization or the retail value of any prize donated, and the names and addresses of persons from whom the items were purchased or by whom donated.

*Attach additional sheets as necessary.

| Merchandise | Donated Yes/No | Retail Value | Amt. Paid by Org. | Name | Street Address | City | State |
|-------------|----------------|--------------|-------------------|------|----------------|------|-------|
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State the specific purpose to which the entire net proceeds of such bazaar, raffle or other charitable gaming are to be devoted.

I certify, under penalty of law (Sec. 53a-157b, Class A Misdemeanor), that the information provided on this application is the truth to the best of my knowledge.

| | |
|------------------------------|------|
| Signature of Ranking Officer | Date |
|------------------------------|------|

APPLICATION IS HEREBY :

APPROVED

DENIED

DATE: _____

JOHN G. PUGLISI
CHIEF OF POLICE, BROOKFIELD, CT

**STATEMENT OF ACTIVE MEMBERS DESIGNATED BY SPONSORING ORGANIZATION UNDER WHOM
THE RAFFLE IS TO BE HELD, OPERATED OR CONDUCTED**

We, the undersigned, do hereby EACH make the following statement under the penalty of False Statement with respect to the foregoing application:

1. I am a resident of the state of Connecticut.
2. I am a bona fide active member of the sponsoring organization making this application to conduct a raffle and all statements contained in this application are true to the best of my knowledge and belief.
3. I will be responsible for the holding, operation and conduct of such raffle in accordance with the terms of the permit, the provisions of the Act, and regulations.
4. I have never been convicted of a felony.
5. I am familiar with the provisions of the Act which PROHIBIT:
 - a. The giving of cash prizes, except with an approved "Class No. 1", "Class No. 2", "Class No. 4", cow-chip, duck-race, golf ball drop ("Class No. 6" only), or frog-race raffle permit.
 - b. The giving of alcoholic beverages as prizes.
 - c. The giving of prizes redeemable for cash.
 - d. The paying of commission, salary, compensation, reward or recompense, directly or indirectly, to any person holding, operating, conducting or assisting therein in the operation of a raffle.
 - e. The promotion or operation of a raffle by other than duly qualified members of the sponsoring organization.
 - f. The giving of pay to any member for his time or effort in connection with a raffle.
 - g. The promotion, conduct or operation of a raffle by a person under the age of 18 or the permitting of same by the sponsoring organization.
 - h. The selling or promoting of the sale of raffle tickets by persons under the age of 16 years, or the permitting of the same by the sponsoring organization.
 - i. The use of funds derived from the raffle for purposes other than as stated in this application.
 - j. The paying of any monies except in reasonable amounts for goods, wares and merchandise furnished or services rendered which are necessary for the operation of a raffle.
6. I am familiar with the provisions of the Act which:
 - a. Provide that each raffle ticket shall have printed thereon the time, date and place of the raffle, the three most valuable prizes to be awarded and the total number of prizes to be awarded.
 - b. Require all proceeds from cash prize raffles to be deposited in a special checking account established and maintained by the sponsoring organization, and all raffle expenses and cash prizes awarded shall be paid from such account.
 - c. Require all proceeds from special tuition raffles to be deposited in an approved dedicated bank account and all raffle expenses shall be paid from such account.
 - d. Make mandatory the immediate revocation of a permit to conduct a raffle for a violation of the provisions of the Bazaar or Raffle Act, and which provide that an organization whose permit has been revoked for a violation shall not be granted another permit for a period of three years.
 - e. Provide a fine of not more than one thousand dollars or imprisonment for not more than one year or both for a violation of the Act.

| PRINTED NAMES AND SIGNATURES OF DESIGNATED ACTIVE MEMBERS: | | |
|--|---------------------|---------------------|
| NAME (Please print) | NAME (Please print) | NAME (Please print) |
| 1. | 2. | 3. |
| SIGNATURE AND DATE | SIGNATURE AND DATE | SIGNATURE AND DATE |