

Signature (Member in Charge)

Ranking Officer:

## TOWN OF GUILFORD POLICE DEPARTMENT

400 Church Street - Guilford, Connecticut 06437 Tel. (203) 453-8061 Fax (203) 453-8473

www.guilfordpd.com

## Renewal Request for Bingo Permit #\_ From: January 1, \_\_\_\_\_ To: December 31, \_\_\_\_\_ To renew this permit, complete this renewal request and return with a check from your Special Bingo Bank Account in the amount of \$75.00 made payable to "Guilford Police Department" 400 Church St, Guilford, CT 06437 Location Where Bingo will be Played: **Mailing Address: Organizational Information** Day Bingo is Conducted: Special Bank Account #: Time Doors Open to the Public: Name of Bank: Time Sale of Cards Begins: Maximum Capacity: Time Bingo Games Will Commence: Time Bingo Games Will End: Questions 1) Has the location where you conduct bingo games changed? Yes No If yes, indicate the new address below. 2) Has the Member in Charge changed since your last application? Yes No If yes, indicate the information below. Name: **Signatures** Member in Charge:\_\_\_\_\_ Email: Telephone #: ( ) I, the undersigned Member in Charge of the subject organization, do hereby state that I will be responsible for the holding, operation and conduct of all Bingo sessions in accordance with the terms of the permit and the provisions of the Bingo law and the administrative regulations governing Bingo.

affirm that all information, statements, attachments, etc., submitted or contained herein are true, complete and current.

Signature

Print Name

Date

Renewal Approved: Yes No Date:\_\_\_\_\_\_ Signed:\_\_\_\_\_\_\_

I, the undersigned ranking officer of the subject organization, do hereby state I have read the foregoing Bingo permit renewal application and

**Print Name** 

Date

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