

VILLAGE OF ORLAND PARK
14700 RAVINIA AVENUE
ORLAND PARK, IL 60462

2014
APPLICATION FOR LICENSE TO SELL
RAFFLE TICKETS
(This is a two-sided application)

(To be completed by Village staff)

Date Approved: _____

Date Denied: _____

Approval: _____
Village Clerk

Expires: _____

APPROVED APPLICATION
SERVES AS LICENSE

PLEASE NOTE: Any misrepresentation or falsification of the information sought below may result in revocation of the License as granted. **Applications must be submitted at least 30 days prior to the raffle date requested.** For information or questions, please call (708) 403-6150.

~Each license is valid for not more than 1 raffle per week during any 1 year period.~

NAMES OF UNDERSIGNED ORGANIZATION OFFICERS
(PERSONS SUBMITTING APPLICATION)

DATE OF APPLICATION: _____

PRESIDENT OR PRESIDING OFFICER: _____

SECRETARY: _____

ADDRESS OF APPLICANT: _____

ORGANIZATION
REQUESTING LICENSE: _____

ADDRESS OF ORGANIZATION: _____

NAME AND ADDRESS
OF RAFFLE
MANAGER: _____

PHONE _____

ADDRESS OF PLACE(S) OR AREA(S) WHERE CHANCES ARE TO BE SOLD OR ISSUED: _____

PURPOSE OF RAFFLE: _____

TIME PERIOD WHICH RAFFLE CHANCES WILL BE SOLD OR ISSUED: _____

MAXIMUM NUMBER OF RAFFLE CHANCES TO BE SOLD OR ISSUED: _____

PRICE OF CHANCES: _____

TOTAL PRIZE VALUE: _____

split the pot LARGEST
SINGLE PRIZE: _____

TIME, DATE AND LOCATION WHERE WINNING RAFFLE CHANCE WILL BE DETERMINED: _____

Evening 6-1-14
Time *Before 9pm*

same as above
Location of Raffle Drawing (Address, City, State)

OVER

CHECK TYPE OF NON-PROFIT ORGANIZATION AND ATTACH DOCUMENTATION

Religious _____ Charitable X Labor _____ Fraternal _____ Business _____

Educational _____ Veterans' Organization _____ *Non-Profit Fund Raising X

*(check this box if organized solely to raise funds for an individual or group of individuals suffering extreme financial hardship, as a result of illness, disability, accident or disaster)

LENGTH OF TIME ORGANIZATION HAS BEEN IN EXISTENCE: 50 yrs.

PLACE AND DATE OF INCORPORATION OF ORGANIZATION: _____

IF NOT A CORPORATION, STATE WHEN AND HOW ORGANIZED: _____

NUMBER OF MEMBERS OF ORGANIZATION THAT RESIDE IN VILLAGE: 50

The undersigned, under oath attest that we have read and understand Ordinance #3480 entitled "An ordinance of the Village of Orland Park establishing a system for the licensing of organizations to operate raffles" and we further attest to the non-profit character of the prospective license organization.

Further the undersigned attest that they comply with all provisions of Ordinance #3480 and understand that violations of this ordinance are subject to fines of not less than one-hundred dollars (\$100.00) and not more than seven-hundred-and-fifty dollars (\$750.00) per violation.

President or
Presiding Officer

Type or Print Name

Kathy Jenton

Signature:

Kathy Jenton

ATTEST:

Secretary:

Type or Print Name

Jennifer Wlodarski

Signature:

SUBSCRIBED AND SWORN TO

before me this 5th

day of May, 2014.

Nancy R. Melinauskas
(Notary Public)

Commission Expires: Aug 30, 2014

