



**APPLICATION FOR SACRAMENTO COUNTY BINGO LICENSE
CHARITY LICENSE FEE • \$50.00**

SACRAMENTO COUNTY SHERIFF'S OFFICE
4500 Orange Grove Avenue, Sacramento, CA 95841
SIIB@SACSHERIFF.COM

LICENSE NUMBER _____

EXPIRATION DATE _____

COMPLIANCE OFFICER APPROVAL _____

PLEASE DO NOT WRITE ABOVE THIS LINE

Organization _____ Telephone Number _____

State Tax Exempt Number _____ State Tax Exemption Type _____

Organization Address (Street, City, State, Zip Code) _____

Mailing Address (Street, City, State, Zip Code) _____

Address of Bingo Premises (Street, City, State, Zip Code) _____

Bingo Premises _____

Owned _____ Leased/Rented _____ Donated _____ Occupancy Capacity _____

If leased/rented, period of agreement: From _____ To _____

Proposed Game Schedule - Days and Hours of Play _____

Organization's current use of bingo premises _____

Specific Charitable purpose(s) which bingo proceeds will benefit _____

NAME AND SIGNATURE OF MEMBER OF ORGANIZATION WHO WILL BE PRIMARILY RESPONSIBLE FOR CONDUCTING BINGO GAMES:

Name _____ Date of Birth _____ Driver's License Number _____

Address (Street, City, State, Zip Code) _____ Telephone Number _____

Home

Work

Signature _____ Date _____

**PLEASE COMPLETE REVERSE SIDE
IMPORTANT INSTRUCTIONS ON REVERSE SIDE**

SACRAMENTO COUNTY BINGO LICENSE APPLICATION

I DECLARE UNDER PENALTY THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

1. I have received the Bingo Handbook (9th edition) and understand the bingo regulations issued by the Sheriff.
The most recent edition of the Bingo Handbook can be found online at: <https://www.sacsheriff.com/pages/bingo.php>
2. The applicant organization will conduct all bingo games in strict accordance with the provisions of Section 326.5 of the California State Penal Code, the provisions of Chapter 4.26 of the Sacramento County Code and any rules or regulations promulgated thereunder and consents to inspection of the bingo premises and of the accounting records, bank account, and other documents relating to financial transactions and/or arrangements of the applicant or licensee with respect to the conducting, operating, or staffing of any bingo game(s) by authorized Sheriff representative(s).

Signatures of two current officers of the organization (including presiding officer) authorized to execute this application.

Print Name	Title	Telephone Number
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Signature	Date
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Print Name	Title	Telephone Number
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Signature	Date
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THE FOLLOWING INFORMATION SHALL BE SUBMITTED WITH THE APPLICATION

1. Copy of articles of incorporation, constitution, and other rules of operation.
2. Copy of resolution adopted by the organization authorizing the filing of application for bingo license.
3. Copy of State Franchise Tax Exemption.
4. Roster of current officers and directors (name, title, address, telephone number, and date of birth).
5. Name, address, telephone number, and date of birth of each applicant organization member who will staff bingo.
6. If premises where bingo is to be played are not owned, a copy of the lease must be submitted.
7. Written statement from the local Fire District indicating the occupancy capacity of the room in which bingo is to be played.
8. Floor plan layout of room where bingo will be played.
9. Detailed description of record system to account for proceeds, prizes, expenses, and profits.
10. Special Bank Account information (persons responsible for check book, name and address of bank, account number, and persons authorized to sign checks).
11. Copy of the rules of the bingo game(s) which applicant intends to use.
12. A detailed schedule of bingo games to be played.
13. A statement of your plan to meet the American Disability Act (ADA) requirements; be specific as it pertains to live caller bingo and the sale of pulltabs.

IN ADDITION TO THE ABOVE, upon issuance of any license pursuant to this application, the licensee shall submit to the Sheriff any change in the information submitted on or with this application immediately upon its occurrence.