



98 East Third Street, Manteno, IL 60950
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**VILLAGE OF MANTENO
RAFFLE LICENSE APPLICATION**

Date _____

Name of Organization: _____

Address: _____

Contact Person: _____ Phone #: _____

E-Mail Address: _____

Dates of Raffle or Raffles for a one (1) year period:

Raffle Manager or Managers Name & Phone Number: _____

Where within the village limits will raffle chances be sold or issued:

Time period raffle chances will be sold:

Where and when will the winners of the raffles be determined: _____

CERTIFICATION

The undersigned hereby certifies the following:

1. This organization is a bona fide nonprofit business, religious, charitable, labor, fraternal, educational or veterans organization which has been in existence continuously for a period of five years immediately before making application for this raffle license, has had during that entire five-year period a bona fide membership engaged in carrying out their objects and is qualified to hold this raffle license under the provisions of the Village code;
2. None of the officers, directors or employees of this organization, the raffle manager, or any other person with a proprietary, equitable or credit interest in this organization, whether compensated or not, have been convicted of a felony, have been a professional gambler or gambling promoter, or are not of good moral character;
3. All the information contained in this application is true, correct and complete;
4. I have received a copy of Title 3, Business Regulations, Chapter 20, Raffles and understand the provisions of Section 3-20-6, 3-20-8 and 3-20-9 regarding the conduct of raffles, recording keeping and additional restrictions as related to raffles; and
5. I have attached a copy of the fidelity bond for the Raffle Manager in an amount determined by the Village Clerk as required in Section 3-20-7 of the Village Code **or** I have attached a request for a waiver of this bond, which waiver was approved by unanimous vote of the members of this organization (*See Exhibit A attached*).

Information of person filling out application:

Name _____ Phone _____

E-Mail Address _____

Address _____
(P.O. Box or Street Address) (City) (State) (Zip)

Signature

Include the following:

- \$25 per year fee
- Flyer of the raffle, if available.
- Fidelity Bond for Raffle Manager (*Village Clerk may waive bond if the organization provides proof that a unanimous vote of the members of the licensed organization was taken and they approved the waiver of the raffle manager's bond.*)

For Office Use:

Approved by: _____

Date: _____

EXHIBIT A

Request for Waiver of Raffle Manager's Bond:

I, _____ (*name of applicant*) request that a waiver of the Raffle Manager's Bond be given to our organization. I further submit that a unanimous vote of our members approved the waiver of the raffle manager(s) bond at a meeting held on _____ (*date of meeting*).