



VILLAGE OF BROOKFIELD
RAFFLE PERMIT APPLICATION

NAME OF ORGANIZATION: _____

APPLICANT: _____

DRIVERS LICENSE NUMBER: _____

ADDRESS: _____

PHONE: _____ E-MAIL: _____

TYPE OF ORGANIZATION

Non-Profit Charitable Educational Business Other

AREAS WHERE CHANCES WILL BE SOLD? _____

DATES OF CHANCE SALES (NOT TO EXCEED 180 DAYS):

DATE, TIME AND LOCATION OF RAFFLE DRAWING:

Will the retail value of all prizes or merchandise awarded by a license in a single Raffle exceed \$1,000,000? _____

Will the maximum retail value of any prize in a single raffle exceed \$50,000? _____

Will the maximum price for each chance or ticket for the raffle exceed \$1,000? _____

I/ undersigned affirm that the above statements are true; that I am authorized to sign this document on behalf of this organization; that I am familiar with and agree to abide by the Ordinance of the Village of Brookfield which apply to raffles; and that I understand that the violation of the ordinance may result in suspension or revocation of this license as well as other penalties as provided by the ordinance. At the conclusion of the raffle, this organization will report to the Village of Brookfield it's gross receipts, expenses and net proceeds and distribution of said net proceeds. I attest to the not-for-profit charter of the above organization.

Raffle Permit Fee \$50.00

APPLICANT : _____

DATE: _____

VILLAGE MANAGER: _____

DATE APPROVED: _____