

INSTRUCTIONS:

- A ranking officer of the sponsoring organization must fill out this form in duplicate. The completed form shall be submitted to the Chief of Police/First Selectman of the municipality where the bazaar/raffle is to be held at least 22 1/2 business days prior to such bazaar/raffle.
- The Chief of Police/First Selectman shall forward the original copy to the Department of Consumer Protection, **165 Capitol Ave., Hartford, CT 06106**, at least 1/2 business days prior to the effective date of the bazaar or raffle.

ORGANIZATION IDENTIFICATION NUMBER	TYPE AND CLASS OF PERMIT DESIRED	PERMIT NUMBER (To Be Assigned By Consumer Protection)	
NAME OF SPONSORING ORGANIZATION			TELEPHONE NUMBER
ADDRESS OF SPONSORING ORGANIZATION (No. and Street)		(City or Town)	(State) (Zip Code)
MAILING ADDRESS (No. and Street)		(City or Town)	(State) (Zip Code)

CHECK ORGANIZATION CATEGORY (Check only ONE)

- | | |
|--|--|
| 1 <input type="checkbox"/> An educational or charitable organization
2 <input type="checkbox"/> A civic, service or social club
3 <input type="checkbox"/> A fraternal or fraternal benefit society
4 <input type="checkbox"/> A church or religious organization | 5 <input type="checkbox"/> An officially recognized organization or association of veterans of any war in which the U.S. was engaged
6 <input type="checkbox"/> An officially recognized volunteer fire company
7 <input type="checkbox"/> A political party or town committee of the municipality in which the bazaar or raffle is to be held |
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IS ORGANIZATION NONPROFIT? <input type="checkbox"/> YES <input type="checkbox"/> NO	If yes, attach a copy of the determination letter from the IRS confirming the organization's exempt status.	Has organization been functioning as a nonprofit in the municipality in which the permit is requested for at least six months? <input type="checkbox"/> YES <input type="checkbox"/> NO
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Under which section of the Tax Exempt Status Code of the IRS is this organization recognized?	What is the sponsoring organization's IRS Employer Identification Number?	DATE ORGANIZED OR INCORPORATED
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LIST OF OFFICERS OF SPONSORING ORGANIZATION

TITLE	NAME <small>(First, Middle, Last)</small>	ADDRESS <small>(No., Street, City or Town, State, Zip)</small>	DATE OF BIRTH <small>(Mo., Day, Yr.)</small>

RAFFLE

GIVE THE DATES AND TIME WHEN THE RAFFLE IS TO BE CONDUCTED _____ A.M.

COMMENCING DATE:	TERMINATING DATE:	TIME OF DRAWING:
PLACE WHERE DRAWING IS TO BE HELD (Name of Place)	(No. and Street)	(City or Town) (State) (Zip Code)

Is the container owned absolutely by the sponsoring organization? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF NO: Container Is To Be <input type="checkbox"/> Rented <input type="checkbox"/> Borrowed	CONTAINER RENTAL FEE PAID \$
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FROM WHOM IS THE CONTAINER TO BE OBTAINED? (Name) (No. and Street) (City or Town) (State) (Zip Code) DEALER REGISTRATION NUMBER

NUMBER OF TICKETS TO BE PRINTED	UNIT PRICE OF TICKETS TO BE SOLD	DESCRIBE THE KIND OF RAFFLE TO BE CONDUCTED
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BAZAAR

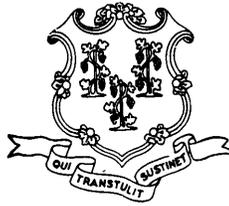
GIVE THE DATE(S) AND TIME(S) FOR **EACH DAY** THE BAZAAR IS TO BE CONDUCTED _____

PLACE WHERE THE BAZAAR IS TO BE CONDUCTED (Name of Place) (No. and Street) (City or Town) (State) (Zip Code)

NUMBER OF GAMES OF CHANCE TO BE USED	DESCRIBE THE KIND OF BAZAAR TO BE CONDUCTED
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Is the equipment owned absolutely by the sponsoring organization? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF NO: Equipment Is To Be <input type="checkbox"/> Rented <input type="checkbox"/> Borrowed	EQUIPMENT RENTAL FEE PAID \$
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FROM WHOM ARE THE GAMES OF CHANCE TO BE OBTAINED? (No. and Street) (City or Town) (State) (Zip Code) DEALER REGISTRATION NUMBER



Date: _____

STATEMENT OF ACTIVE MEMBERS DESIGNATED BY SPONSORING ORGANIZATION UNDER WHOM THE BAZAAR OR RAFFLE IS TO BE HELD, OPERATED OR CONDUCTED

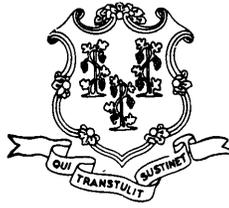
We, the undersigned, do hereby EACH make the following statement under the penalty of False Statement with respect to the foregoing application:

1. "Ua 'UfYgJXYbhcZH Y'GHY'cZ7 cbbYWjW H'
2. I am a bonafide active member of the sponsoring organization making this application to conduct a bazaar or raffle, and all statements contained in this application are true to the best of my knowledge and belief.
3. I will be responsible for the holding, operation and conduct of such bazaar or raffle in accordance with the terms of the permit, the provisions of the Act, and regulations of the Commissioner of the Department of Consumer Protection.
4. I have never been convicted of a felony.
5. I am familiar with the provisions of the Act which PROHIBIT:
 - a. The giving of cash prizes, except with an approved "fifty-fifty" coupon game, or a "Class No. 1", "Class No. 2" or "Class No. 4" traditional, cow-chip, duck-race or frog-race raffle permit.
 - b. The giving as prizes, alcoholic liquor.
 - c. The giving of prizes redeemable for cash.
 - d. The paying of commission, salary, compensation, reward or recompense, directly or indirectly, to any person holding, operating, conducting or assisting therein in the operation of a bazaar or raffle.
 - e. The advertising of a bazaar or raffle as to location, time when it is to be held, or has been held, or prizes awarded or to be awarded, by means of television, sound truck or billboard.
 - f. The erection at the location of the bazaar or raffle of more than one sign, which shall be no larger than 12 square feet.
 - g. The promotion or operation of a bazaar or raffle by other than duly qualified members of the sponsoring organization.
 - h. The giving of pay to any member for his time or effort in connection with a bazaar or raffle.
 - i. The promotion, conduct or operation of a bazaar or raffle by a person under the age of 18 or the permitting of same by the sponsoring organization.
 - j. The selling or promoting of the sale of raffle tickets by persons under the age of 16 years, or the permitting of the same by the sponsoring organization.
 - k. The use of funds derived from the bazaar or raffle for purposes other than as stated in this application.
 - l. The paying of any monies except in reasonable amounts for goods, wares and merchandise furnished or services rendered which are necessary for the operation of a bazaar or raffle.
6. I am familiar with the provisions of the Act which:
 - a. Provide that each raffle ticket shall have printed thereon the time, date and place of the raffle, the three most valuable prizes to be awarded and the total number of prizes to be awarded.
 - b. Require all proceeds from cash prize raffles to be deposited in a special checking account established and maintained by the sponsoring organization, and all raffle expenses and cash prizes awarded shall be paid from such account.
 - c. Require all proceeds from special tuition raffles to be deposited in a dedicated bank account approved by the Commissioner of Consumer Protection, and all raffle expenses shall be paid from such account.
 - d. Make mandatory the immediate revocation of a permit to conduct a bazaar or raffle for a violation of the provisions of the Bazaar or Raffle Act, and which provide that an organization whose permit has been revoked for a violation shall not be granted another permit for a period of three years.
 - e. Provide a fine of not more than one thousand dollars or imprisonment for not more than one year or both for a violation of the Act.

PRINTED NAMES AND SIGNATURES OF DESIGNATED ACTIVE MEMBERS:

NAME (Please print)	NAME (Please print)	NAME (Please print)
1.	2.	3.
SIGNATURE OF DESIGNATED ACTIVE MEMBER NO. 1	SIGNATURE OF DESIGNATED ACTIVE MEMBER NO. 2	SIGNATURE OF DESIGNATED ACTIVE MEMBER NO. 3

APPLICATION IS HEREBY <input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED	DATE (Mo., Day, Yr.)	SIGNATURE OF CHIEF OF POLICE OR FIRST SELECTMAN
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INSTRUCTIONS

1. Print or type. Prepare in duplicate.
2. One copy is to be retained by the municipality. The Chief of Police/First Selectman must mail the completed form to the Department of Consumer Protection, 165 Capitol Ave., Hartford, CT 06106.

TO: DEPARTMENT OF CONSUMER PROTECTION	PERMIT NUMBER <i>(To Be Assigned By Department of Consumer Protection)</i>
NAME OF SPONSORING ORGANIZATION <i>(No. and Street)</i>	<i>(City or Town)</i> <i>(State)</i> <i>(Zip Code)</i>

GAMES OF CHANCE TO BE OPERATED

TYPE	NUMBER TO BE OPERATED	DESCRIPTION <i>(explain how the game is played and list the type of prizes to be awarded)</i>
BLOWER BALL GAME <i>(cash prizes up to \$50 per wager or merchandise prizes)</i>		
CAGE BALL GAME <i>(merchandise prizes)</i>		
"FIFTY-FIFTY" COUPON GAME <i>(single cash prize of 50% of proceeds)</i>		
TEACUP RAFFLE <i>(merchandise prizes or gift certificates)</i>		
OTHER GAMES OF CHANCE <i>(merchandise prizes)</i>		

TOTAL NUMBER TO BE OPERATED:	TOTAL NUMBER OF MEMBERS OPERATING GAMES OF CHANCE EQUIPMENT:
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****INSTRUCTIONS TO COMPLETE A BAZAAR APPLICATION****

Please complete each section on the Application for a Permit to Conduct a Bazaar or Raffle (CGR-2) form, the Statement of Active Members (CGR-2A) form, and the Bazaar Activity/Worker Sheet (CGR-2B) form. A step-by-step set of instructions is listed below in order to ensure proper completion of the forms. Please keep in mind that a bazaar event only encompasses games of chance and not games of skill.

APPLICATION FOR A PERMIT TO CONDUCT A BAZAAR OR RAFFLE (CGR-2)

1. Provide the seven (7) digit organization identification number previously assigned the sponsoring organization by the Department (if any).
 2. Specify the type and class of permit desired.
EXAMPLE: Class No. 3 Bazaar.
 3. Provide a complete name and address (number, street, city/town, state, zip) of the sponsoring organization.
 4. Provide a telephone number.
 5. Provide a complete mailing address (number, street, city/town, state, zip) of the sponsoring organization.
 6. Check one of the seven (7) categories that best suits your organization.
 7. Indicate if the organization is nonprofit and if the organization has been functioning as nonprofit in the municipality in which the permit is requested for at least six months.
Note: If the answer to these questions is yes, attach a copy of the determination letter from the IRS confirming the organization's exempt status.
 8. Answer the question "Under which section of the Tax Exempt Status Code of the IRS is this organization recognized?".
 9. Answer the question "What is the **sponsoring organization's** IRS Employer Identification Number?".
 10. Provide the date your organization was organized or incorporated.
 11. Provide the title, complete name (first, middle, last), complete home address (number, street, city/town, state, zip) and a complete date of birth (month, day, year) for each officer of the sponsoring organization.
- The section titled "Raffle" should be marked as not applicable (N/A) since this is an application for a Bazaar permit. Note: If an organization requires both a raffle permit and a bazaar permit, separate application forms must be filed.**
12. Provide the date(s) (month, day, year), along with the commencing time and terminating time (including a.m. or p.m.), for each day the bazaar is to be conducted.
 13. Provide a complete address of the place where the bazaar is to be held (name of place, number, street, city/town, state, zip).
 14. Provide the total number of games of chance to be used.

Sample Bazaar Application Instructions

15. Describe the kind of bazaar to be conducted. Depending upon the type of prizes to be awarded, descriptions of the kind of bazaar to be conducted would include “*Merchandise and cash prizes awarded through means of chance*”, “*Merchandise prizes awarded through means of chance*” or “*Cash prizes awarded through means of chance*”.
16. Indicate if the equipment is owned absolutely by the sponsoring organization and, if not, indicate if the equipment is to be rented or borrowed. If the equipment is to be rented, the equipment rental fee to be paid must be provided.
17. If the equipment is to be rented or borrowed, a complete name and address (name, number, street, city/town, state, zip) of the equipment dealer/organization from whom the equipment is to be obtained must be provided. If the equipment is to be rented, it must be rented from a Bazaar and Raffle Equipment Dealer that is registered with the Department of Consumer Protection, and the equipment rental fee paid and dealer’s registration number must be provided.
18. The expense section must be completed by listing the monetary cost of the expenses intended to be incurred or paid in connection with the holding, operating and conducting of the bazaar, **COMPLETE** names and addresses (number, street, city/town, state, zip) of the persons to whom the expenses are to be paid, and the purposes for which they are to be paid.
Note: Expenses such as the permit fees, equipment rental fee, 50/50 coupon game or teacup raffle tickets, and any prizes purchased by the organization must be listed as well.
19. The merchandise section must be completed by:
 - **SEPARATELY** listing all items of merchandise offered as prizes at the bazaar
 - indicating “Yes” or “No” as to whether or not the items of merchandise were donated
 - providing the retail value of all donated items
 - providing the amount paid for items purchased by the organization
 - providing a **COMPLETE** name and address (number, street, city/town, state, zip) from whom the items of merchandise were purchased or by whom donated
20. State the specific purpose to which the entire net proceeds of the bazaar are to be devoted and in what manner.
21. Give the complete name, complete home address (number, street, city/town, state, zip), date of birth (month, day, year) and telephone number for each of the three Designated Active Members, and provide the name of the city or town in which each is an elector.
Note: The three Designated Active Members **MUST** be residents of the State of Connecticut and they must be at least eighteen years of age.
22. A ranking officer of the sponsoring organization must sign his/her name, provide his/her title, and date the form.
Note: Only individuals listed in the “List of Officers of Sponsoring Organization” section on this application are recognized as officers and may sign as a ranking officer.
23. This form will be approved or denied, dated and signed by the Chief of Police/First Selectman upon submittal of the form by your organization to the appropriate office.

STATEMENT OF ACTIVE MEMBERS (CGR-2A)

1. Provide the date the three Designated Active Members complete the form.
2. Indicate the Designated Active Members are residents of the State of Connecticut.
3. The three Designated Active Members listed on the CGR-2 application must read the information provided on the CGR-2A application, print their names in the designated areas and affix their signatures to the form.
4. This form will be approved or denied, dated and signed by the Chief of Police/First Selectman upon submittal of the form by your organization to the appropriate office.

ALLOWABLE BAZAAR PRIZES

All prizes given at a bazaar shall be **merchandise**. There is an exception, however, which provides for cash awards for **only** two specific types of bazaar games, which are the “fifty-fifty” coupon game and the blower ball cash game. Any organization conducting a bazaar may operate three “fifty-fifty” coupon drawings each day of a permitted bazaar event and may award cash prizes of fifty percent of “fifty-fifty” coupon game sales for each coupon drawing conducted. Blower ball games were already approved for use with merchandise prize awards; however, the law now allows for cash prizes up to \$50.00 each to be awarded, as well. These are the only exceptions that have been made with respect to the type of prizes that may be awarded at a bazaar. Therefore, any qualifying organization that has obtained a bazaar permit **may only award merchandise prizes for every other permissible bazaar game**.

BAZAAR ACTIVITY/WORKER SHEET (CGR-2B)

1. Provide a **complete** name and address of the sponsoring organization (the same name as it appears on your CGR-2 application form).
2. Provide the number of games of chance equipment to be operated, describe the type of games of chance to be operated, and list the prize(s) to be awarded at each games of chance booth.
3. Provide the total number of games of chance to be operated.
4. Provide the total number of members of the sponsoring organization to operate the games of chance equipment.
Note: Only bonafide, active members of a sponsoring organization who are eighteen years of age or older may operate games of chance equipment.

If clarification or further information is needed in regard to the application forms, please do not hesitate to contact the Department at (860) 713-6140.