



PALMDALE

a place to call home

BINGO PERMIT APPLICATION

Business Name: _____

(If a Corporation, the name shall be as set forth in its Articles of Incorporation)

Business Address: _____

Business Telephone number: _____

If a corporation, the names and addresses of all directors, any stockholder holding ten (10%) percent or more of the shares, and the name and address of an officer who is duly authorized to accept service of legal process. If the applicant is a partnership, the names, addresses and telephone numbers of each general partner. If one of the partners is a corporation, see above requirements.

List the nature of the organization and a statement that the applicant is an eligible organization as defined by PMC Section 5.04.430:2: _____

Please list the **exact location and occupancy capacity** where Bingo games are proposed to be held (list if the maximum number of players at any one time will be more than 100): _____

Bingo game day (s) of the week and hours: _____

The name(s), home addresses and telephone numbers of the person(s) directly responsible for operation of the Bingo games (Bingo Managers) and date they became members of the organization (Indicate who are callers or assistant callers): _____

Description of the record system to account for receipts, prizes, expenses and profits of each Bingo game: _____

OFFICE USE ONLY

Received: \$ _____ Date: _____

Receipt: # _____

Los Angeles County Sheriff's Department: _____
Signature Date

Director of Planning: _____
Signature Date