

- BINGO -

INSTRUCTIONS

CLASS B LICENSE RENEWAL APPLICATION

Pinellas County Code, Chapter 10 requires persons or organizations holding a Class B Bingo License to renew the license 60 days prior to expiration of the current license. If the renewal is not completed prior to the expiration date of the current license, any conduct of bingo by the property after the expiration date will be considered unlawful.

You must complete a renewal application and submit a financial report showing income, expense, and distribution of funds from leasing or renting the property for bingo activity over the previous 12 months.

The financial report you send must be certified as accurate by a senior representative of the organization, and it must be notarized.

For questions about this application, call the Department of Justice & Consumer Services at (727) 464-6200 fax (727) 464-6129. For questions about interpretation of the code or its applicability, contact the County Attorney's Office at (727) 464-3354. For complaints regarding the operation of a bingo game, contact the Pinellas County Sheriffs Office at (727) 582-6200.

The Class B License does not authorize the license holder to conduct bingo. That requires a Class A License. The annual fee is \$325: \$50 non refundable application fee and the remainder (\$275) payable upon arrival of the application. There is a background fee of \$30.00 for each individual listed on page 2 of the application. Checks or money orders should be made payable to the Board of County Commissioners.

Florida Statutes, Section 849.0931, should be read and understood before conducting bingo. Nothing in Pinellas County Code, Chapter 10 relieves any individual or organization from compliance with State law.

1. APPLICANT ORGANIZATION INFORMATION:

Organization legal name: _____

Organization Fictitious Name: _____

Additional names used: _____

Physical Address: _____

City: _____ State: _____ Zip: _____

Telephone:() _____ Fax #: () _____

E-Mail Address: _____

2. LICENSE NUMBER of license you are renewing: _____

3. IS THE APPLICANT A:

Corporation _____ Unincorporated _____ Partnership _____ Individual _____

4. PROPERTY BEING LEASED OR RENTED for the conduct of bingo:

Property Name: _____

Physical Address: _____

City: _____ State: _____ Zip: _____

Telephone (Home): _____

5. Property Owners Name and Address (if applicant is not the owner):

Or, Corporate Owner's Name: _____
Last Name: _____ First Name: _____ Middle Initial: _____
Date of Birth: _____ Sex: _____ Race: _____ Telephone: () _____
Residence Address: _____ Apt/Lot#: _____
City: _____ State: _____ Zip: _____

6. Applicants Officers, as applicable (give full legal name)

President/First Officer

Last Name: _____ First Name: _____ Middle Initial: _____
Date of Birth: _____ Sex: _____ Race: _____ Telephone: () _____
Residence Address: _____ Apt/Lot#: _____
City: _____ State: _____ Zip: _____

Vice President/Second Partner

Last Name: _____ First Name: _____ Middle Initial: _____
Date of Birth: _____ Sex: _____ Race: _____ Telephone: () _____
Residence Address: _____ Apt/Lot#: _____
City: _____ State: _____ Zip: _____

Secretary/Third Partner

Last Name: _____ First Name: _____ Middle Initial: _____
Date of Birth: _____ Sex: _____ Race: _____ Telephone: () _____
Residence Address: _____ Apt/Lot#: _____
City: _____ State: _____ Zip: _____

Treasurer/Fourth Partner

Last Name: _____ First Name: _____ Middle Initial: _____
Date of Birth: _____ Sex: _____ Race: _____ Telephone: () _____
Residence Address: _____ Apt/Lot#: _____
City: _____ State: _____ Zip: _____

Executive Director/Chief Operating Officer

Last Name: _____ First Name: _____ Middle Initial: _____
Date of Birth: _____ Sex: _____ Race: _____ Telephone: () _____
Residence Address: _____ Apt/Lot#: _____
City: _____ State: _____ Zip: _____

12. CERTIFICATION BY AN AUTHORIZED OFFICER OR PERSON:

“I affirm the completeness and accuracy of the application and its attachments: that no information affecting license issuance has been withheld. I understand that a misstatement or omission of material fact can result in application denial, or cancellation, suspension, or revocation of an issued license. I have read and understand Section 849.0931, Florida Statutes and Pinellas County Code, Chapter 10. I agree to update the list of volunteers when the person named thereon are changed.”

Last Name: _____ First Name: _____ M.I. _____

Residence Address: _____

City: _____ State: _____ Zip: _____

Official signature (sign before a notary): _____

13. NOTARY CERTIFICATION:

The foregoing instrument was acknowledge before me this _____ day of _____, 20 _____ by _____, who is personally known to me or who has produced _____ as identification and **DID TAKE AN OATH.**

Notary Signature & Seal: _____

Notary Print Name: _____

Notary Address: _____

City: _____ State: _____ Zip: _____ Telephone #: _____

14. REQUIRED ATTACHMENTS.

(a) If the applicant is a corporation, evidence the corporation is in good standing. Send a copy of an updated charter, available from the Department of State for a fee, or, send a copy of BOTH SIDES of the check used to pay this year’s annual filing fee to the Dept. of State.

(b) If the applicant is not the owner of the premises to be used for the conduct of bingo, evidence that the premises are leased by the applicant for a period of one (1) year, including a copy of the executed lease, sublease, assignment, or rental agreement for the premises.

(c) A financial report, showing the gross revenue, sources and amounts and disbursements derived from or applied to leasing or renting the premises for bingo for each of the 12 months prior to the submission of this application. The report need not be audited, but must be certified by a principal officer, or similar principal of the organization. The report must also be notarized.

(d) A copy of all bank statements for the account into which all proceeds from the leasing of the premises for bingo were deposited, and which cover the effective period of the expiring Class B license.

(e) Copies of the current lease with every organization leasing the premise for the conduct of bingo **and a schedule** showing days of the week and times of play for each Class A license holder.

(f) An affidavit filled out and notarized by each person listed on page two of this application.

NOTICE:

YOUR APPLICATION WILL NOT BE CONSIDERED COMPLETE OR PROCESSED UNTIL ALL QUESTIONS ON THE APPLICATION HAVE BEEN ANSWERED AND ALL REQUIRED ATTACHMENTS HAVE BEEN SUBMITTED.

AFFIDAVIT

State of Florida

County of _____

Before me, a Notary Public, personally appeared _____, who being duly sworn states the following:

I certify under penalty of perjury that within the last five (5) years, I have not been convicted of a violation of Florida Statutes-Chapter 849, Pinellas County Code Chapter 10, or any other ordinance, misdemeanor or felony involving theft, fraud, crimes of dishonesty, gambling or violations of bingo under any laws of this state, any other state, federal, or equivalent law of any foreign country.

(Signature of Affiant)

Affiant's Printed Name

Affiant's Home Address

City State Zip

Organization

The foregoing instrument was acknowledged before me this _____ day of _____, 200__ by (name) _____, who has produced _____ as identification (or who is personally known to me) and who ***DID TAKE AN OATH.***

Notary Public's Signature

Seal:

