



City of Rio Vista

Application for Bingo Permit

PERMIT FEES: New/Renewal: ______\$10.00

Only the following organizations may conduct bingo games within the City of Rio Vista:

- A. Organizations exempt from payment of California Bank and Corporation tax under Revenue and taxation code, section 23701(a), (b), (d), (e), (f), (g), or (L), and having a valid certificate or letter from the Franchise Tax Board and the Internal Revenue Service supporting such exemption.
- B. Mobile home park associations
- C. Senior Citizens' organizations, and provided that the proceeds of such games are used only for charitable purposes...
- 1. NAME OF ORGANIZATION: ______

2. NAMES, SIGNATURES, ADDRESSES, PHONE NUMBERS OF OFFICERS OF ORGANIZATION:

3. Days and hours of operation: ______

4. Written consent of owner of premises to allow Bingo games on premises:

	Name		Residence Address	Business Telephone	
	Business Addre	255	Signature (indicates o	consent)	
5.	Statement of ownership or lease of premises (Attach to application)				
6.	Purpose for which premises used by organization:				
7.	Statement of o		go equipment used in the oper	ration of bingo games (Attach	
8.	Name of each individual, corporation, partnership, or legal entity which has financial interest in the conduct of the Bingo games.				
	Name		Address	Telephone	
9.	Name and birth date, residence, and business address of each staff member or person operatin or assisting in the operation of Bingo games.				
	Name	DOB	Residence	Business Address	
10.	the last five ye	ars of crimes inv		bingo games been convicted withi eny, perjury, bribery, extortion,	

Signature of Principal Officer

12. I agree to conduct Bingo games in strict accordance with the provisions of Section 326.5 of the Penal Code and Chapter 5.12 of the City of Rio Vista Municipal Code, as they may be amended from time to time, and agree the permit to conduct Bingo games may be revoked by the Chief of Police upon violation of any such provisions. I certify (or declare), under perjury, that the following is true and correct.

Executed on _____, 20____, at Rio Vista, California

**Requires two (2) signatures of officers of the applicant organization.

Name	Signature	DOB
Address		Telephone
Name	Signature	DOB
Address		Telephone