

TEMPORARY LAWFUL GAMBLING EVENT LICENSE APPLICATION MATERIALS

Applications should be submitted to the Department of Safety and Inspections via mail, delivery, or secured fax thirty (30) days prior to the event. Saint Paul's lawful gambling ordinances are online at www.stpaul.gov and www.municode.com. Search "Chapter 402. - Lawful Gambling" for specific City temporary event requirements. The maximum number of temporary events conducted in a calendar year is limited by State Statute and events lasting more than three (3) contiguous days require a separate permit. For questions regarding the conduct of gambling it is advised to contact the State of Minnesota Gambling Control Board (GCB) directly at 651-539-1900 as City license holders must comply with all federal, state, and local requirements.

- 1) City of Saint Paul, Temporary Lawful Gambling Event License Application Forms.
- 2) Minnesota Gambling Control Board (GCB), form for each gambling event to be conducted.

LG220 - Exempt Gambling (Most temporary gambling events).

LG230 - Off-Site Gambling (State Licensed Gambling Organizations only; no fee).

LG240B - Excluded Bingo (Four or fewer bingo occasions per year).

No Form - *Excluded Raffle* [Total prize values awarded for year under \$1,500 or a 501(c)3 may conduct a single event during year with prize value under \$5,000; must provide prize amounts and number of events].

State of Minnesota lawful gambling forms and requirements are available at 651-539-1900 and www.mn.gov/gcb. State applications and payment must be submitted by applicant directly to the Minnesota Gambling Control Board, 1711 W. Co. Rd B, Suite #300 South, Roseville, MN 55113.

- 3) Notarized Affidavit for Conduct of Lawful Gambling Temporary Event signed by CEO or President.
- 4) Proof of organization's current non-profit status.
- 5) Letter from organization describing event and what proceeds will be used for.
- 6) Letter or lease from ownership of location where event will occur granting the organization permission to conduct lawful gambling on premises. Not applicable if event to be conducted on property owned by the organization itself.
- 7) License fee \$55.00, payable to the "City of St. Paul" (Per State Statute, NO FEE for LG230 events).

If any questions, contact the Department of Safety and Inspections (DSI), Business Licensing at 651-266-8989 or DSI-InformationAndComplaints@ci.stpaul.mn.us.



TEMPORARY LAWFUL GAMBLING EVENT LICENSE PROCESSING

Dear Applicant,

A completed application form with all required documents must be submitted and reviewed before the City of Saint Paul license is approved by the Department of Safety and Inspections (DSI) then any applicable Minnesota Gambling Control Board (GCB) forms endorsed and forwarded to the State via email. City applications may be delivered by hand to DSI with free parking available at the Southwest corner of 6th & Jackson Streets in downtown, mailed or sent via secured fax (651-266-9124). It is recommended that the application and all required materials be submitted to the DSI a minimum of thirty days prior to the event.

After the license application is entered into the database and fee processed, it is forwarded to DSI business Licensing for a compliance review and an Inspector will contact you if additional information or materials are required. If any questions, request a DSI Licensing Inspector at 651-266-8989 or <u>DSI-InformationAndComplaints@ci.stpaul.mn.us</u>.

State of Minnesota Gambling Control Board (GCB) applications and payment must be submitted by applicants directly to the GCB at 1711 W. Co. Rd B, Suite #300 South, Roseville, MN 55113. It is recommended that the original GCB application forms be immediately submitted to that office as additional State fees will apply if not submitted 30 days prior to the event. Copies of the GCB forms must also be submitted to DSI and those requiring City of Saint Paul signature will be forwarded via email to the GCB after approval of the City license. If there are questions regarding the conduct of gambling itself, applicants are strongly encouraged to contact the GCB Licensing Section directly at 651-539-4000 or to visit the Minnesota Gambling Control Board website (http://mn.gov/gcb/).

Once all required items have been received and the event permit approved by a DSI Licensing Inspector, a hard copy of the City license will be posted via US Mail to the organization.

Please identify the following:

| 1. | Organization's Formal Name |
|----|----------------------------|
| 2. | Event Contact Person |
| 3. | Contact Person Title |
| 4. | Contact Person Phone |
| 5. | Contact Person E-Mail |
| 6. | Contact Person Fax |



TEMPORARY LAWFUL GAMBLING EVENT LICENSE APPLICATION

| 1) Organization name | | | | |
|---|--|--|--|--|
| 2) Organization mailing address | | | | |
| 3) Organization Phone Fax | | | | |
| 4) Organization CEO/President | | | | |
| 5) CEO/President Phone Email | | | | |
| 6) Name of organization contact conducting event | | | | |
| 7) Address where event to be conducted | | | | |
| 8) Name of location where event to be conducted | | | | |
| 9) Event Date(s) and time(s)*Please note, each calendar day a raffle drawing is conducted require | res a separate license* | | | |
| 10) Circle type(s) of lawful gambling to be conducted: <u>Bingo</u> <u>Paddlewhee</u> | el <u>Pull-Tabs</u> <u>Raffle</u> <u>Tipboards</u> | | | |
| 11) Total cash and retail value of merchandise to be awarded as prize(s) | | | | |
| 12) Total lawful gambling events to be conducted during calendar year | | | | |
| If any questions, contact the Department of Safety and Inspections (DSI), Business Licensing at 651-266-8989 or DSI-InformationAndComplaints@ci.stpaul.mn.us. Date | | | | |
| | Date: | | | |
| □ American Express □ Discover | Security Code | | | |
| nter ccount umber | | | | |
| Signature of Cardholder (required for all charges): | | | | |



AFFIDAVIT FOR CONDUCT OF TEMPORARY LAWFUL GAMBLING

BY ORGANIZATION CEO/PRESIDENT

I have read the State of Minnesota Statutes, State of Minnesota Rules, and the City of Saint Paul Ordinances governing the conduct of one day lawful gambling for exempt and excluded organizations.

I, as CEO/President of the organization named below, hereby certify the organization will conduct its exempt or excluded lawful gambling event in accordance with and in full compliance with all State of Minnesota and City of Saint Paul regulations.

| Organization Name (please print) | | |
|----------------------------------|--|-------------|
| Name & Title (please print) | | |
| Signature | | |
| Date | | |
| | | |
| | NOTARY PUBLIC INFORMATI | ON |
| | Notary Public Seal must be current and co seal may not be altered. | orrect. The |
| | Subscribed and sworn to before me this _ | |
| | day of, | |
| | (Notary Public Signature) | |