

**\*\*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.

**SAMPLE****Application for a Permit to Conduct a Class 3 Bazaar****Instructions:**

1. The completed form shall be submitted to:  
at least fifteen (15) days prior to the start of the bazaar.
2. Applying organization must be a qualifying non-profit functioning for a minimum of six (6) months.
3. Your application must be completed, signed, and accompanied by a check or money order made payable to “  
” Fee will be \$ .00 per day for up to ten (10) consecutive days.

<b>Name of Sponsoring Organization</b> St. John's Church - Men's Club			
If this organization previously held a raffle permit, list permit number: BAZR.9999		FEIN 06-1122334	IRS Exempt Status Code 501 (c) 3
Street Address 263 Cedar Mountain Road		City Anytown	State CT
			Zip Code 06000
Mailing Address (if different than above) PO Box 1		City Anytown	State CT
			Zip Code 06000
Telephone Number (with area code) (860) 555-7562		Email Address Stjohns@gmail.com	
Contact Person for <u>this</u> Application William Couto	Contact Telephone Number (860) 555-5309	Contact Email Address wcouto@gmail.com	
<b>Organization Category</b> (check only one):			
<input type="radio"/> An educational or charitable organization		<input type="radio"/> An officially recognized organization or association of veterans of any war in which the U. S. was engaged	
<input type="radio"/> A civic, service, or social club		<input type="radio"/> An officially recognized volunteer fire company	
<input type="radio"/> A fraternal or fraternal benefit society		<input type="radio"/> A political party or town committee of the municipality in which the raffle is to be held	
<input checked="" type="radio"/> A church or religious organization			

Give the names of the three (3) Designated Active Members of the sponsoring organization under whom the bazaar is to be conducted. These individuals will affix their signature to form CGR-1A. The three (3) Designated Active Members must be residents of the state of Connecticut.

First Name Brian	Last Name Markow	Telephone Number (with area code) (860) 555-9540	Date of Birth 06/17/1959
First Name William	Last Name Couto	Telephone Number (with area code) (860) 555-5309	Date of Birth 07/16/1963
First Name Leonard	Last Name Rogers	Telephone Number (with area code) (860) 555-8650	Date of Birth 04/07/1947

Ranking Officer Name Trevor Smith	Title Vice-President	Date of Birth 01/04/1952	
Residence Street Address 13 Holly Hill	City Anytown	State CT	Zip Code 06000

<b>Bazaar Description:</b>			
Provide the <u>date(s)</u> and <u>time(s)</u> for <u>each day</u> the bazaar will be conducted:			
May 23, 2014 - 6:00 pm to 10:00 pm May 24, 2014 - 6:00 pm to 10:30 pm May 25 2012 5:00 pm to 11:00 pm			
<b>Place Where Bazaar is to be Held:</b>			
Name of Place			
St. John's Church grounds			
Street Address		City	State
263 Cedar Mountain Rd		Anytown	CT
Zip Code		06000	
<b>Types of Games and Total Number to be Operated:</b>			
✓ Blower Ball/Cage Ball Total: _____ 1 _____		✓ Teacup Raffle Total: _____ 1 _____	
✓ 50/50 (up to 3 drawings per day) Total: _____ 1 _____		✓ Other: finish line game Total: _____ 1 _____	
<b>If applicable, from whom are the games of chance equipment to be obtained:</b>			
Registered Dealer Name		Dealer Registration Number	Equipment Rental Fee Paid
Dealer Equipment Company		7537245	\$450.00

List the items of expense intended to be incurred or paid in connection with the holding, operating, and conducting of such bazaar and the names and addresses of the persons to whom, and the purposes for which, they are to be paid.

\*Attach additional sheets as necessary.

Expense (\$)	Name	Street Address	City	State	Purpose
\$30.00	Town of Anytown	Cedar St	Anytown	CT	permit fee
\$450.00	Dealer Equipment Company	7 Hope Street	Anytown	CT	Equipment Rental fee
\$49.99	Anytown Department Store	963 Berlin St	Next-town	CT	drill bit set
\$29.99	Anytown Department Store	963 Berlin St	Next-town	CT	discman
\$27.89	Anytown Department Store	963 Berlin St	Next-town	CT	dust-buster
\$45.00	Fran's part shop	37 Sunset Blvd	Anywhere	CT	50/50 and teacup tkts

Separately list in detail all items offered as prizes in connection with such bazaar, indicate whether or not the items were donated, list the price to be paid by the organization or the retail value of any prize donated, and the names and addresses of persons from whom the items were purchased or by whom donated.

\*Attach additional sheets as necessary.

Merchandise	Donated Yes/No	Retail Value	Amt. Paid by Org.	Name	Street Address	City	State
Baked Goods	yes	\$200.00	\$0.00	Eva Smith	10 Jolly Dr	Anytown	CT
Lamp	yes	\$75.00	\$0.00	Charles Cicone	102 Kettle St	Anytown	CT
Hand made afghan	yes	\$55.00	\$0.00	Lillian Turgeon	71 Maple St	Anytown	CT
Drill bit set	no	\$49.99	\$49.99	Anytown Dept. Store	963 Berlin St	Anytown	CT
Discman	no	\$29.99	\$29.99	Anytown Dept. Store	963 Berlin St	Next-town	CT
Dust-buster	no	\$30.00	\$27.89	Anytown Dept. Store	963 Berlin St	Next-town	CT

State the specific purpose to which the entire net proceeds of such bazaar are to be devoted.

The net proceeds will be used to help balance St. John's Catholic School's budget.
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I certify, under penalty of law (Sec. 53a-157b, Class A Misdemeanor), that the information provided on this application is the truth to the best of my knowledge.

Signature of Ranking Officer	Date
Trevor Smith	10/15/2014

**STATEMENT OF ACTIVE MEMBERS DESIGNATED BY SPONSORING  
ORGANIZATION UNDER WHOM THE BAZAAR 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. I am a resident of the state of Connecticut.
2. I am a bona fide active member of the sponsoring organization making this application to conduct a bazaar 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 in accordance with the terms of the permit, the provisions of the Act, and regulations.
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 alcoholic beverages as prizes.
  - b. 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.
  - c. The promotion or operation of a bazaar by other than duly qualified members of the sponsoring organization.
  - d. The giving of pay to any member for his time or effort in connection with a bazaar.
  - e. The promotion, conduct or operation of a bazaar by a person under the age of 18 or the permitting of same by the sponsoring organization.
  - f. The use of funds derived from the bazaar for purposes other than as stated in this application.
  - g. 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.
6. I am familiar with the provisions of the Act which:
  - a. Make mandatory the immediate revocation of a permit to conduct a bazaar 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.
  - b. 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. Brian Markow	2. William Couto	3. Leonard Rogers
SIGNATURE AND DATE	SIGNATURE AND DATE	SIGNATURE AND DATE
<i>Brian Markow</i> 10/15/2014	<i>William Couto</i> 10/15/2014	<i>Leonard Rogers</i> 10/15/2014



For Official Use Only

## **Application for a Permit to Conduct a Class 3 Bazaar**

### **Instructions:**

1. The completed form shall be submitted to:  
**at least fifteen (15) days prior** to the start of the bazaar.
2. Applying organization must be a qualifying non-profit functioning for a minimum of six (6) months.
3. Your application must be completed, signed, and accompanied by a check or money order made payable to  
“ **Permit Fee is \$20.00 per day for up to ten (10) consecutive days.** ”

<b>Name of Sponsoring Organization</b>			
If this organization previously held a bazaar permit, list permit number:		Federal ID Number	IRS Exempt Status Code 501(c) -
Street Address	City		State      Zip Code
Mailing Address (if different than above)	City		State      Zip Code
Telephone Number (with area code)		Email Address	
<b>Contact Person for <u>this</u> Application</b>	<b>Contact Telephone Number</b>	<b>Contact Email Address</b>	
<b>Organization Category</b> (check only one):			
An educational or charitable organization		An officially recognized organization or association of veterans of any war in which the U. S. was engaged	
A civic, service, or social club		An officially recognized volunteer fire company	
A fraternal or fraternal benefit society		A political party or town committee of the municipality in which the raffle is to be held	
A church or religious organization			

Give the names of the three (3) Designated Active Members of the sponsoring organization under whom the bazaar is to be conducted. These individuals will affix their signature to form CGR-1A. The three (3) Designated Active Members must be residents of the state of Connecticut.

First Name	Last Name	Telephone Number (with area code)	Date of Birth (mm/dd/yyyy)
First Name	Last Name	Telephone Number (with area code)	Date of Birth (mm/dd/yyyy)
First Name	Last Name	Telephone Number (with area code)	Date of Birth (mm/dd/yyyy)

Ranking Officer Name	Title	Date of Birth (mm/dd/yyyy)	
Residence Street Address	City	State	Zip Code

<b>Bazaar Description:</b>			
Provide the <u>date(s) and starting and ending time(s) for each day</u> the bazaar will be conducted:			
<b>Place Where Bazaar is to be Held:</b>			
Name of Place			
Street Address	City	State	Zip Code
<b>Types of Games and Total Number to be Operated:</b>			
Blower Ball/Cage Ball      Total: _____	Teacup Raffle      Total: _____		
50/50 (up to 3 drawings per day)      Total: _____	Other: _____      Total: _____		
<b>If applicable, from whom are the games of chance equipment to be obtained:</b>			
Registered Dealer Name	Dealer Registration Number	Equipment Rental Fee Paid	

List the items of expense intended to be incurred or paid in connection with the holding, operating, and conducting of such bazaar and the names and addresses of the persons to whom, and the purposes for which, they are to be paid.

\*Attach additional sheets as necessary.

Expense (\$)	Name	Street Address	City	State	Purpose
					Municipality Permit Fee

Separately list in detail all items offered as prizes in connection with such bazaar, indicate whether or not the items were donated, list the price to be paid by the organization or the retail value of any prize donated, and the names and addresses of persons from whom the items were purchased or by whom donated.

\*Attach additional sheets as necessary.

Merchandise	Donated Yes/No	Retail Value	Amt. Paid by Org.	Name	Street Address	City	State

State the specific purpose to which the entire net proceeds of such bazaar are to be devoted.

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I certify, under penalty of law (Sec. 53a-157b, Class A Misdemeanor), that the information provided on this application is the truth to the best of my knowledge.

Signature of Ranking Officer	Date
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**STATEMENT OF ACTIVE MEMBERS DESIGNATED BY SPONSORING  
ORGANIZATION UNDER WHOM THE BAZAAR 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. I am a resident of the state of Connecticut.
2. I am a bona fide active member of the sponsoring organization making this application to conduct a bazaar 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 in accordance with the terms of the permit, the provisions of the Act, and regulations.
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 alcoholic beverages as prizes.
  - b. 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.
  - c. The promotion or operation of a bazaar by other than duly qualified members of the sponsoring organization.
  - d. The giving of pay to any member for his time or effort in connection with a bazaar.
  - e. The promotion, conduct or operation of a bazaar by a person under the age of 18 or the permitting of same by the sponsoring organization.
  - f. The use of funds derived from the bazaar for purposes other than as stated in this application.
  - g. 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.
6. I am familiar with the provisions of the Act which:
  - a. Make mandatory the immediate revocation of a permit to conduct a bazaar 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.
  - b. 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 ( <i>Please print</i> )	NAME ( <i>Please print</i> )	NAME ( <i>Please print</i> )
1.	2.	3.
SIGNATURE AND DATE	SIGNATURE AND DATE	SIGNATURE AND DATE

Wallingford Police Department  
Records Division  
135 North Main Street  
Wallingford, CT 06492  
(203) 294-2810



APPLICATION TO AMEND  
BAZAAR OR RAFFLE

REV. 02/19

**INSTRUCTIONS:**

1. The Designated Active Members of the sponsoring organization must complete this form.
2. Attach all additional proofs, signatures and verifications required for this amendment, if any.
3. The completed form must be mailed to the **Wallingford Police Department, Records Division, 135 North Main Street, Wallingford, CT 06492.**

No permit issued under the provisions of the Bazaar and Raffle Act may be amended except upon application on this form to the Wallingford Police Department when the subject matter of the proposed amendment could lawfully and properly have been included in the original permit and upon payment of such additional fee, if any, as would have been payable if it had been so included.

TO: WALLINGFORD POLICE DEPARTMENT

Amendment to the Bazaar or Raffle Permit Application

NAME OF SPONSORING ORGANIZATION

PERMIT NUMBER

ADDRESS OF SPONSORING ORGANIZATION (No. and Street)

(City or Town)

(State)

(Zip Code)

TELEPHONE NUMBER

Please provide the details of the proposed amendment(s):

We the undersigned, whose signatures appear on the original application, do hereby EACH state under the penalties of perjury that all statements in this amended application are true.

**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

☐ AMENDMENT  
DISAPPROVED

☐ MAY REMAIN IN FULL FORCE AND EFFECT IN ACCORDANCE  
WITH CHANGE(S) SET FORTH ABOVE

DATE (Mo., Day, Yr.)

## Verified Bazaar Statement

Instructions:

1. The three designated active members of the Sponsoring Organization must complete this form.
2. If additional space is required, attach additional sheets.
3. Submit this form to the City/town Police Department by the end of the following month.

Name of Sponsoring Organization		Permit Number	
Street Address	City	State	Zip Code
Town Where Bazaar Was Held	Date(s) Bazaar Was Held		
Registered Equipment Dealer Name (if applicable)		Dealer Registration Number (if applicable)	

**List all receipts from each type of game of chance operated:**

Description of Game	Amount	Description of Game	Amount
1.	\$	4.	\$
2.	\$	5.	\$
3.	\$	6.	\$
<b>Total Receipts From Games of Chance Operated:</b>			<b>\$</b>

**List each item of expense incurred or paid and each item of expenditure made or to be made, and the name and address of each person to whom each item has been or is to be paid:**

Expense/Expenditure	Name and Address of Payee	Amount
1.		\$
2.		\$
3.		\$
4.		\$
5.		\$
6.		\$
<b>Total Expenses:</b>		<b>\$</b>

Total Receipts from Games of Chance:	Total Expenses:	Net Profit (Total Receipts minus Total Expenses):
\$	\$	\$

List the uses to which the entire net profit of the bazaar has been or is to be applied:

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List the prizes with a retail value of fifty dollars (\$50.00) or more, the amount paid for each prize purchased or the retail value of each prize donated, and the names and addresses of the persons to whom such prizes were awarded:

Prize	Purchase Price/Retail Value	Name and Address of Prize Recipient
1.	\$	
2.	\$	
3.	\$	
4.	\$	
5.	\$	
6.	\$	
7.	\$	
8.	\$	
9.	\$	
10.	\$	

### Statement of Designated Active Members and Ranking Officer

We, the undersigned, do hereby each certify under penalty of false statement that the foregoing statement is a true and accurate report of the holding, operation, and conduct of the bazaar described herein.

Print Name of Designated Active Member	Signature	Telephone	Date
1.			
2.			
3.			

Print Name of Ranking Officer	Signature	Telephone	Date