



CG-SP, SPECIAL PERMISSION REQUEST

State Form 53641 (R / 6-11)

INDIANA GAMING COMMISSION

INSTRUCTIONS: Special permission to an Annual or Single Event must be requested ***thirty (30) days before*** the date of the event.

SECTION 1 Information - **Must be completed.**

Organization name

Address (*number and street*)

City

State

ZIP code

Organization daytime telephone number

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Officer making request (*print name*)

Contact telephone number

()

Organization fax number

()

Current license number

- 1) Special Permission requests must be for the same day of the week, date, and location as what is approved on the current license. The playing time(s) must also be the same as approved on the current license or at least, be within the approved time(s) on the license. Requests can be faxed to (317) 232-0117 or mailed to the Indiana Gaming Commission, Charity Gaming Division, 101 W. Washington Street, East Tower, Suite 1600, Indianapolis, Indiana 46204.
- 2) All Special Permission request(s) must be signed by the presiding officer and secretary.
 - a. The officer must be on the most recent "Current Officer Listing" (Form CG-CO) we have on file. If the current officers have changed, especially after the original license was issued, please submit an updated Form CG-CO with this request.
- 3) Please type or write information legibly. Be sure all completed pages have the presiding officer and secretary's signature and is dated.

SECTION 2

SPECIAL PERMISSION REQUEST

(PRIZE PAYOUT INCREASE)

Requests must be submitted ***thirty (30) days before*** the date of the event.

Organization name: _____

Based on the type of license, which increase do you wish to request: *(check one)*

- \$10,000 *(for Bingo Only)**
- \$20,000 *(for Door Prize Only)*
- \$25,000 *(Raffle in conjunction with another allowable event)*

License type:
Event day & date: Week day: _____ / Date: _____ <i>(month, day, year)</i>
Playing time(s): From: _____ M / to: _____ M <i>Hours**</i>
Location of event: <i>(full address)</i>

**Special Permission requests must be for the same day of the week, date and location as what is approved on the current license. The playing time(s) must also be the same as approved on the current license or at least, be within the approved time(s) on the license.*

**When listing the beginning and ending playing time(s), please specify AM and/or PM.
(AM establishes the midnight hour and PM establishes the noon hour.)*

Signature of Presiding Officer

Date *(month, day, year)*

Printed name

Title

Daytime telephone number

Signature of Secretary

Date *(month, day, year)*

Printed name

Daytime telephone number