



CG-SP, SPECIAL PERMISSION REQUEST

State Form 53641 (R2 / 8-19)
INDIANA GAMING COMMISSION

For office use only

Reviewed by: _____
Date Reviewed: _____

SPECIAL PERMISSION REQUEST (Prize Payout Increase): <input type="checkbox"/> \$10,000 Bingo (Limit two (2) per calendar year.)			
<input type="checkbox"/> Unlimited Bingo \$ _____			
Organization name		Current license number	
Address (number and street)		City	State
			ZIP Code
Organization telephone number ()	Organization fax number ()	Officer making request (print name)	Contact telephone number ()
Event day and date: (month, day, year) Week day _____ / Date: _____			
Playing time(s): (hours) From: _____ M / to: _____ M			
Location of Event (full address)			
Certification: We certify under the penalties for perjury that all of the information submitted in this form is true and that providing false information may lead to the revocation or denial of charitable gaming license(s), termination of qualification status, a civil penalty, or other sanction as determined by the Commission through an administrative process.			
Signature of Presiding Officer		Signature of Secretary	
Printed Name / Title		Printed Name	
Date (month, day, year)	Daytime telephone number ()	Date (month, day, year)	Daytime telephone number ()

Instructions:

Special permission to an Annual or Single Activity must be requested **fourteen (14)** business days before the date of the activity.

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.

All Special Permission request(s) must be signed by the presiding officer and secretary.

Mail completed form to:
Indiana Gaming Commission, Charity Gaming Division
101 W. Washington Street, East Tower, Suite 1600
Indianapolis, Indiana 46204