

BL-6 Beach Bingo License Application

(Form must be filled out completely to be valid.)

License Fee: \$300.00

Type of Applicant: ☐ Corporation ☐ Association ☐ Individual ☐ Other

Renewal: Yes ☐ No ☐ **Beach Bingo License #:** _____

Applicant Name: First _____ MI _____ Last _____

Applicant Address: Number & Street: _____

City: _____ State: _____ Zip: _____

Business Name (if applicable): _____

Business Address (if applicable): Number & Street: _____

City: _____ State: _____ Zip: _____

Mailing Address: applicant address ☐ business address ☐ other ☐ (indicate below)

Number & Street: _____ City: _____ State: _____ Zip: _____

Applicant Email Address: _____

Applicant Telephone Number: (____)____-____ **Daytime Telephone Number:** (____)____-____

Date of Birth: ____/____/____ **Social Security Number:** ____-____-____

MM / DD / YY

NC Driver's License Number: _____ (*A copy must be submitted with this application.*)

List below name and home address of each of the officers of the business as well as the name and address of the directors, or other persons similarly situated, of the business:

Name

Address

Title

State below the location at which the business will conduct bingo games:

(Number & Street) (City) (County) NC (State) (Zip Code)

Does the business own the premises where bingo games are to be conducted? ☐ Yes ☐ No

If not owned by the business, a copy of the lease or rental agreement between the business and the property owner or bona fide property management agent must be submitted.

Day(s) of week and time of day bingo games will be played:							
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Afternoon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CERTIFICATE

I certify that all of the information provided in this application is true and accurate to the best of my knowledge and belief, and that I have read and understand the bingo statutes for the state of North Carolina.

(Print name of individual applying for bingo license)

(Signature and title of officer making application for business)

Date

State of North Carolina

County of _____

I, _____, a Notary Public in the county of _____, North Carolina, do hereby
certify that _____ personally appeared before me this day and acknowledged the due
Name of Principal(s)

execution of the foregoing document. Witness my hand and official seal, this the _____ day of _____, 20____.
(Official Seal)

Signature of Notary Public

Printed or Typed Name of Notary Public

My commission expires: _____

Renewal/New fee is enclosed: \$300.00 (checks payable to ALE - Bingo)

Before the application is mailed:

- Is a copy of your driver's license included? ☐
- Is a copy of your lease or rental agreement included? ☐
- Is the application signed and notarized? ☐
- Is the \$300.00 check included? ☐

Return Letter To:
ALE – Beach Bingo
4233 Mail Service Center
Raleigh, NC 27699