

**OFFICIAL BUSINESS LICENSE**

**STATE OF ILLINOIS**                    )  
**COUNTY OF SANGAMON**            ) ss.  
**VILLAGE OF NEW BERLIN**         )

**ILLINOIS SALES TAX NUMBER** \_\_\_\_\_

**TO ALL TO WHOM THESE PRESENTS SHALL BECOME GREETINGS:**

**WHEREAS** \_\_\_\_\_,  
having complied with all the requirements of the laws of the State of Illinois and the ordinances of the **Village of New Berlin, Illinois** in this behalf made and required license is, by authority of the **Village of New Berlin, Illinois** given and granted to the \_\_\_\_\_  
\_\_\_\_\_ to \_\_\_\_\_ at \_\_\_\_\_  
\_\_\_\_\_ in the **Village of New Berlin, County of Sangamon, and State of Illinois**, from the \_\_\_\_\_ date hereof until the \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_,  
said \_\_\_\_\_ to be subject to all laws of the State of Illinois and all ordinances of the **Village of New Berlin, Illinois**, not in conflict therewith, which are now or hereafter may be in force touching the premises.

(L.S.)

Given under the hand of the Mayor of the **Village of New Berlin, County of Sangamon, Illinois** and the seal thereof, this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_.

\_\_\_\_\_  
**MAYOR**  
**VILLAGE OF NEW BERLIN**

**COUNTERSIGNED:**

\_\_\_\_\_  
**VILLAGE CLERK**  
**VILLAGE OF NEW BERLIN**

(SEAL)

**VILLAGE OF NEW BERLIN**  
**APPLICATION FOR RAFFLE LICENSE**

Organization Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Type of Organization: \_\_\_\_\_  
Length of Existence of Organization: \_\_\_\_\_

If organization is incorporated, what is the date and state of incorporation?  
Date: \_\_\_\_\_ State: \_\_\_\_\_

List the organization's presiding officer, secretary, raffle manager, and any other members responsible for the conduct and operation of the raffle.

PRESIDENT:

SECRETARY: \_\_\_\_\_ Birth Date: \_\_\_\_\_  
Address: \_\_\_\_\_  
Social Security No.: \_\_\_\_\_ Phone No.: \_\_\_\_\_

RAFFLE MANAGER: \_\_\_\_\_ Birth Date: \_\_\_\_\_  
Address: \_\_\_\_\_  
Social Security No.: \_\_\_\_\_ Phone No.: \_\_\_\_\_

List any other members responsible for the conduct and operation of the raffle on the back of this page. List name, date of birth, address, social security number, and phone number.

\_\_\_\_\_ This request is for a single raffle license.  
\_\_\_\_\_ This request is for a multiple raffle license.

The aggregate retail value of all prizes to be awarded: \$ \_\_\_\_\_  
Maximum retail value of each prize to be awarded in the raffle: \$ \_\_\_\_\_  
The maximum price charged for each raffle chance issued: \_\_\_\_\_  
The area or areas in which raffle chances will be sold or issued: \_\_\_\_\_

\_\_\_\_\_ Time period during which raffle chances will be issued or sold: \_\_\_\_\_

\_\_\_\_\_ The date, time and location at which winning chances will be determined: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_  
Location: \_\_\_\_\_

If multiple raffles license is requested, list on a separate sheet, the date, time, and location for each raffle to be held within the one (1) year period of time from the date of the issuance of the license.

**THE APPLICATION FEES ARE NONREFUNDABLE EVEN SHOULD THE APPLICATION BE REJECTED BY THE VILLAGE BOARD.**

**VILLAGE OF NEW BERLIN  
APPLICATION FOR RAFFLE LICENSE**

**SWORN STATEMENT**

The following officers attest to the not-for-profit character of the applicant organization.

---

(NAME OF ORGANIZATION)

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_.

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PRESIDING OFFICER

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SECRETARY

STATE OF ILLINOIS        )  
  ) ss.  
COUNTY OF SANGAMON )

Signed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_.

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PRESIDING OFFICER

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SECRETARY

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NOTARY PUBLIC

**VILLAGE OF NEW BERLIN**  
**SINGLE RAFFLE LICENSE**

License No.: \_\_\_\_\_

Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_

Area or areas in which raffle chances may be sold or issued: \_\_\_\_\_

\_\_\_\_\_

Period of time during which raffle chances may be sold: \_\_\_\_\_

\_\_\_\_\_

Maximum price charged for each raffle chance issued or sold: \$ \_\_\_\_\_

Date, time and location at which winning chance will be determined:

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Location: \_\_\_\_\_

**THIS LICENSE SHALL BE PROMINENTLY DISPLAYED AT THE TIME AND LOCATION OF THE DETERMINATION OF THE WINNING CHANCES.**

**WITNESS** the hand of the President of the New Berlin Village Board of Trustees and the Corporate Seal thereof, this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_.

\_\_\_\_\_  
PRESIDENT: VILLAGE BOARD OF TRUSTEES  
NEW BERLIN, ILLINOIS

\_\_\_\_\_  
VILLAGE CLERK  
NEW BERLIN, ILLINOIS

**(SEAL)**

**VILLAGE OF NEW BERLIN**  
**MULTIPLE RAFFLE LICENSE**

License No.: \_\_\_\_\_

Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_

Area or areas in which raffle chances may be sold or issued: \_\_\_\_\_

\_\_\_\_\_

Period of time during which raffle chances may be sold: \_\_\_\_\_

\_\_\_\_\_

Maximum price charged for each raffle chance issued or sold: \$ \_\_\_\_\_

This is a license for multiple raffles to be held within the maximum period of one (1) year from date of this license. The date, the and location of each raffle is as set forth on Exhibit 1, attached hereto and hereby incorporated by reference.

**THIS LICENSE SHALL BE PROMINENTLY DISPLAYED AT THE TIME AND LOCATION OF THE DETERMINATION OF THE WINNING CHANCES.**

**WITNESS** the hand of the President of the New Berlin Village Board of Trustees and the Corporate Seal thereof, this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_.

\_\_\_\_\_  
PRESIDENT: VILLAGE BOARD OF TRUSTEES  
NEW BERLIN, ILLINOIS

\_\_\_\_\_  
VILLAGE CLERK  
NEW BERLIN, ILLINOIS

(SEAL)

**EXHIBIT 1**

The following is the date, time and location at which winning chances will be determined for multiple raffles to be held within a maximum period of one (1) year from the date of issuance of this license.

Date: \_\_\_\_\_ Time: \_\_\_\_\_  
Location: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_  
Location: \_\_\_\_\_