

**CHEROKEE COUNTY SHERIFF'S OFFICE  
APPLICATION FOR LICENSE TO OPERATE RAFFLES**

**GENERAL:** No nonprofit organization shall be permitted to operate a raffle without a license issued by the Sheriff. Any person who operates a raffle without a valid license commits the offense of commercial gambling as defined by OCGA 16-12-22. **NO LICENSE SHALL BE PROCESSED** unless the organization has been in existence for 24 months immediately prior to the issuance of the license and the organization provides fully the information specified below. **PLEASE TYPE OR PRINT**

**RAFFLE LICENSE REQUESTED:** (please check)

\_\_\_\_\_ Initial (\$100 annual fee)

\_\_\_\_\_ Renewal (\$100 annual fee)

\_\_\_\_\_ Initial Special No fee

\_\_\_\_\_ Renewal Special No fee

**1. NAME OF APPLICANT:** \_\_\_\_\_

**ADDRESS OF APPLICANT:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PHONE NUMBER OF APPLICANT:** (Day) \_\_\_\_\_ (Evening) \_\_\_\_\_

**2. NAME OF ORGANIZATION:** \_\_\_\_\_

**ADDRESS OF ORGANIZATION:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DATE ORGANIZATION FOUNDED:** \_\_\_\_\_

**TYPE ORGANIZATION:** (please check)

\_\_\_\_\_ Nonprofit, tax-exempt church, school, civic organization, or related support group;

\_\_\_\_\_ Nonprofit organization qualified under Section 501 (c) of the Internal Revenue Code \*\*;

\_\_\_\_\_ Bona fide nonprofit organization approved by the Sheriff.

**\*\*Note:** if qualified under Section 501 (C) you must attach a determination letter from the Internal Revenue Service certifying the applicant is an organization exempt under federal tax law and a determination letter from the Georgia Department of Revenue certifying that the applicant organization is exempt under the tax laws of the State of Georgia.

3. If the organization is a corporation, association, or other legal entity, you must provide the following information for each officer, director, or other persons holding similar positions in the organization:

NAME \_\_\_\_\_ TITLE \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NAME \_\_\_\_\_ TITLE \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NAME \_\_\_\_\_ TITLE \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NAME \_\_\_\_\_ TITLE \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Provide the following information for those individuals who will be operating, advertising or promoting the raffle:

NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Provide the following information for any person, organization, or legal entity that will act as surety of the applicant or to which the applicant is financially indebted or to which any financial obligation is owed by the applicant:

NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. The specific location at which the raffle will be conducted and, if the premises on which the raffle(s) is conducted is to be leased, attach a copy of the lease or rental agreement:

NAME AND ADDRESS OF RAFFLE LOCATION \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. **CRIMINAL OFFENSE CONVICTIONS:** List the convictions, if any, for criminal offenses other than minor traffic offenses, of each of the persons listed in the application.

NAME \_\_\_\_\_  
OFFENSE AND DATE \_\_\_\_\_

NAME \_\_\_\_\_  
OFFENSE AND DATE \_\_\_\_\_

NAME \_\_\_\_\_  
OFFENSE AND DATE \_\_\_\_\_

8. **FEES:** Each applicant will pay a fee of \$100 by check or money order, payable to the Cherokee County Commissioners' Office **EXCEPT** applicants who operate no more than three raffles per calendar year, with each lasting no longer than 30 days.

## **APPLICATION PROCEDURES:**

1. Each applicant for a raffle license and each renewal application shall submit the following information:

- a. The name and home address of the applicant and, if the applicant is a corporation, association, or other similar legal entity, the names and home addresses of each of the officers of the organization, as well as the names and addresses of the directors, or other persons similarly situated, of the organization;
- b. The name(s) and home addresses of each of the persons who will be operating, advertising, or promoting the raffle;
- c. The names and home addresses of any persons, organizations, or other legal entities that will act as surety of the applicant or to which the applicant is financially indebted or to which any financial obligation is owed by the applicant;
- d. A determination letter from the Internal Revenue Service certifying that the applicant is an organization exempt under federal tax law;
- e. A determination letter from the Georgia Department of Revenue certifying that the applicant is exempt under the tax laws of Georgia;
- f. The location at which the applicant will conduct the raffles and, if the premises on which the raffles are to be conducted is to be leased, a copy of the lease or rental agreement; **AND**
- g. A statement showing the convictions, if any, for criminal offenses other than minor traffic offenses of each of the persons listed in the application.

2. At the time the completed application is submitted, each applicant shall:

- a. Pay an annual fee of \$100.00 (except those authorized a no-fee license). The fee shall be paid by check or money order and made payable to the "Cherokee County Commissioners Office;"
- b. Provide a notarized Criminal History Consent Form from each of the persons listed in the application; **AND**
- c. Provide all applicable attachments such as determination letters from the IRS and Georgia Department of Revenue and/or a copy of the lease/rental agreements.

## **APPLICATION DENIAL AND LICENSE REVOCATION:**

1. **APPLICATION DENIAL:** The Sheriff shall not issue a raffle license for any of the following reasons:

- a. A failure to provide all required application and criminal history release information;
- b. A failure to provide the required annual fee of \$100.00 (except for special no-fee licenses); **OR**
- c. Any felony conviction for any offense or misdemeanor conviction for a violent **OR** gambling related offense for any of the persons listed in the application.

**2. LICENSE REVOCATION:** The Sheriff shall direct the revocation of a raffle license for any of the following reasons:

- a. Any misrepresentations, falsifications, or material omissions of the application or renewal information;
- b. Any subsequent felony conviction or misdemeanor conviction for a violent or gambling related offenses for any individual listed in the application;
- c. A failure of the applicant to allow law enforcement authorities to come upon the premises of the licensee or upon any premises on which the licensee is conducting a raffle for the purpose of examining the accounts and records of the licensee; **OR**
- d. For any failure of the applicant to comply with the raffle operating requirements established by OCGA 16-12-22.1 as outlined below.

**3. HEARING:** Any applicant accused of violating any provision of OCGA 16-12-22.1 shall be entitled, unless waived, to a hearing on the matter of the alleged violation conducted in accordance with Chapter 13 of Title 50, to the Georgia Administrative Procedure Act.

**RAFFLE OPERATION REQUIREMENTS:**

1. Raffles shall be operated only on premises owned by the nonprofit, tax-exempt organization **OR**
  - a. On property leased by the nonprofit, tax-exempt organization for purposes other than the operation of a raffle; **OR**
  - b. On property leased by the nonprofit, tax-exempt organization operating the raffle from another nonprofit, tax-exempt organization.
2. No person under the age of 18 years shall be permitted to play any raffle unless accompanied by an adult.
3. The licensee shall:
  - a. Own all the equipment used to conduct a raffle or lease such equipment from an organization that is also licensed to conduct a raffle;
  - b. Display its raffle license conspicuously at the location where the raffle is conducted;
  - c. Conduct raffles only as specified in the licensee's application; **AND**
  - d. Not conduct more than one raffle during any one calendar day.
4. No applicant shall enter into any contract with any individual, firm, association, or corporation to have such individual, firm, association, or corporation operate raffles or concessions on behalf of the nonprofit, tax-exempt organization.

5. An applicant shall not lend the name of the nonprofit, tax-exempt organization nor allow its identity to be used by any individual, firm, association, or corporation in the operating or advertising of a raffle in which said nonprofit, tax-exempt organization is not directly and solely operating the raffle.

6. No person shall pay consulting fees to any person for any services performed in relation to the operation or conduct of a raffle.

7. A person who is a member of more than one nonprofit, tax-exempt organization shall be permitted to participate in the raffle operations of only two organizations of which such person is a member provided, however, that such person shall not receive more than \$30.00 per day for assisting in the conduct of the raffles regardless of whether such person assists both organizations in the same day.

8. Every licensee consents that the Sheriff and/or his agents, together with the prosecuting attorney and/or his agents, may come upon the premises of any licensee or upon any premises on which any licensee is conducting a raffle for the purpose of examining the accounts and records of the licensee to determine if a violation of this Code section has occurred.

#### **RAFFLE ADMINISTRATIVE REQUIREMENTS:**

1. A licensee that conducts or operates a raffle shall maintain the following records for at least three years from the date on which the raffle is conducted:

a. An itemized list of the gross receipts for each raffle;

b. An itemized list of all expenses other than prizes that are incurred in the conduct of the raffle as well as the name of each person to whom the expenses are paid and a receipt for all of the expenses;

c. A list of all prizes awarded during the raffle and the name and address of all persons who are winners of prizes of \$50.00 or more in value;

d. An itemized list of the recipients other than the licensee of the proceeds of the raffle, including the name and address of each recipient to whom such funds are distributed; **AND**

e. A record of the number of persons who participate in any raffle conducted by the licensee.

2. On or before April 15 of each year, every nonprofit, tax-exempt organization engaged in operating raffles shall file with the Sheriff a report disclosing all receipts and expenditures relating to the operation of raffles in the previous year.

a. The report shall be in addition to all other reports required by law.

b. The report shall be prepared and signed by a certified or registered public accountant competent to prepare such a report and shall be deemed a public record subject to public inspection.

**CHEROKEE COUNTY SHERIFF'S OFFICE**  
**CRIMINAL HISTORY CONSENT FORM**

In order for the Cherokee County Sheriff's Office to better serve you, please fill out this form completely. Please print neatly, if your information cannot be read you will be asked to fill out another consent form which will take an additional 48 hours to process. Do not change, strikethrough, or white out any information. If a change or correction is necessary, a new consent form must be completed.

**Section 1: Authorization**

I hereby authorize the Cherokee County Sheriff's Office to process my criminal history record information and release any information pertaining to me which may be in the file of any state or local criminal justice agency to the individual I have specified below.

If this information is being released to a business, agency, or organization, the Cherokee County Sheriff's Office must have a *specific person's* name at the business, agency, or organization and the *address* and *title* of the business, agency or, organization.

If this information is being released to an individual, the Cherokee County Sheriff's Office must have the individual's *name* and *address*.

Please release my criminal history record information to:

Emily Stinnett or Raquel Hemby

I need the results of this background check on letterhead with a notary stamp. Number of letters: \_\_\_\_\_

**Section 2: Reason**

Please circle the appropriate reason for your background check or specify the reason for your background check in the blank.

- 1. PERSONAL INSPECTION
- 2. ADOPTION
- 3. APARTMENT
- 4. EMPLOYMENT WITH THE MENTALLY ILL/MENTALLY RETARDED
- 5. EMPLOYMENT WITH ELDER CARE
- 6. EMPLOYMENT WITH CHILDREN
- 7. OTHER: Raffle Permit

**Section 3: Personal Information**

This consent for criminal history expires **90 days** after being signed by the person whose record is sought.

Full Name: First, Middle, & Last \_\_\_\_\_ PLEASE PRINT LEGIBLY

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Date of Birth: MM/DD/YYYY Sex \_\_\_\_\_ Race (White, Black, American Indian, Asian, Pacific islander, Alaskan Native) \_\_\_\_\_ Social Security Number \_\_\_\_\_

Your Signature \_\_\_\_\_ Date \_\_\_\_\_

Notary Signature & Stamp \_\_\_\_\_ Date \_\_\_\_\_ Driver's License Number (NOTARY USE ONLY) \_\_\_\_\_

**Section 4: Results**

*If an employment, licensing, housing, or other decision adverse to the record subject is made, the individual or agency making the adverse decision must inform the record subject of all information pertinent to that decision. This disclosure must include that a criminal history record check was made, specific contents of the record, and the effect the record had upon the decision. Failure to provide all such information is a misdemeanor under Georgia law. (O.C.G.A. 35-3-34, 35-3-35)*

*If this form is stamped, no record could be found in the Georgia Criminal History Database for the record subject. Please see attached printouts if this form is not stamped. Use of information disseminated shall be limited to the purpose for which it was intended. The information may not be disseminated further.*

***This is a name base criminal history only, for a more accurate criminal history fingerprints will need to be submitted.***

**Section 5: Agency Use Only**

Date Processed: \_\_\_\_\_ SID: \_\_\_\_\_ FBI: \_\_\_\_\_  
Operator's initials: \_\_\_\_\_ Mailed: \_\_\_\_\_ Picked Up: \_\_\_\_\_ GCIC 001