



**CG-AM/SP LICENSE AMENDMENT REQUEST(S) AND SPECIAL PERMISSION**

State Form 52682 (R3 / 07-07)

INDIANA GAMING COMMISSION

*INSTRUCTIONS: Amendments to a Annual or Single Event must be requested **30 days before** the date of event.*

**SECTION 1** Information - **Must be completed. Please submit this first page along with all sections you have completed.**

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

Officer making request: (print name) \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Contact Phone #: \_\_\_\_\_

Organization Daytime Phone #: \_\_\_\_\_

License Type you're amending: \_\_\_\_\_

Current License #: \_\_\_\_\_

- 1) The information requirements on amendment request(s) is the same as that which is requested on the original application. Be sure all information is included. Requests can be faxed to (317) 232-0117 or mailed to Indiana Gaming Commission, Charity Gaming Division, 101 W. Washington St., East Tower, Suite 1600, Indianapolis, Indiana 46204.
- 2) No individual can be an operator on two (2) different organizations licenses.
  - a. If an individual is on one organizations license already, they first must be removed from that license (by that individual or by that organizations request in writing) & then that same person must wait one calendar month from that official change before they can be added on to your license.
- 3) Any amendments to the organizational license must be signed by the presiding officer.
  - a. The officer must be on the most recent "Current Officer Listing" (COF) we have on file. If the current officers have changed, especially after the original license was issued, please submit an updated COF with this request.
- 4) If the event facility address has changed, a copy of the new signed lease or donation statement showing the new address must be included with the request. In the case of a new facility being purchased, a copy of the signed purchase agreement must be included.
- 5) Please type or write information legibly and be sure all completed pages have the presiding officer's signature and is dated.

**SECTION 2**

**OPERATOR & WORKER INFORMATION**

Attach additional copies if needed.

Amendments should be requested **30 days before** the date of event.

Reminders: \* Operators must have been a member of the organization for 1 full year & workers must have been a member for at least 30 days.

List below: **OPERATORS to be ADDED** to License: License # \_\_\_\_\_

Driver's License or State I.D.	Name	Address	Date of Birth mm / dd / yy	Daytime phone (with area code)	Mos./Years with Organization	Member Yes or No	Employee Yes or No
			/ /	( )			
			/ /	( )			
			/ /	( )			
			/ /	( )			

List below: **WORKERS to be ADDED** to Event:

Driver's License or State I.D.	Name	Address	Date of Birth mm / dd / yy	Daytime phone (with area code)	Mos./Years with Organization	Member Yes or No	Employee Yes or No
			/ /	( )			
			/ /	( )			
			/ /	( )			
			/ /	( )			

Please list the **Operators and/or Workers** you wish to have **REMOVED** from your current licensed event. Current License # \_\_\_\_\_

- 1) \_\_\_\_\_ member  employee  3) \_\_\_\_\_ member  employee
- 2) \_\_\_\_\_ member  employee  4) \_\_\_\_\_ member  employee

Presiding Officer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION 3**

**“EVENT CHANGES” Request Form”**

Amendments should be requested **30 days before** the date of event.

Please answer each question below and then complete the specific changes need.

- \*has the event facility address changed:    yes     no
- \*has the event date changed:                    yes     no
- \*has the event playing time(s) changed:    yes     no

**ADDRESS CHANGES**

Previous Event Address	
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\* If the event facility address has changed, but is still leased or donated, a copy of the new signed lease or notarized donation statement showing the new address must accompany this request.

\*If the new event facility was purchased, a copy of the signed purchase agreement must be sent.

New / Current Event Address	
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<b>DATE &amp;/OR TIME CHANGES</b>	
<b><u>Single Event Date &amp; Time Changes</u></b>	
Change Event <b>Date</b> FROM: (old date)	
Change Event <b>Date</b> TO: (new date)	

Previous Event **Time** from: Beginning Time \_\_\_\_\_ Ending Time \_\_\_\_\_

New Event **Time** to: Beginning Time \_\_\_\_\_ Ending Time \_\_\_\_\_

*(Please specify AM or PM - AM establishes the midnight hour and PM establishes the noon hour)*

<b><u>Annual License Date &amp; Time Changes</u></b>			
<b><u>REMOVE /OLD:</u></b> List week day &/or playing times		<b><u>ADD / NEW:</u></b> List week day &/or playing times	
Sun		Sun	
Mon		Mon	
Tues		Tues	
Wed		Wed	
Thur		Thur	
Fri		Fri	
Sat		Sat	

Current License #: \_\_\_\_\_ **Presiding Officer’s Signature:** \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION 4**

**SPECIAL PERMISSION REQUEST**

(PRIZE PAYOUT INCREASE)

Requests must be submitted 30 days before the date of event.

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

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

\$10,000 *(for Bingo Only)\**

\$20,000 *(for Door Prize Only)*

\$25,000 *(Raffle in conjunction with a Bingo Only)*

License Type:
Event Day & Date: Week Day: _____ / Date: _____
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 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                      Print Name                      Title                      Daytime Telephone Number                      Date

\_\_\_\_\_  
Signature of Secretary                      Print Name                      Daytime Telephone Number                      Date