NEW YORK STATE | Gaming Commission | Division of Charitable Gaming

GC-2B Application for Games of Chance License
CALENDAR YEAR: _____

Name of Organization: _____

Games of Chance Identification Number: _____ Date: _____

SCHEDULE 5:DATES, HOURS AND RENT OF ALL LICENSE PERIODS TO BE HELD

(NOT APPLICABLE FOR BELL JAR GAMES)

DATE	HOURS	RENT
___/___/___	___:___ am/pm - ___:___ am/pm	$ _____
___/___/___	___:___ am/pm - ___:___ am/pm	$ _____
___/___/___	___:___ am/pm - ___:___ am/pm	$ _____
___/___/___	___:___ am/pm - ___:___ am/pm	$ _____
___/___/___	___:___ am/pm - ___:___ am/pm	$ _____
___/___/___	___:___ am/pm - ___:___ am/pm	$ _____
___/___/___	___:___ am/pm - ___:___ am/pm	$ _____
___/___/___	___:___ am/pm - ___:___ am/pm	$ _____
___/___/___	___:___ am/pm - ___:___ am/pm	$ _____
___/___/___	___:___ am/pm - ___:___ am/pm	$ _____

RAFFLES

DRAWING DATE	DRAWING TIME	DRAWING LOCATION (Address)	PRIZES (Cash or Fair Market Value of Merchandise)
___/___/___	_____ am/pm	_____	_____
___/___/___	_____ am/pm	_____	_____
___/___/___	_____ am/pm	_____	_____
___/___/___	_____ am/pm	_____	_____
___/___/___	_____ am/pm	_____	_____
___/___/___	_____ am/pm	_____	_____

SCHEDULE 6: EXPENSES

List items of expense to be incurred, and the names and addresses of vendors.

ITEM OF EXPENSE	VENDOR NAME	ADDRESS	STATE	ZIP
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

PO Box 7500, 354 Broadway, Schenectady, NY 12301-7500
www.gaming.ny.gov

GC: ____-_____-_____-_____

SCHEDULE 7: TYPES OF GAMES

List all of the single types of games to be conducted at all license periods enumerated in Schedule 5.

For Casino Games Licenses: Except for merchandise wheels and raffles, no series of prizes on any one occasion shall aggregate more than four hundred dollars when the licensed authorized organization conducts five single types of games of chance during any one license period. Except for merchandise wheels, raffles and bell jars, no series of prizes on any one occasion shall aggregate more than five hundred dollars when the licensed authorized organization conducts less than five single types of games of chance, exclusive of merchandise wheels, raffles and bell jars, during any one license period.

LIST NAME OF EACH TYPE OF CASINO GAME (Limit: 5 Games)		LIST THE MAXIMUM AMOUNT OF PRIZES TO BE AWARDED FOR EACH TYPE OF CASINO GAME (STARTING/GAME BANK)
_____	at	$_____
_____	at	$_____
_____	at	$_____
_____	at	$_____
_____	at	$_____

For Merchandise Wheels, Bell Jars and Raffles, please complete the appropriate spaces below.

MERCHANDISE WHEELS:

INDICATE NUMBER OF MERCHANDISE WHEELS (NO LIMIT)

_____

THE TOTAL AMOUNT OF PRIZES FOR EACH MERCHANDISE WHEEL SHALL NOT EXCEED $10,000 AND NO SINGLE PRIZE SHALL EXCEED $250

BELL JAR:

INDICATE IF THIS APPLICATION IS FOR A BELL JAR LICENSE

YES ☐ NO ☐

THE TOTAL AMOUNT OF PAYOUTS FOR EACH BELL JAR DEAL SHALL NOT EXCEED $6,000 AND NO SINGLE PRIZE SHALL EXCEED $1,000

RAFFLES:

INDICATE IF THIS APPLICATION IS FOR A RAFFLE LICENSE

YES ☐ NO ☐

IF YES, LIST RAFFLE DATES, TIME(S) OF DRAWING(S) AND PRIZES IN SCHEDULE 5

THE TOTAL AMOUNT OF PRIZES FOR ALL THE RAFFLES CONDUCTED DURING THIS CALENDAR YEAR SHALL NOT EXCEED $3,000,000. NO SINGLE PRIZE SHALL EXCEED $300,000. NO SERIES OF PRIZES AWARDED BY RAFFLE SHALL HAVE AN AGGREGATE VALUE IN EXCESS OF $500,000