



OFFICE OF THE CITY CLERK

CITY HALL

10300 TORRE AVENUE • CUPERTINO, CA 95014-3255

TELEPHONE: (408) 777-3223 • FAX: (408) 777-3366

CUPERTINO.ORG

APPLICATION FOR BINGO PERMIT

1. Organization Name _____
Officer Name _____
Officer Address _____
2. Days of Operation _____ Hours of Operation _____
3. Address of Bingo game _____
4. Purpose of premises used by organization _____
5. Ownership of Bingo equipment _____
6. Name of person responsible for operation of Bingo game _____
7. Name of everyone who has any financial interest in Bingo game _____

8. Contact Name _____
Address _____
Telephone _____ Email _____

MUST HAVE THE FOLLOWING:

- _____ A. Consent for Sheriff to inspect bank account containing Bingo profits.
- _____ B. Statement of ownership/lease of premises.
- _____ C. Copies of exempt status from Internal Revenue and Franchise Tax Board or tax identification number.
- _____ D. Floor plan of room where gaming will take place showing the exit(s)
- _____ E. Will food or drinks be served? (Check one) Yes _____ No _____
If yes, describe the type, how it will be served, and where it will be prepared

Signature of person responsible for Bingo game _____

FEE: \$268.44 Annual License (*fee pursuant to Resolution No. 25-058*)

THIS LICENSE IS NONTRANSFERABLE

FOR OFFICIAL USE ONLY

Sheriff recommendation	YES	_____	NO	_____
Fire District	YES	_____	NO	_____
Health Officer	YES	_____	NO	_____
Building Official	YES	_____	NO	_____
Director of Planning	YES	_____	NO	_____
Business License No.	_____			

Approval:

Tina Kapoor, Interim City Manager

Date: _____

Attest:

Kirsten Squarcia, City Clerk

Date: _____