**APPLICATION FOR PERMIT TO RAFFLE LIQUOR**

This permit allows a bona fide charitable or nonprofit organization to raffle bottles of liquor or baskets that include liquor.

* The liquor must be purchased at retail or donated by a private citizen. It may not be donated by a liquor licensee.
* Only organization members may purchase tickets or be awarded prizes.
* The organization will not sell raffle tickets to anyone less than 21 years of age when alcohol is awarded as a prize.
* The organization will not sell more than $5,000 dollars’ worth of raffle tickets in a

calendar year.

(WAC 314-38-040)

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| **Permit Processing and Posting Information** | | | | | |
|  | Select from the following options. Make your check payable to WSLCB. | | | | |
|  | $10 fee for single event. | | | |
|  | $25 fee for annual permit. | | | |
|  | New application. | | | |
|  | Renewal: | Raffle Permit No. |  |  |
| Liquor License No. |  |  |
|  |  | | | | |
|  | Mail your completed and signed application and check to the above address 30 days before your ticket sales start. | | | | |
|  | Allow 7-14 business days for permit processing. Your permit will be mailed to you. | | | | |
|  | The permit must be posted at the location of the drawing- prior to and during the drawing. | | | | |
|  | If you have questions, please call Customer Service at 360-664-1600. | | | | |

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| **Applicant Information** | | | | |
| Full name of your organization: | | | | |
| UBI/EIN number: | | | | |
| Organization’s address (Street or Route, City, State, Zip Code): | | | | |
| Organization’s mailing address (if different from above) | | | | |
| Name of your organization officer in charge of raffle: |  | Officer’s e-mail address: | | | |
| Officer’s address (Street or Route, City, State, Zip Code) | | |  | Officer’s phone:  (     ) -       - |

**APPLICATION FOR PERMIT TO RAFFLE LIQUOR CONTINUED**

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| **Raffle Information – only required for an individual event (WAC 314-38-040)** | | | |
| The date the raffle ticket sales will start | | | |
| The date, time and exact location of the drawing: | | | |
|  | Date: |  | |
|  | Time: |  | |
|  | Exact Location: | |  |
| A description of the alcohol being raffled including its estimated value: | | | |
| The source of the alcohol to be raffled: | | | |

I declare under the penalties of perjury that the answers contain in this application are true, correct, and complete. The undersigned certifies it is understood that a misrepresentation of fact is cause for rejection of this application or revocation of any permit issued.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Print Name** |  |  |  | **Title:** |  |  |
| **Signature:** |  |  |  | **Date:** |  |  |