

Town of Portland, Connecticut

33 East Main Street • P.O. Box 71 • Portland, CT 06480-0071 www.portlandct.org • Phone: (860) 342-6715 • Fax: (860) 342-6714 Equal Opportunity Provider and Employer Office of the First Selectman

Application for Personal Identification Number (P.I.N.) Bingo Games

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Instructions:

- 1. Print or type; complete and attach Notice and Statement of Applicant.
- 2. Submit completed form to the Portland First Selectman.
- 3. A Personal Identification Number (P.I.N.) will be issued upon approval.

Name of Applicant (Last, First, Middle)					Social Security Number	
					-	-
Address of Applicant (No. & Street)			City		State	ZIP Code
How long at present address:		PREVIOUS ADDRESS (No. & Street, City/Town, State, ZIP)				
Date of Birth $(M D Y)$	Place of Birth			Sex $\Box F \Box M \Box N$	Height: B	Weight:
Have you EVER been convicted of any crime, felony, misdemeanor, disorderly persons offense or other than a traffic violation?					□YES □NO	
If "Yes" provide deta	ils:					
Organization Represe	ented (Name; No	and Street; Cit	ty or Towr	n; State; ZIP)		
Organization Identification Number				How long have you been a bona-fide member of organization?		
				YEARS:	MONT	HS:
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Have you ever applied for a P.I.N. to operate bingo games for any other organization? \Box YES \Box NO

If "Yes" provide details: (Organization Name; No. and Street; City or Town; State; ZIP)					
Applicant Signature (Sign in blue or black ink)	Date				

I hereby certify that the above named applicant is a bona-fide member of the represented organization.

Signature of Ranking Officer (NOTE: The applicant may not sign as an Officer)	Date

DO NOT WRITE BELOW THIS SECTION							
Application for P.I.N.: □ Approved □ Denied	Date:	P.I.N.					

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NOTICE AND STATEMENT OF APPLICANT

Instructions:

- 1. Please sign this form in the two areas provided below.
- 2. Submit completed form to the Portland First Selectman.

NOTICE

The purpose of this notice is to advise that all applicants for registrations/permits are individually checked for convictions of any crime other than traffic violations.

Your failure to truthfully disclose any such convictions, either for yourself or your spouse may result in the denial of your application for registrations/permits.

Similarly, your failure to provide all of the details of ANY conviction, such as the date of the conviction, the offense of which you were convicted, the court location where you were convicted and the disposition made by the court location where you were convicted and the disposition made by the court in your case – i.e., 30 days; \$50.00 fine, probation; etc. will also be cause for denial of the registration/permit.

In addition, any falsification or untruthful answer to any other question on the application may result in a denial of the registration/permit.

Please sign this form where indicated below.

I hereby acknowledge that I have read the foregoing notice.

Printed Name of Applicant

Signature of Applicant

Date

STATEMENT OF APPLICANT

BY THE ACCEPTANCE OF ANY REGISTRATION/PERMIT issued pursuant to this application:

I agree to abide by applicable Regulations.

I HEREBY CERTIFY that I have read the foregoing application and affirm that every statement contained therein is TRUE, COMPLETE AND CORRECT. I understand that if I misstate or omit any fact, I am subject to the penalties provided by law and by the above-mentioned applicable regulations.

I HEREBY AUTHORIZE the <u>Portland Police</u> to investigate any and all records concerning my background, including, but not limited to, any criminal convictions. I FULLY UNDERSTAND the preceding WAIVER.

Printed Name of Applicant

Signature of Applicant

Date

