



Charitable Bingo Operations Division

# Instructions – Texas Application to Amend a License to Conduct Charitable Bingo

B-AP-123 (Rev. 9/09)

### PUBLIC INSPECTION

This application and any attachments will be open to public inspection as required by the Texas Public Information Act.

### WHO SHOULD SUBMIT THIS APPLICATION

A licensed authorized organization should submit this application to change the organization’s licensed playing days, licensed playing times, licensed playing location, designated Bingo Chairperson, organization name, or primary business address.

### FOR ASSISTANCE

For assistance in completing this application, please call the Charitable Bingo Operations Division (CBOD) toll-free, at 1-800-BINGO-77 (800-246-4677).

### GENERAL INSTRUCTIONS

- You must submit your **current original license** if you are changing playing locations according to Section 2001.306(a)(c) of the Bingo Enabling Act (BEA). You should keep a copy of your original license posted until your new amended license is received (if submitted with your application).
- You may not begin your amended activities until you receive your new license and it takes effect.
- If you are amending your license to move to a new playing location or if you are moving your organization’s primary business address to a different location, you must submit *meeting minutes* indicating the reason and that your organization, as a whole, approved the move. The minutes should be signed by an officer, certifying to be true and complete, and indicate the exact playing location name and playing location address. If you are moving your primary business office to a new location that is not adjacent to the current county of your primary business office, submit a membership list that shows the names and county of residence of your members.
- If you are submitting an amendment application to *increase* your playing schedule, and you have been licensed for less than six (6) months, you will need to complete a *Schedule H Worksheet for Calculating License Fee* and pay any additional license fee amount that may apply.
- If you are changing your organization name, in addition to the completed application please submit: 1) meeting minutes where your organization voted, as a whole, to approve the name change; 2) a copy of the letter to the Internal Revenue Service (IRS) requesting them to update their records to reflect the new name; 3) a copy of all amended organizing instruments reflecting the new name; and 4) if you are affiliated with a state or national organization, a letter from that organization approving the name change.
- Do not return these instructions with your completed application.
- Do not leave any item on the application blank. If an item does not apply to your organization, enter “N/A.”
- Please type or print legibly all information.
- The information requested for individuals is necessary to conduct a criminal history background investigation, which is authorized under the BEA, Occupations Code, Chapter 2001.
- This application must have two (2) different signatures, one (1) by an operator of the organization and one (1) by the Bingo Chairperson.

**IMPORTANT NOTICE**

An amendment to your active license which changes the applicable Bingo Chairperson may also change the individual’s access to the on-line Bingo Services Center (BSC) and **anyone they have granted previous viewing access to**. The departing Bingo Chairperson will continue to have access to the BSC and your organization’s records only if he/she holds another active position listed on your bingo record. The new Bingo Chairperson may self-subscribe to the BSC and grant access to your organization’s bingo records to individuals not listed on your organization’s bingo record once the license takes effect. You may subscribe to the BSC at <https://www.txbingo.org>.

- Your ten dollar (\$10) amendment fee must be submitted with this application if your organization has not pre-paid the required amendment fee. This fee should be made payable to the State Comptroller from your bingo bank account. **APPLICATION SUBMISSION**

PLEASE SUBMIT YOUR COMPLETED APPLICATION, ALL SUPPLEMENTAL INFORMATION AND THE APPROPRIATE LICENSE FEE TO:

by mail:

**CHARITABLE BINGO OPERATIONS DIVISION  
TEXAS LOTTERY COMMISSION  
P.O. BOX 16630  
AUSTIN, TEXAS 78761-6630  
1-800-BINGO-77 (1-800-246-4677)**

for delivery:

**CHARITABLE BINGO OPERATIONS DIVISION  
TEXAS LOTTERY COMMISSION  
611 E. 6TH STREET  
AUSTIN, TEXAS 78701  
1-800-BINGO-77 (1-800-246-4677)**

Please retain these instructions and a copy of your completed application for your files.

### SPECIFIC INSTRUCTIONS

Items 1, 2, 3, 4, and 17 must always be completed when requesting an amendment to your bingo license. In addition to these items, complete only the items that apply to your requested change.

**Item 1** – Enter the eleven (11) digit taxpayer number as it appears on your regular license to conduct bingo.

**Item 2** – Enter the name of the organization as it appears on your regular license to conduct bingo. Check the corresponding checkbox if your organization is submitting the amendment application to change their organization name.

**Item 3** – Enter the appropriate complete mailing address to receive ALL bingo related correspondence for the applicant. Also include the organization’s Web site, optional e-mail address, fax number, and the name and daytime telephone number of the individual responsible for the completion of the application, as applicable.

**NOTE:** This address is where your amended license will be mailed.

**Item 4** – Indicate the date the organization wishes to start conducting bingo under the amended license. Please allow for processing time when requesting this date. If your organization desires to have the amended change effective the earliest possible date, check the corresponding checkbox and the license will be effective as soon as it can be confirmed that all requirements are met. The requested changes cannot begin until this amendment application has been approved and the amended license has been received by the organization.

**Item 5** – If your organization is amending from an administrative hold status, please indicate in the space provided what circumstances or events enabled your organization to file this application to begin conducting bingo again. Attach additional sheets if necessary.

**Item 6** – Check this box if you want to change your organizations playing days and times. You should enter the entire new schedule for the organization including the days and times that are not being changed. If you are increasing your playing times and you have been licensed for less than six (6) months, you will need to complete a *Schedule H Worksheet for Calculating License Fee* and pay any additional license fee. The days and times of each occasion may not exceed three (3) occasions per week and four (4) hours per occasion. List the days in order using Sunday as the first (1st) weekday available. When completing the times, 12:00 a.m. (midnight) is the first time available in a day, and the last available time for a day is 11:59 p.m., since 12:00 a.m. begins the next day. No more than two (2) occasions may be conducted on the same day at the same location except as allowed with a separate temporary license. The two (2) occasions may

be conducted on the same day by one (1) organization or by two (2) separate organizations each holding a single occasion.

**NOTE:** Please ensure that your proposed playing days and times DO NOT conflict with another organization(s) at your location.

**Item 7 –** Check this box and complete all appropriate information if you want to change your organization's primary business address. If you check this box, you must also complete Items 8 and 9. Enter the organization's complete primary business address where the regular meetings are held and records are maintained. This address must be a complete physical address and cannot include a PO Box or directions (i.e., 5 miles north of I-20).

**Item 8 –** Indicate if the organization, at a regular meeting of the membership, voted to change the primary business address. Attach a copy of the meeting minutes. The minutes should be signed by an officer, certified to be true and complete, and indicate the exact location or complete address.

**Item 9 –** Indicate if the organization is affiliated with a state or national organization. If "YES," attach a copy of the approval from the state or national organization for your organization to change its primary business address **if you are moving to a different county.**

**Item 10 –** Check this box and complete all appropriate information if you want to change your playing location. If you are moving playing locations, you must also complete Items 11 and 12. Indicate the name and complete physical address of the bingo hall where you are proposing to conduct bingo. The name and complete address will appear on your bingo license and should match the information provided by the commercial lessor, if applicable.

**Item 11 –** Indicate if the location entered in Item 10 is inside the city limits.

**Item 12 –** Indicate how the location is controlled by your organization. If the location is owned, enter the date the location was acquired. If the location is not owned by your organization, check the "Lease" box. Use of facilities free of charge would be considered leasing if the playing location is not owned by your organization.

**Item 13 –** If the location is leased, indicate the name, complete mailing address, and eleven (11) digit taxpayer number of the entity from whom you are leasing the premises. This information should match the information provided by the commercial lessor of the proposed bingo location, as applicable. If you are unable to obtain the taxpayer number, complete all information, except the taxpayer number.

**Item 14 –** Check this box if there is a change of your Bingo Chairperson. Enter the name and all requested information for the officer or member of your board of directors that will serve as the Bingo Chairperson for your organization. The Bingo Chairperson is responsible for overseeing the organization's bingo activities and reporting the membership regarding those activities.

**Item 15 –** This is the Certification of Responsibility to be signed by the Bingo Chairperson and an operator of the organization. If the Bingo Chairperson is unavailable, another officer may sign the Certification of Responsibility in lieu of the Bingo Chairperson. The signing operator must be listed on the Registry of Approved Bingo Workers and as an operator on the organization's bingo record. Two different persons should sign this form. PLEASE READ CAREFULLY.

## CHECKLIST

### REQUIRED FORMS AND PAPERWORK TO INCLUDE WITH YOUR APPLICATION:

You may use this checklist to ensure that your application is complete and that you have collected all required documentation to submit with it.

- 1. **Application.**
- 2. **Amendment Fee.** Made payable to State Comptroller.
- 3. **Current Bingo License.** Submit only if changing playing locations.
- 4. **Meeting Minutes.** Submit if changing playing location, primary business address, or organization name.
- 5. **Amended Organizing Instruments.** Submit copies if changing organization name.
- 6. **Letter of Approval from Parent Organization.** Submit if changing the county of your primary business address or organization name.
- 7. **Membership List.** Submit if changing your primary business address to a non-adjacent county.
- 8. **IRS Notification Letter.** If changing your organization name, submit a copy of the letter sent to the IRS informing them of the change.
- 9. **Schedule H - Worksheet for Calculating License Fee.** Must be completed if you are applying to increase your playing times and you have been licensed less than six (6) months.
- 10. **License Fee Amount.** If you are increasing your playing schedule, and you have been licensed for less than six (6) months, you must submit a new license fee worksheet and pay any additional license fee.
- 11. **Schedule B - Individuals for License to Conduct Bingo.** Submit if you wish to add new individuals to your bingo record.