City of Mississauga Compliance and Licensing Enforcement

300 City Centre Drive Mississauga, ON. L5B 3C1 Tel: 905-615-3200 ext. 5657 Fax: 905-615-3374



## Lottery Licensing Eligibility Application

Step 1

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## **Lottery Licensing Application Checklist**

Applying for a lottery licence is a two-step process:

You must apply for eligibility by completing an eligibility application form and providing all documents outlined in the checklist below. Our office will notify you within three weeks of receipt of your completed application package. If the application package does not include the required documents, we will notify you of the outstanding requirements. The three week's response time will be calculated on receipt of the completed package.

You may only proceed onto Step 2, applying for a licence if you're organization is deemed eligible.

| STEP 1 ELIGIBILITY REQUIREMENTS   |  |  |  |  |  |
|---|--|--|--|--|--|
|   |  |  |  |  |  |
| Eligibility Application – signed by 2 voting board members (President & Treasurer or VP)  Original signatures required. *Page 1 & 2   |  |  |  |  |  |
| Letters Patent + supplementary Letters Patent (if applicable)   |  |  |  |  |  |
| Revenue Canada Registration Approval Letter   |  |  |  |  |  |
| Constitution / By-laws bearing the date adopted and signatures of three directing officers.  Note that provincial gaming regulations require the following:  A general dissolution clause (that addresses the winding up of the organization)   |  |  |  |  |  |
| Not-for-Profit Annual Return (4022) <u>if applicable</u> or CRA - T3010 if you are a registered Charity - * provide the most recent copy  |  |  |  |  |  |
| General Dissolution Clauses+ – Should the organization dissolve   |  |  |  |  |  |
| Executive Board List – A complete list of your Board/ Executive indicating the title, name, address, telephone number and email for each. Indicate the expiry date of each person's term of the office. Please include Executive Financial Year End Statements Full Financial Statements (audited if applicable) for the past 2 years including all sources of income and all expenses, signed by President and Treasurer |  |  |  |  |  |
| Budget - Current Year   |  |  |  |  |  |
| List of proposed use of lottery proceeds (please be specific – allowable expenses are restricted and must be spent on items related to your organization's programs and services that provide a direct charitable benefit to the  |  |  |  |  |  |

You will be notified by the Charity Gaming office whether or not eligibility has been approved within 4 weeks. Approved organizations are required to complete the following 4 requirements.

|  | Open a Designated Lottery Trust Account or Designated Business Account depending on the licence or permit you are applying for. Our office will provide you with the details.   |  |  |  |  |  |
|--|---|--|--|--|--|--|
| Alcohol and Gaming Commission of Ontario requires an additional Dissolution Clause regarding lor assets purchased using lottery funds. If the organization should dissolve provides for the distribution organization's assets and property held or acquired from the proceeds of licensed lottery events (i.e., accounts or property purchased with lottery proceeds) to charitable organizations that are eligible to relottery proceeds in Ontario, approved by the licensing authority.  If your organization is approved you will be required to update your Constitution and or By-Laws to include clause. Ontario Lottery Gaming has Policies and Standards which speaks to assets and property and from the proceeds of a lottery event permitted under OLG. |   |  |  |  |  |  |
|  | <b>Proposed use of lottery proceeds</b> (please be specific – allowable expenses are restricted and must be spent on items related to your organization's programs and services that provide a direct charitable benefit to the community). |  |  |  |  |  |

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Lottery Licensing Eligibility Questionnaire

This questionnaire must be completed and forwarded to the Charity Gaming service counter, together with all required documents listed on the previous page.

| Registered Name of Organization:                                      |  |  |         |            |               |  |  |
|---|--|--|---------|------------|---------------|--|--|
| С   | official Address:  |  |         |            |               |  |  |
| Contact Name:   |  | Po   | sition: |            |               |  |  |
| Phone:  |  | En   | nail:   |            |               |  |  |
| 1.  | How long has the   | e organization been in operation?  |         |            |               |  |  |
| 2.  | What is the organ  | nization's fiscal year end?  | _       |            |               |  |  |
| 3.  | Is the organization  | on registered as a Charity with Revenue  | Canada? | Yes        | □ No □        |  |  |
|   | Please provide re  | egistration date and number:   | _       | YY/MM/DD   | #             |  |  |
| 4.  |  | on registered as a not-for-profit organiza<br>Ministry of Government Services? | tion    | Yes        | No            |  |  |
|   | Please provide re  | egistration date and number:   | _       | YY/MM/DD   | #             |  |  |
| 5.  | How many memb  | pers are there in the organization?  | _       |            |               |  |  |
| 6.  | . Which of the four classifications of charitable objects matches the <u>primary</u> purpose of the organization? <b>Circle relevant categories</b>  |  |         |            | organization? |  |  |
|   | <ul> <li>a) the relief of poverty;</li> <li>b) the advancement of education;</li> <li>c) the advancement of religion; or,</li> <li>d) any other charitable purpose beneficial to the community not falling under a, b or c: (please check one) <ul> <li>culture and arts;</li> <li>health and welfare;</li> <li>amateur sports organizations;</li> <li>the enhancement of youth;</li> <li>public safety programs;</li> <li>community service organizations;</li> </ul> </li> </ul> |  |         |            |               |  |  |
| 7.  | What type of lotte   | ery event?   | Bingo   | BOT Raffle | Bazaar        |  |  |
| 8.  | Has your organiz   | ration been licensed in any municipality?                                      |         | Yes        | No            |  |  |
| Indicate when did your last licence expire and in which municipality? |  |  |         |            |               |  |  |

| 9.  | Has the | e organization been refused a lottery licence by any municipality?  | 'es   |                    | No                                  |
|-----|---------|---|-------|--------------------|-------------------------------------|
|     | Provide | e the reason(s) for refusal:  |       |                    | <del> </del>                        |
| 10. | and is  | revenues must be spent in a manner which provides a direct benefit primarily consistent with the mandate of the organization. Explain in detail the proponal pages if required: | to th | e reside<br>use of | ents of Mississau<br>proceeds. Atta |
|     |         |   |       |                    |                                     |
| -   |         |   |       |                    |                                     |
|     | a)      | Are your services restricted to members only?   | Yes   |                    | No                                  |
|     | b)      | Are these services performed without profit?  | Yes   |                    | No                                  |
| 11. | List yo | ur organization's charitable programs and services.   |       |                    |                                     |
|     |         | Name of program or service  |       | (\$)               | Yearly Cost<br>Incurred             |
|     |         |   |       |                    |                                     |
|     |         |   |       |                    |                                     |
| •   |         |   |       |                    |                                     |
| -   |         |   |       |                    |                                     |
|     |         |   |       |                    |                                     |
|     |         |   |       |                    |                                     |
|     |         |   |       |                    |                                     |
| ļ   |         |   |       |                    |                                     |
| 12. | Provide | e your Organization's website:  |       |                    |                                     |
|     |         |   |       |                    |                                     |
|     |         |   |       |                    |                                     |
|     |         |   |       |                    |                                     |

## **Declaration**

We, as principal officers of this organization declare:

- All information provided in this application is true and correct.
- If eligible status for lottery licensing is granted, we undertake to comply with all the terms and conditions of any such licence issued.
- We are aware and will abide by all lottery and licensing regulations.

| Name: Position: Phone: Email: | Name:  Position:  Phone:  Email: |
|-------------------------------|----------------------------------|
| Signature: Date:              | Signature: Date:                 |
| Name: Position: Phone: Email: | Name: Position: Phone: Email:    |
| Signature: Date:              | Signature: Date:                 |