



PARISH ATTORNEY/GAMING ENFORCEMENT DIVISION  
PARISH OF EAST BATON ROUGE

LICENSE APPLICATION FOR COMMERCIAL HALL  
(Use Black Ink Only)

License for Calendar Year \_\_\_\_\_ Application Date \_\_\_\_\_

License Fee \$500.00 Permit Number \_\_\_\_\_

Specify Types of Services to be Conducted: \_\_\_\_\_

\_\_\_\_\_

Applicant:

Name of Organization \_\_\_\_\_

City/State/Zip Code \_\_\_\_\_ Telephone Number \_\_\_\_\_

\_\_\_\_\_

Partnership: \_\_\_\_\_ Individual Ownership: \_\_\_\_\_ Corporation: \_\_\_\_\_

Type of Organization \_\_\_\_\_ Articles of Incorporation \_\_\_\_\_

List the Names, Titles, Addresses and Telephone Numbers of the Officers and Board Members of Organization  
(Attach List if Necessary):

Name \_\_\_\_\_ Name \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

City/State/Zip Code \_\_\_\_\_ City/State/Zip Code \_\_\_\_\_

\_\_\_\_\_

Phone No. (Work) \_\_\_\_\_ (Home) \_\_\_\_\_ Phone No. (Work) \_\_\_\_\_ (Home) \_\_\_\_\_

Driver's License No. \_\_\_\_\_ Driver's License No. \_\_\_\_\_

Date of Birth \_\_\_\_\_ Date of Birth \_\_\_\_\_

Owner/Hall Manager(s):

Name \_\_\_\_\_ Name \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

City/State/Zip Code \_\_\_\_\_ City/State/Zip Code \_\_\_\_\_

Phone No. (Work) \_\_\_\_\_ (Home) \_\_\_\_\_ Phone No. (Work) \_\_\_\_\_ (Home) \_\_\_\_\_

Driver's License No. \_\_\_\_\_ Driver's License No. \_\_\_\_\_

Date of Birth \_\_\_\_\_ Soc. Security # \_\_\_\_\_ Date of Birth \_\_\_\_\_ Soc. Security # \_\_\_\_\_

Position \_\_\_\_\_ Position \_\_\_\_\_

Have You Ever Been Convicted of a Crime? \_\_\_\_\_ Have You Ever Been Convicted of a Crime? \_\_\_\_\_

Continue: Owner/Hall Manager(s):

Name \_\_\_\_\_ Name \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

City/State/Zip Code \_\_\_\_\_ City/State/Zip Code \_\_\_\_\_

Phone No. (Work) \_\_\_\_\_ (Home) \_\_\_\_\_ Phone No. (Work) \_\_\_\_\_ (Home) \_\_\_\_\_

Driver's License No. \_\_\_\_\_ Driver's License No. \_\_\_\_\_

Date of Birth \_\_\_\_\_ Soc. Security # \_\_\_\_\_ Date of Birth \_\_\_\_\_ Soc. Security # \_\_\_\_\_

Position \_\_\_\_\_ Position \_\_\_\_\_

Have You Ever Been Convicted of a Crime? \_\_\_\_\_ Have You Ever Been Convicted of a Crime? \_\_\_\_\_

The Following Items Will Be Attached and Made a Part of This Application:

Copy of State Gaming License, List of Employees (Addresses & Phone Numbers), Audit Agreement, and Criminal History Waivers.

Statement:

I am a member in good standing with the named organization (applicant). I declare the above statement to be true and correct and will conduct the above business in accordance with the authority granted to me by the applicant and in accordance with the terms of the ordinance and license, if such license be granted.

It is further understood that the applicant cannot conduct any business until such time that this application is approved by the Gaming Enforcement Division.

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_, being first duly sworn on oath disposes and says above statement is true and correct, that he has read each of the questions to which he had made answer, and that his said answers in each instance are true and correct.

Sworn to and subscribed before me, this \_\_\_\_\_ day of \_\_\_\_\_ 200\_\_\_\_\_ .

Notary Public \_\_\_\_\_

Any misstatement or concealment of fact in an application shall be grounds for suspension or revocation action by the Gaming Enforcement Division.