

TOWN OF PARADISE

5555 Skyway, Paradise, CA 95969 (530)872-6291 Fax (530) 872-877-5059

INSTRUCTIONS TO APPLICANT

Bingo Games

In order to obtain your local permit for Bingo Games in the Town of Paradise, please complete the following items and return them to Paradise Town Hall Attn: Administrative Services Director. By applying for a Bingo Permit, you are also registering for the Town's Business license. (Business License Fee Waived)

- Completed and signed Business License Application
- Attach statement per section 5.12.050 (A-D & G)
- Certificate or determination of exemption under sections listed in Municipal Code section 5.12.020.
 - Or letter of good standing from the Exemption Division of the Franchise Tax Board in Sacramento under exemption section 23701d.
- Bingo Games License fee
 - Initial Fee made payable to the Town of Paradise (See current Master Fee Schedule)

You will be notified when your application has been approved. At that time an appointment will be scheduled to receive your Bingo Games license and ID Card.

- Approval by Administrative Services Director
- Approval by Town Manager
- Approval by Town Attorney
- Approval by Police Department
- Approval by Fire Department

Bingo Licenses are valid for twelve months (12) from the date of issue.

It is the responsibility of the applicant to know and understand the relevant Town municipal code section and any other state or federal codes which may apply.

The Town of Paradise Municipal Codes and current Master Fee Schedule can be found at www.townofparadise.com.

[•] It is unlawful for any person or entity to violate or fail to comply with the provisions of chapter 5.12 of the Paradise Municipal Code. Such violation shall be punishable as an infraction. • Under Federal and State law, a fee may be collected in addition to any other fees for compliance with disability access laws.



Town of Paradise

Business License Application

5555 Skyway Paradise, CA 95969 Tel: 530-872-6291 www.townofparadise.com

O New Business (\$40) O Renewal (\$25)	O Commercia	Al O Home Based Busine	ess () Bank	Located outside Paradise	
Info		ENESS INFORMATION section is available to the publi			
Business Name:					
Business Phone:		Business Website:			
Business Address:		Would you like your Business Name and Website included in an online directory?			
City:		State: ZIP Code:			
Business Mailing Address (if different) (Address, City	, State and ZIP):				
NAICS Code: If you do not know your NAICS code, visit https://www.census.gov/eos/www/naics/		Business Category (circle one Retail / Construction & Devel Production / Government & Real Estate / Other	opment / Techno	ology & Communication / Food Services & Ag thcare / Manufacturing / Tourism / Utilities /	
Number of Employees:		State of California Seller's Pe	rmit Number:		
Hours/Days of Operation:		Tax Exempt O Yes O No		Religious Organization O Yes O No	
Please describe in detail your business activity to be	conducted withi	n the Town of Paradise:			
EMERGENCY C		FORMATION (PLEASE L ntact information will be kept p		CONTACTS)	
Contact 1 – Business Owner Name:		Phone 1:		Phone 2:	
		Email:			
Contact 2 – Name and Relationship/Title:		Phone 1:		Phone 2:	
		Email:			
Contact 3 – Name and Relationship/Title:		Phone 1:		Phone 2:	
	Email:	Email:			
Property Owner Name (if different from business ow	/ner)	Phone 1:		Phone 2:	
		Email:			
Alarm Permit Number:		Alarm Type (circle all that ap	ply):		
Alarm Company:		Water Flow / Smoke Detector / Heat Detector / Manual Pull Box / motion – intruder / Other			
Responsible Contact:					
Janitorial Service:		Phone: Hours at Location:			
BUTI DING INFO	DMATTON (NOT REQUIRED IF LOCA			
Info	ormation in this	section is available to the publi	c if requested	L PARADISE)	
Structure Type (circle one): Commercial / Residenti Manufacturing / Other	al Single Family	/ Residential Multi-Family / As	ssembly /	Floor plan diagram (Optional FD Use)	
Animals Located on Business Premise?		Fire Suppression System (Sp O Yes O No	rinklers)?	Knox Box? O Yes O No	
Utility Shutoff Locations : Gas:		Hazardous Materials on site? Hazardous Materials Location	ו:	O No	
Electric:		For information on reporting require http://www.buttecounty.net/publichea		th/Hazmat-CUPA.aspx	

	Information	r. Paradise, CA 95969 (530)	Renewal
Specialty Permit	Information		
	TO BE COMPL	ETED BY APPLICANT	
Applicant Name:		Event Location:	
Home Address:		Event Dates:	to
City:	State ZIP:	Event Times:	to
Home Phone:	-	Event Dates:	to
DOB:	SSN:	Event Times:	to
CDL:	State Expires:	Event Locate	d in Downtown Paradise Area
Mobile	E-Mail	Type of Merchan	dise being sold?
Address:		From	то
Address:		From	Το
Address:		From	То
		YES	NO
•	ted of a felony, as defined by California law?		
If YES, Date of conviction:		Offense	
If YES, Date of conviction:	••••••	Offense	nal Code?
If YES, Date of conviction: Have you ever been require YES	to register with a law enforcement agency pu	Offense ursuant to Section 290 of the Pe Law Enforceme or make any false or fraudulent	nal Code?