



NEW HAMPSHIRE
LOTTERY COMMISSION

**Investigation &
Compliance Division**

**ANNUAL LUCKY 7
LICENSE REQUEST FORM**

OFFICIAL USE ONLY

Receipt #: _____

License #: _____

Date: _____

1. CHARITABLE ORGANIZATION'S INFORMATION

Organization's Name: _____

Organization's Address: _____

Street/PO Box

City/Town

State

Zip

Phone Number: _____

Organization's Email: _____

2. GAMING LOCATION

Lucky 7 ticket sales must be held at an approved location.

Name of Location: _____

Physical Address (*location where games will be held*): _____

Street/PO Box

City/Town

State

Zip

3. LUCKY 7 LICENSE PERIOD

Indicate the starting and ending month/year in the table below. These licenses may be issued for up to a 12-month period within a given calendar year.

Starting Month/Year	Ending Month/Year

The license period indicated above must start and end in the same calendar year.

4. ATTESTATION

I hereby certify that I am an official of the Charitable Organization authorized to sign and submit this application. I further certify, under penalty of unsworn falsification pursuant to RSA 641:3, that the information provided on this form and on any of the supporting documentation submitted with this application is true, accurate and complete, and that there are no willful misrepresentations in, or falsifications of the information provided herein. I acknowledge that giving false information is grounds for denial, suspension, or revocation of a gaming license.

*Signature of Authorized Official**

Printed Name

Date

**Authorized Official must be an individual identified in Section 4 of the "Charitable Organization Eligibility Determination" application. Proof of authority to sign and submit this application may be required.*

INSTRUCTIONS FOR COMPLETING AN ANNUAL LUCKY 7 LICENSE REQUEST FORM

A. LICENSING FEE

Submit the following payment with the request form:

- Payment equal to \$10.00 for each month listed in section 3.
*For example, for a license period of March- December, the fee for this license would be:
\$100.00 (10 months x \$10.00 = \$100.00).*

Checks and/or money orders must be made payable to “NH LOTTERY COMMISSION”.

B. SUBMITTING THE LICENSE REQUEST FORM

This request form must be received by the New Hampshire Lottery Commission at least 15-days, but no more than 45-days prior to the organizations first proposed lucky 7 game date.

Submit the completed form and license fee to:

NEW HAMPSHIRE LOTTERY COMMISSION
ATTN: INVESTIGATION & COMPLIANCE DIVISION
14 INTEGRA DR, CONCORD, NH 03301

Incomplete or incorrect forms **will be returned** to the applicant. This **will delay** the issuance of a license.

Please be aware that submission of an “*Charitable Organization Eligibility Determination*” application is required before a charitable organization can be authorized to operate or participated in charitable gaming.

If any information provided on or with the form changes or is found to be inaccurate, the applicant must submit updated or corrected information to the NH Lottery’s Investigation & Compliance Division within 10 days of the event that resulted in the change, or discovery of the inaccuracy.

C. QUESTIONS OR CONCERNS

Questions in regards to this form? Contact the NH Lottery Investigation & Compliance Division by phone at (603) 271-7613 or by email at licensing@lottery.nh.gov **OR** visit our website at www.racing.nh.gov.