For your application to be processed you must fulfill ALL of the following requirements:

1. Complete application, signed, dated and notarized. The application must be filed in original form and all signatures must be originals.

2. Submit nonrefundable license fee.

3. List of employees who will work at the bingo and receive compensation.

4. Must attach a copy of Articles of Incorporation, if applying as a corporation.

5. Must attach a copy of Articles of Organization and Operating Agreement, if applying as a Limited Liability Corporation (LLC).
Mail application and make check payable to: SC Department of Revenue, Bingo Licensing & Enforcement, Columbia, SC 29214-0945. Telephone (803) 898-5393 - Email bingo@dor.sc.gov – Website dor.sc.gov

The application must be filed in original form, and all signatures must be original. We cannot accept carbon or photo copy applications nor stamped, traced, facsimile, or other signatures.

Fee Due -  
- $100.00 (Games are to be played 10 days or less)  
- $200.00 (Games are to be played more than 10 days)

Please print or type all information

1. Name of Applicant __________________________________ SSN or FEIN __________________________
   Type of Ownership  
   - Individual  
   - Partnership  
   - Corporation
   Street Address ______________________________________________________
   City __________________________ State _______________ Zip ___________

2. This license is to conduct the Bingo Game at the following fair:
   Name of Fair ______________________________________________________
   Location of Game __________________________________________________
   Street (No PO Box) __________ City, State, Zip _________________________

3. Has fair been recognized by the governing body of the county in which it is to be held (County Fair) or by the South Carolina Agricultural and Mechanical Society (State Fair)?  
   - Yes  
   - No If no, a Class D license will not be issued.

4. Dates games to be played:  
   Start __________________________ End __________________________

5. Provide the following information for each business Owner, Partner, or Officer. Under Section 12-21-4260, a person licensed shall submit to a background investigation. This includes each partner of a partnership and each director and officer and all stockholders of 10% or more in a parent or subsidiary corporation. The department has sole discretion to issue the license based on the background investigation. If additional space is needed, please attach the additional information to this application.

<table>
<thead>
<tr>
<th>Name/Position Held</th>
<th>Home Address</th>
<th>Date of Birth</th>
<th>Social Security Number</th>
<th>% Owned</th>
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6. Provide the following information for each person who will work at the proposed bingo games and who will receive compensation for the work. Under Section 12-21-4060, a person who has been convicted within the last twenty years of violating a state or federal criminal statute relating to gaming or gambling, or who has been convicted of any other crime that has a sentence of two or more years, or where applicable, whose promoter's license has been revoked by the department is not permitted to manage or conduct a game or assist in any manner with the bingo operation. If additional space is needed, please attach the additional information for this application.

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<th>Name/Position Held</th>
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<th>Date of Birth</th>
<th>Social Security Number</th>
<th>Work to be performed</th>
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AFFIDAVIT

STATE OF SOUTH CAROLINA

County of ______________________________

I, _________________________________ , _________________________________

(Name) (Title)
of the company or entity do swear (or affirm) that the information contained herein and on the attached sheets is, to the best of my knowledge and belief, true and correct. I further agree that the game of Bingo will be conducted as outlined in Section 12-21-3910 and 12-21-3920 of the S.C. Code, and to advise the department, in writing, within 30 days of any changes in the information supplied on this application/renewal.

_________________________________________  ____________________________
Signature                                      Date

Sworn to and subscribed before me this ______________ day of ____________, 20 _____.

_________________________________________
(Notary Public of S.C.)