Montana Code Ar Montana Administrative Rules 23.	BINGO APPLICATION nnotated 23-5-405-410; 412; 414 .16.1301-1306; 23.16.2404; 23.16.2406-2407 icense Fee per Premises	FORM 2. REVISED 02/2013 For Office Use Only Check No Amount Refund	
	ANT INFORMATION		
Operator Number			
Establishment Name	Establishment Phone	<u> </u>	
Email			
Mailing Address	City	State Zip	
Which GAMES ARE		ARE YOU AN	
You Licensing?	Exempt Loo	EXEMPT LOCATION?	
Keno and/or	□ Yes	🗆 No	
Bingo	(4), (8), or (19), provide a co	If your organization is exempt under 26 U.S.C. 501(c)(3), (4), (8), or (19), provide a copy of the IRS exemption. If exempt under this section, a fee is not required.	
I certify that this in	<b>ERTIFICATION</b> Information is true and correct. Name of Person Signing	Date	
ATTACH FEE AND SEND APPLICATION TO: Montana Department of Justice, Gambling Control Division 2550 Prospect Ave. • PO Box 201424 • Helena, MT 59620-1424 Phone: (406) 444-1971 • Fax: (406) 444-9157 Email: gcd@mt.gov www.dojmt.gov/gaming/		Staple Payment Here Payable to: Gambling Control Division	