



# THE DISABILITY RESOURCE NETWORK

525 Main Street, Groveport, Ohio 43125  
Phone: (614) 830-0584 • Fax: (614) 830-0866

## Information needed for a Type III Bingo License.

### The Network will need:

#### 1. Hours of Operation

Sunday \_\_\_\_\_ to \_\_\_\_\_

Monday \_\_\_\_\_ to \_\_\_\_\_

Tuesday \_\_\_\_\_ to \_\_\_\_\_

Wednesday \_\_\_\_\_ to \_\_\_\_\_

Thursday \_\_\_\_\_ to \_\_\_\_\_

Friday \_\_\_\_\_ to \_\_\_\_\_

Saturday \_\_\_\_\_ to \_\_\_\_\_

#### 2. Name of Business

\_\_\_\_\_

#### Legal Name of Business

\_\_\_\_\_

#### Business Address

\_\_\_\_\_

3. Liquor Permit Number \_\_\_\_\_

4. Estimated Gross Receipts for last year \_\_\_\_\_

5. Name of workers and info \_\_\_\_\_

6. Your Full Name and Title \_\_\_\_\_

7. Do you own the building \_\_\_\_\_

8. If not, who owns the building? \_\_\_\_\_

9. Copy of your occupancy permit \_\_\_\_\_

10. I will also need your Tax I. D. Number \_\_\_\_\_

The Network can supply you with Ohio Lottery Commission forms to reference. You do not need to fill out these forms; I'll do that and then meet with you to have the official application signed.

Thank You,

The Network