

### Arizona Department of Revenue

### Application for Bingo License Packet

#### This Application for Bingo License Packet includes:

- Arizona Form 833 Application for Bingo License
- Arizona Form 830 Affidavit
- Arizona Form 832 —
   Endorsement by Local Governing Body

It is advisable that you obtain and review a copy of the Arizona Revised Statutes on "Games of Bingo" and the Administrative Rules prior to initiating an application. These documents outline qualifications and requirements for obtaining a bingo license and may be obtained from:

- www.azleg.gov/ and
- www.azsos.gov/public\_services/table\_of\_contents.htm

All forms must be complete and legible. Please type or print using black ink only. Forms are available in a fillable pdf format at Arizona Department of Revenue (ADOR) web site www.azdor.gov. Be sure to include on your application a telephone number where you (or another party responsible for the games) can be reached during the day.

The bingo license package for **new** license and appropriate fees must be sent to and approved by the local governing body (the city council for incorporated cities or the county board of supervisors for unincorporated areas) prior to submission to the ADOR Bingo Section. Upon their approval or disapproval, the local governing body will forward the license package to the ADOR Bingo Section.

#### **Endorsement By Local Governing Body Form**

Complete lines 2, 3, and 4 of *Arizona Form 832*, *Endorsement by Local Governing Body* and submit to your local governing body with the bingo license package. A bingo license cannot be issued until this form is received by the ADOR Bingo Section.

As part of the review of your application for a bingo license, the ADOR Bingo Section will conduct an analysis of any purchase agreement for either equipment and/or real property to determine that such agreement is bona fide. This analysis is conducted pursuant to A.R.S. 5-406.F. The Bingo Section does not "approve" these agreements as to content or other legal ramifications. You are strongly advised to consult with independent legal counsel to determine your rights and obligations under these agreements.

If you need additional forms or have any questions, please call the ADOR Bingo Section in Phoenix at (602) 716-7801.

#### CHECKLIST:

Send copies of all documents listed below unless otherwise noted. Before mailing, check to make sure that you have included the following:

- 1 Original completed Application for Bingo License (Arizona Form 833).
- Original completed affidavits (Arizona Form 830).

  Class B and Class C applicants must include a completed affidavit for each person participating in the conduct of your games. Class A applicants must include a complete affidavit for each person participating as a manager, proceeds coordinator and supervisors.
- 3☐ Rental agreement if more than one licensee is using the same rented premises in which to hold bingo.
- 4☐ Application for Special Bonus Game (Arizona Form 831) available at www.azdor.gov. If you do not conduct special bonus games do not complete the application.
- 5⊠ License fee payable to the Arizona Department of Revenue:

License Type	Fee
Class A	\$10.00
Class B	\$50.00
Class C	\$200.00

6 ☑ The local governing body fee will be payable to the appropriate local governing entity:

Fee
\$5.00
\$25.00
<b>\$</b> 50.00

- 7☐ If applying as a qualified organization, a current membership list must be submitted and must indicate initial membership dates for all members of the applicant organization. Any person from any branch of the applicant who will be participating in the operation of bingo games must be included on the membership list.
- 8 If applying as a qualified organization, the following must be submitted: charter documents, articles of incorporation, corporate bylaws, articles of association, minutes of the establishment meeting, and minutes of meetings for two years (two months of each year) immediately prior to the date of application for the applicant, parent and auxiliary.
- 9☐ Purchase agreement for real property (where applicable).
- 10 Purchase agreement/bill of sale for bingo equipment and supplies.
- 11 Original local governing body endorsement.

# Arizona Form 833

## **Application for Bingo License**

- Type or print in black ink and complete all information requested on this form. If you do not, your application will be returned. All information is subject to verification. If you need more space, attach additional sheets.
- All bingo licenses expire one year from the date of issue. To continue conducting live bingo games, you must renew your license prior to the expiration date pursuant to A.R.S. §§ 5-403(C) and 5-410.

prior to the expiration date pursu	dir to A.R.S. 93 3	TOS(C) and	7 7 TU.				
Applicant's Name					Falsific	cation of	information
Native Grill and Wings					11		is application
2a Mailing Address					11		• •
21164 N John Wayne Parkway					l		ss 6 felony.
2b City			ZIP Code			SE ONLY. DO N	OT MARK IN THIS AREA.
Maricopa		AZ	85139		88		
a Administrative Office Location					11		
21164 N John Wayne Parkway					<b>]</b> ]		
b City			ZIP Code		11		
Maricopa			85139		4 1		
a Name of Contact Person		4b Teleph			Ш		
Michael Wheeler		(520) 56		_			
· · · · · · · ·		4c Fax No	0.		81 PM		80 RCVD
maricopa@nativegrillandwings.co	om				] ]		
	cial unteer Fire Depa	artment	☐ Religion	us wners As:	sociation	☐ Veterans ☐ Nonprofit	Ambulance Service
6 Class B and Class C license ap	plicants only ap	oplying as	a qualified	organizat	tion, <i>provide</i>	parent or a	uxiliary information.
6a Parent Name			6b Auxil	iary Name			
Address – Number and Street, Rural R	t., Apt. No.		Address	– Number	and Street, Rui	ral Rt., Apt. No	•
City	State ZIP Co	ode	City			State	ZIP Code
7 Class B and Class C license ap <u>Directors of the organization:</u> 7a Name	pplicants only a	applying	as a qualific		zation, <i>list th</i>	e current o	fficers or Board of
Title			Title				
Address Number and Street, Rural R	t., Apt. No.		Address	~ Number	and Street, Rur	al Rt., Apt. No	
City	State ZIP Co	ode	City			State	ZIP Code
7c Name			7d Name	9			· · · · · · · · · · · · · · · · · · ·
Title			Title	=====			
Address – Number and Street, Rural Rt	t., Apt. No.		Address	– Number	and Street, Rur	al Rt., Apt. No.	
City	State ZIP Co	ode	City			State	ZIP Code
8 Class B and Class C license appl Checking Account Number	icants only: Bir Bank Name	ngo <u>check</u>	ing account	information	on: Bank Branch		

Арр	MA6A (June (as shown on page 1)		A	PPLICATION FOR	R BINGO LICENSE
_					
9	Class B and Class C license applicants only: Bingo interes	st-bearing account in			
	Account Number Bank Name		Bank Bra	nch	
10	Class B and Class C license applicants only: List all office	ers and/or supervis	ors author	ized to sign check	s from the accounts
	listed above. If applying as a qualified organization, all super	isors must be me	mbers of the	ne applicant:	o nom ano docodna
	10a Name	10b Name			
	Title General Mangger	Title			
11	List the name(s) of the one or two persons who will serve a must be members of the applicant. Each person must submit	s managers. If app t an affidavit.	olying as a	qualified organiza	tion, these persons
	11a Name	11b Name			
-	Amber Milles	Jaylen Wheele	er		
	Title	Title			
	Assistant Manager	P.T-Manager			
12	List the name of the <b>one</b> person designated as proceeds coord <b>an officer or director</b> <u>and</u> <b>a member</b> of the applicant. Each p	dinator. If applying a	as a qualific an affidavi	ed organization, th	is person <b>must be</b>
	Name	Title			
	Michael Wheeler	General Mana	ger		
13	List the name(s) of the person(s) who will serve as supervison member of the applicant. Each person must submit an affidav	or. If applying as a	qualified o	organization, each	person <b>must be a</b>
	13a Name	13b Name			
	Title	Title			
14	List the name(s) of the person(s) who will serve as assistant member or new member of the applicant. Except for "Class A	s. If applying as a	qualified o	rganization, each t submit an affidav	person must be a it.
	14a Name	14b Name			
	14c Name	14d Name			
15	Street address of the <b>PHYSICAL</b> location where live bingo will 21164 N John Wayne Parkway Maricopa AZ 85139	be played:			-
16	Games of Bingo must not exceed 5 days a week. Indicate	the time on each	respective	day that live him	an will be played:
			HUR	FRI	SAT
	□a.m. □a.m. □a.m.	<b>□</b> a.m.	□a.m.	□a.m.	□a.m.
	p.mp.mp.m	р.т	<b>⊠</b> p.m.		

Continued on page 3 →

oplica	nt's N	Name (as shown on page 1)		A DRI IOATION FO	5 5W 55 1 10 5W 6
				APPLICATION FO	R BINGO LICENS
<b>7</b> In	dica	te the type of premises where bingo will be played.	Check one box:		
а	Ø	Neither rent nor mortgage will be paid from bingo f	unds.		
b		Rented or leased. Attach rental affidavit and copy			
		Landlord's Name	Address – Num	ber and Street, Rural Rt., Apt. N	0.
		Telephone Number (with area code)	City	State	ZIP Code
С		Owned solely by the organization. Attach copy of other related document:	of mortgage, deed of tr	ust, purchase agreement, es	scrow agreement,
		Holder of Mortgage	Address – Num	ber and Street, Rural Rt., Apt. N	0.
		Telephone Number (with area code)	City	State	ZIP Code
d		Owned jointly with other organization. Attach copy other related document:	of mortgage, deed of t	rust, purchase agreement, es	scrow agreement,
d				rust, purchase agreement, es	
d	0	other related document:			
d	0	other related document:  1) Holder of Mortgage	Address – Num	ber and Street, Rural Rt., Apt. No	o. ZIP Code
d		other related document:  1) Holder of Mortgage  Telephone Number (with area code)	Address – Num	ber and Street, Rural Rt., Apt. No State	o. ZIP Code
d		other related document:  1) Holder of Mortgage  Telephone Number (with area code)  2) Co-Owner Holder:	Address – Num  City  Address – Num  City	ber and Street, Rural Rt., Apt. No State ber and Street, Rural Rt., Apt. No	ZIP Code  ZIP Code
d		other related document:  1) Holder of Mortgage  Telephone Number (with area code)  2) Co-Owner Holder:  Telephone Number (with area code)	Address – Num  City  Address – Num  City	ber and Street, Rural Rt., Apt. No State ber and Street, Rural Rt., Apt. No State	ZIP Code  ZIP Code
Lis	t bin	other related document:  1) Holder of Mortgage  Telephone Number (with area code)  2) Co-Owner Holder:  Telephone Number (with area code)  3) Co-Owner Holder:  Telephone Number (with area code)  rgo licensees who are or will be conducting bingo	Address – Num  City  Address – Num  City  Address – Numi  City	ber and Street, Rural Rt., Apt. No State ber and Street, Rural Rt., Apt. No State ber and Street, Rural Rt., Apt. No State	ZIP Code  ZIP Code  ZIP Code
Lis fee	t bin	1) Holder of Mortgage Telephone Number (with area code) 2) Co-Owner Holder: Telephone Number (with area code) 3) Co-Owner Holder: Telephone Number (with area code)  relephone Number (with area code)  relephone Number (with area code)	Address – Num  City  Address – Num  City  Address – Numi  City	ber and Street, Rural Rt., Apt. No State ber and Street, Rural Rt., Apt. No State ber and Street, Rural Rt., Apt. No State	ZIP Code  ZIP Code  ZIP Code
Lis fee	t bin et of y	1) Holder of Mortgage Telephone Number (with area code) 2) Co-Owner Holder: Telephone Number (with area code) 3) Co-Owner Holder: Telephone Number (with area code)  relephone Number (with area code)  relephone Number (with area code)	Address – Num City Address – Num City Address – Num City City in the same premises a	ber and Street, Rural Rt., Apt. No State ber and Street, Rural Rt., Apt. No State ber and Street, Rural Rt., Apt. No State	ZIP Code  ZIP Code  ZIP Code

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					APPLICATION FOR	R BINGO LIC
Εx	pected bingo expe	nses:				
а	Mortgage:	<b>\$</b> , 0.00	per month			
•	Payable to	Ψ <u>σ.σ.σ</u>	per monu	Address - Number	r and Street, Rural Rt., Apt. No	).
				N.	,	
	Telephone number	(with area code)		City	State	ZìP Code
,	Rent:	\$ <sub>.</sub> 0.00	per 🗖 mon	th  hour  occasior	1	
	Payable to				r and Street, Rural Rt., Apt. No	).
	Telephone number	(with area code)		City	State	ZIP Code
•	Janitorial Services	s: \$ <u>.0.00</u>	per 🗍 mon	th		
	Payable to			Address Number	and Street, Rural Rt., Apt. No	).
	Telephone number (	(with area code)		City	State	ZIP Code
	Accounting Servic	es: \$ <u>.</u> 0.00	per 🗍 mon	th hour ccasion	and Street, Rural Rt., Apt. No	)
1			per ☐ mont			ZIP Code
	Payable to Telephone number (	with area code)		Address – Number	and Street, Rural Rt., Apt. No. State	
	Payable to Telephone number ( Security Services:			Address – Number City  th  hour  occasion	and Street, Rural Rt., Apt. No State	ZIP Code
	Payable to Telephone number ( Security Services: Payable to	with area code)		Address – Number City  th  hour  occasion	and Street, Rural Rt., Apt. No. State	ZIP Code
	Payable to Telephone number ( Security Services:	with area code)		Address – Number City  th  hour  occasion	and Street, Rural Rt., Apt. No State	ZIP Code
	Payable to Telephone number ( Security Services: Payable to Telephone number (	(with area code) \$_0.00	per 🗖 mont	Address – Number  City  th hour ccasion  Address – Number  City	and Street, Rural Rt., Apt. No. State and Street, Rural Rt., Apt. No.	ZIP Code
	Payable to Telephone number ( Security Services: Payable to	with area code)		Address – Number  City  th hour ccasion  Address – Number  City	and Street, Rural Rt., Apt. No. State and Street, Rural Rt., Apt. No.	ZIP Code
	Payable to Telephone number ( Security Services: Payable to Telephone number (  Bingo Supplies:	\$ 0.00 with area code)	per 🗖 mont	Address – Number  City  th hour ccasion  Address – Number  City	and Street, Rural Rt., Apt. No. State  and Street, Rural Rt., Apt. No. State	ZIP Code
/ho	Payable to Telephone number ( Security Services: Payable to Telephone number ( Bingo Supplies: Payable to Telephone number (	with area code) \$_0.00 with area code) \$_250.00 with area code)	per 🗍 mont	Address – Number  City  th hour ccasion Address – Number  City  H  Address – Number  City	and Street, Rural Rt., Apt. No. State  and Street, Rural Rt., Apt. No. State  and Street, Rural Rt., Apt. No.	ZIP Code ZIP Code

Continued on page 5 →

Applicant's Name (as shown on page			APPLICA	ATION FOR BINGO LICENSE
I, MICHAEL WHEELER and file this application. I hereby				t I am duly authorized to sign the contents thereof and that
APPLICANT'S SIGNATURE			o the best of my knowled	
		Please mail to: zona Department of Re Monroe Street, Divisio Phoenix, AZ 85007		
Г	REVENUE	USE ONLY. DO NOT MARK I	N THIS AREA.	
☐ Approved ☐ Dis	sapproved	Class A License	Class B License	e Class C License
Reviewer's Name (please print)	Date	License Number	Effective Date	Expiration Date

Expiration Date

Arizona Form	
830	

## **Affidavit**

**Bingo** 

This affidavit must be completed by each person who wishes to assist in the conduct of any game of bingo. If any information is blank or incorrect, the affidavit will be returned to you. All information is subject to verification. Disclosure of your Social Security Number (SSN) is voluntary. This information may be used to establish positive identification for purposes of criminal background checks pursuant to A.R.S. § 5–404.

			•	
Licensee's Name	License Number			
MICHAEL WHEELER				
Position (check the appropriate boxes):				
	REVENUE USE ONLY. DO N	OT MARK IN THIS AREA.		
F			88	
Affiant's Name				
MICHAEL WHEELER	D			
Social Security Number	Date of Birth		11	
Address	0 3 2 4 1 9 7 3			
21164 N JOHN WAYME PARKWAY				
City	State	ZIP Code		
MARICOPA	AZ	85139	81 PM	RCVD
Home Phone No. (with area code)	Work Phone No. (with a		811	80 RCVD
(480) 845-9481	(520) 568-6077	,		
(100) 0 10 0 10 1	(020) 000 0011			
If licensee is a qualified organization, co	mplete the following	g section:		
Member?	Date Joined Organizat	ion		
☐ Yes    No				
Officers?	Officer Title			
Yes No				
Do you have an affidavit on file for any other licens  Tyes  No If "Yes", list license numl				
I, MICHAEL WHEELER	, the	above-named affiant, u	under penalty of perjury,	upon oath, depose
and say that I will conduct or assist in con	nducting all bingo ga	mes in compliance wit	h the terms of the license	. Arizona Revised
Statutes, Title 5, Chapter 4, and the rules o				
any misdemeanor involving moral turpitu	de or felony. I have i	not and shall not receiv	e any reward, compensat	ion or recompense
for my participation in the conduct of bir	ngo games except as	provided for by law.	I hereby swear or confirm	m that I have read
and understand the foregoing and verify	hat the information a	and statements made he	erein are true and correct	to the best of my
knowledge.				
mo w.euge.	Signa	M. Le attire of Affiant	60	
	Date	10/13/25		

Please mail to:
Arizona Department of Revenue
1600 W Monroe Street, Division Code 22
Phoenix, AZ 85007

**5** (602) 716-7801

Arizona Form 832	Endorseme	nt by Local G	overning Bod	у	Bingo
<ul> <li>License Applicants: Compl</li> <li>Local Governing Body: Co</li> <li>A.R.S. §§ 5-409 and 5-410</li> </ul>	mplete and return w	. Submit with er	ntire license packa	ge to local gov	erning body. le Bingo Section,
New Application	nge of Location	ate	License N	umber	
From (Name of local governing body)					
Address (number and street, PO Box)			REVENUE 88	USE ONLY. DO NOT	T MARK IN THIS AREA.
City	State	ZIP Code			
Phone No. (with area code)					
			81 PM		80 RCVD
This is to certify that on  Chapter 4, in the matter of:  Application for a bingo license  Application for a bingo license	e by the following ap		ted pursuant to Ar	izona Revised	Statute, Title 5,
2 Applicant's Name  Native (arill an  Location/Address where live bing  21144 N USAN Wayy	go will be conducted	d: City Marica	592		Code ろくろう
4 Fill in the time on the days live bit					
SUN MON	TUE	WED	THUR	FRI	SAT
□a.m. □a.m □p.m. □p.m	1 = 1	□a.m. □p.m. լ	□a.m. <b>⊠</b> o.m. ∟	□a.m. □p.m.	□a.m. □p.m.
5 Who is your live bingo supplier?	o Suppli	er			
Recommendation for the applicat	ion: 🗆 Approved	☐ Disapproved	1		
7 Specific reasons for disapproval a					
This endorsement r	must be signed by a	delegated author	ority of the local go	overning body.	
ORINTED MANE					
PRINTED NAME					
SIGNATURE	DATE	TITLE			

Please mail to: Arizona Department of Revenue 1600 W Monroe Street, Division Code 22 Phoenix, AZ 85007

**1** (602) 716-7801