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NS Toll Free: 1-877-565-0556
agdlicense@gov.ns.ca

OR 1030 Upper Prince St.
Suite 1
Sydney, N.S. B1P 5P6
Tel: (902) 563-3494
Fax: (902) 563-3430

Permit No. _____
Approved By _____
Date: _____

Application for Lottery Permit
for Prizes Not Exceeding \$4000.00 in Value
(No Licensing Fee Applicable)

Name of Your Organization: (Schools Cannot Apply On Line Principal Signature Required-See Below)		Telephone No.
Address: (Street, P.O. Box)		
City/Town/County:		Postal Code:
Date of Draw :	Exact Location and Address of Draw (Must NOT be a residence)	
Prize(s):		Prize Value(s)
Number of tickets printed:		Selling price per ticket or group of tickets:

Applicant Information		
Name:		Title:
Complete Address:		
Postal Code:	Telephone:	Email:
Purpose of Fundraising: _____		
Charitable fundraising by a non-charitable group must be accompanied with confirmation from the charity.		

Applicant Signature _____ Date _____

Application from schools/university must be signed by Principal/Dean _____ NAME(PRINTED) & SIGNATURE

Note: All questions must be answered before application will be processed
It is unlawful to sell tickets on alcohol products. Applicants must be 19 years of age and older.