



**CITY OF PORTSMOUTH, NEW HAMPSHIRE**  
**APPLICATION**

\_\_\_\_\_ **\*TAG DAY (\$20.00 Eff. 07/01/2017)**  
\_\_\_\_\_ **\*\*RAFFLE (\$15.00)**

ORGANIZATION NAME: \_\_\_\_\_

TYPE OF ORGANIZATION: Educational – Charitable – Civic – Sports – Veterans – Religious - Political  
(Circle One)

ORGANIZATION ADDRESS: \_\_\_\_\_

APPLICANT/CONTACT PERSON: \_\_\_\_\_

DAY TIME TELEPHONE OF CONTACT: \_\_\_\_\_

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\* DATE OF TAG DAYS: \_\_\_\_\_

Please note: The City of Portsmouth permits only one organization per Friday/Saturday.

Also, each organization is responsible for contacting each and every business location for permission to conduct Tagging on that property.

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_  
(duly authorized)

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\*\* DATE OF RAFFLE DRAWING: \_\_\_\_\_

LOCATION OF RAFFLE DRAWING: \_\_\_\_\_

PRIZES TO BE AWARDED: \_\_\_\_\_

COST OF TICKET: \_\_\_\_\_ VALUE OF PRIZE: \_\_\_\_\_

I CERTIFY THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT.

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_  
(duly authorized)

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Official use:

LICENSE NO ISSUED: \_\_\_\_\_ Date Issued: \_\_\_\_\_ FEE: \$ \_\_\_\_\_ Paid: Cash or Check # \_\_\_\_\_