

Agent/Vendor: \_\_\_\_\_ Date Rec'd:



**VIDEO LOTTERY GAMING APPLICATION FOR:**

- AGENT
- VENDOR

**IMPORTANT**

**FAILURE TO ANSWER ANY QUESTION ON THIS FORM COMPLETELY AND TRUTHFULLY MAY RESULT IN DENIAL OF YOUR APPLICATION.**

**I. COMPLETING THIS FORM:**

- a. You must make accurate statements and include all material facts. **Any misrepresentation, or the failure to provide requested information, may result in the denial of your application.**
- b. Read each question carefully prior to answering. Answer every question completely. Do not leave blank spaces. If a question does not apply to you or you have nothing to disclose, indicate "**Does Not Apply**" in response to that question. Failure to provide a response to every question could result in the denial of your application.
- c. If the space available is insufficient to respond to a question, supply the required information on an attachment page and clearly identify which question you are answering.
- d. If you make any modification to the pre-printed questions or information contained in this form, your application may be denied. Once your application is submitted, it becomes the property of the New York Division of the Lottery and will not be returned.

**II. BE SURE:**

- a. You sign the **Statement and Authorization** at the end of this form in the presence of a notary public or other person authorized to authenticate your signature.
- b. All Attachments/Exhibits are catalogued by appropriate question number and alpha index.
- c. You retain a completed copy of your application for your own records.

**PLEASE PRINT OR TYPE THE ANSWERS TO THE  
FOLLOWING QUESTIONS IN THE SPACES PROVIDED**

**APPLICANT DATA**

1) APPLICANT NAME: \_\_\_\_\_

2) BUSINESS ADDRESS: \_\_\_\_\_  
 NUMBER AND STREET CITY/TOWN STATE ZIP/POSTAL CODE

MAILING ADDRESS: \_\_\_\_\_  
 (IF DIFFERENT THAN BUSINESS ADDRESS) NUMBER AND STREET CITY/TOWN STATE ZIP/POSTAL CODE

3) BUSINESS TELEPHONE NO: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_  
 (AREA CODE) (NUMBER) (AREA CODE) (NUMBER)

4) E-MAIL CONTACT: \_\_\_\_\_ WEB SITE (if applicable): \_\_\_\_\_

5) Applying for qualification in connection with (please check one):

- \_\_\_\_\_ An Initial Video Lottery Gaming Agent License Application
- \_\_\_\_\_ An Initial Video Lottery Gaming Vendor License Application
- OTHER (Specify) \_\_\_\_\_

6) If enterprise named above is not an applicant in connection with number 5, please list below the name of the Enterprise applying for the license.

\_\_\_\_\_

7) Attach a copy of the certificate of incorporation, charter, by-laws, partnership agreement, trust agreement or other documentation relating to the legal organization of the applicant or licensee.

8) A description of any present and any former businesses engaged in by the applicant or licensee and any holding, intermediary or subsidiary company.

DATES		NAMES & ADDRESS OF PRESENT & FORMER BUSINESSES	DESCRIPTION OF RELATIONSHIP	CURRENT STATUS OF RELATIONSHIP
FROM: (MO/YR)	TO: (MO/YR)			

9) A description of the nature, type, number of shares, terms, conditions, rights and privileges of all classes of stock issued by the applicant or licensee, if any, or which the applicant or licensee plans to issue.

NO. OF SHARES	NATURE/ TYPE	TERMS	CONDITIONS	RIGHTS	PRIVILEGES

10) List the name, address, date of birth, number and percentage of shares held by each person or entity having at least a ten (10) percent ownership interest in any non-voting stock.

NAME	ADDRESS	DATE OF BIRTH	NUMBER AND PERCENTAGE OF SHARES

11) List the name, home address, date of birth, current title or position and, if applicable, percentage of ownership for the following persons at the date of the application: (1) Each officer, director or trustee; (2) Each owner, or partner, including all partners whether general, limited or otherwise; (3) Each beneficial owner of outstanding voting securities.

NAME	HOME ADDRESS	DATE OF BIRTH	CURRENT TITLE OR POSITION	PERCENTAGE OF OWNERSHIP

12) Attach a flow chart which illustrates the ownership of any other entity or parent company which holds an interest in the filing applicant or licensee.

13) List the name, last known address, date of birth, position, date the position was held, and reason for leaving for any former officers or directors who held such office during the preceding ten (10) years.

NAME	LAST KNOWN ADDRESS	DATE OF BIRTH	POSITION	DATES		REASON FOR LEAVING
				FROM: (MO/YR)	TO: (MO/YR)	

14) List the annual compensation of each partner, officer, director and trustee.

NAME	POSITION	ANNUAL COMPENSATION

15) List the name, home address, date of birth, position, length of time employed and the amount of compensation of each person other than the persons identified in fourteen (14) above, currently expected to receive annual compensation including salaries, bonuses, and profit sharing of more than \$75,000.

NAME	HOME ADDRESS	DATE OF BIRTH	POSITION	LENGTH OF TIME EMPLOYED	AMOUNT OF COMPENSATION

16) Attach description of all bonus, profit sharing, pension, retirement, deferred compensation or similar plans.

17) If the applicant or licensee is a partnership, LLC, list a description of the interest held by each partner including the amount of initial investment, amount of additional contribution, amount and nature of any anticipated future investments, degree of control of each partner and percentage of ownership of each partner/member.

NAME	DESCRIPTION OF INTEREST HELD	INITIAL INVESTMENT	AMOUNT OF ADDITIONAL CONTRIBUTION	FUTURE INVESTMENTS	DEGREE OF CONTROL	PERCENTAGE OF OWNERSHIP

18) Attach a description of the nature, type, terms, covenants, and priorities of all outstanding debt and the name, address and date of birth of each debt holder or security holder, type and class of debt instrument held, original debt amount and current debt balance.

19) Attach a description of the nature, type, terms and conditions of all securities options.

20) Provide the following information for each account held in the name of the applicant or licensee or its nominee or which is otherwise under the direct or indirect control of the applicant or licensee.

FINANCIAL INSTITUTION	ADDRESS	TYPE OF ACCOUNT	ACCOUNT NUMBERS	DATES HELD	
				FROM: (MO/YR)	TO: (MO/YR)

21) Attach a copy of all contracts of \$50,000 or more in value, including employment contracts of more than one (1) year duration, and contracts pursuant to which the applicant or licensee has received \$50,000 or more in goods or services in the past six (6) months.

22) Provide the name and address of each company in which the applicant or licensee holds stock, type of stock held, purchase price per share, number of shares held, and percentage of ownership held.

NAME	ADDRESS	TYPE OF STOCK	PURCHASE PRICE PER SHARE	NUMBER OF SHARES HELD	PERCENTAGE OF OWNERSHIP

23) Attach information regarding any transaction during the past five (5) years involving a change in the beneficial ownership of the applicant or licensee's securities on the part of an officer or director who owned more than ten (10) percent of any class of equity security.

- 24) A description of any civil, criminal, administrative and investigatory proceedings in any jurisdiction in which the applicant or licensee or its subsidiaries have been involved as follows:
- Any conviction for any criminal or disorderly persons offense;
  - Any criminal proceeding in which the applicant or licensee or its subsidiaries has been a party or has been named as an uninfected co-conspirator;
  - Existing civil litigation if damages are reasonably expected to exceed \$50,000, except for claims covered by insurance;
  - Any judgment, order consent decree or consent order entered against the applicant or licensee pertaining to a violation or alleged violation of the Federal Antitrust, Trade Regulation or Securities Laws or similar laws of any jurisdiction; and
  - Any judgment, order, consent decree or consent order entered against the applicant or licensee pertaining to a violation or alleged violation of any other state or federal statute, regulation statute regulation or code which resulted in the imposition of a fine or penalty of \$50,000 or more.

NAME GOVERNMENTAL AGENCY/ORGANIZATION INVOLVED	ADDRESS	NATURE OF PROCEEDING	DATE

25) Attach copies of any judgments or petitions for bankruptcy or insolvency and any relief sought under any provision of the Federal Bankruptcy Act (United States Code, Title 11) or any state insolvency law (New York State Debtor and Creditor Law), and any receiver, fiscal agent, trustee or similar officer appointed for the property or business of the applicant or licensee or any holding, intermediary or subsidiary company.

26) Provide the following information if the applicant or licensee has had any license or certificate denied, suspended or revoked by any government agency in this State or any other jurisdiction, the nature of such license or certificate, the agency and its location, the date of such action, the reasons therefore, and the facts related thereto. The applicant or licensee will execute waivers permitting the Division or its duly authorized representative to obtain copies of licensing documentation and to speak with representatives of other gaming license jurisdictions.

NAME GOVERNMENTAL AGENCY/JURISDICTION	ADDRESS	LICENSE/CERTIFICATE	DATE OF SUCH ACTION	REASONS/FACTS FOR DENIAL, SUSPENSION, OR REVOCATION

27) Provide the following information if the applicant or licensee or any holding company, intermediary or subsidiary company has ever applied for a license, permit or authorization to participate in any lawful gaming operation in this State or any other jurisdiction, the agency and its location, date of application, the nature of the license permit or authorization, number and expiration date.

NAME GOVERNMENTAL AGENCY/JURISDICTION	ADDRESS	LICENSE/PERMIT	DATE OF APPLICATION	NUMBER AND EXPIRATION DATE

28) Whether the applicant or licensee or any director, officer, partner, employee or person acting on behalf of the applicant or licensee has made bribes or kickbacks to any employee, company, organization or government official.

29) The names and addresses of any current or former directors, officers, employees or third parties who would have knowledge or information concerning 28 above.

**FINANCIAL DATA**

- 30) Attach copies of the following: (List as Exhibit 30A, 30B, 30C, etc.)
- a. Annual reports for the past five (5) years;
  - b. Any annual reports prepared within the last five (5) years on Form 10K pursuant to Sections 13 or 15d of the Securities Exchange Act of 1934;
  - c. An audited financial statement for the last fiscal year, including, without limitation, an income statement, balance sheet and statement of sources and application of funds, and all notes to such statements and related financial schedules;
  - d. Copies of all annual financial statements, whether audited or unaudited, prepared in the last five (5) fiscal years, any exception taken to such statements by an independent auditor and the management response thereto;
  - e. The most recent quarterly unaudited financial statement prepared by or for the applicant or licensee or, if the applicant or licensee is registered with the Securities Exchange Commission (SEC), a copy of the most recently filed Form 10Q
  - f. Any current report prepared due to a change in control of the applicant or licensee, an acquisition or disposition of assets, a bankruptcy or receivership proceeding, a change in the applicant or licensee's certifying accountant or any other material event, or, if the applicant or licensee is registered with the SEC, a copy of the most recently filed Form 8K;
  - g. The most recent Proxy or Information Statement filed pursuant to Section 14 of the Securities Exchange Act of 1934
  - h. Registration Statements filed in the last five (5) years pursuant to the Securities Act of 1933; and
  - i. All reports and correspondence submitted within the last five (5) years by independent auditors for the applicant or licensee which pertain to the issuance of financial statements, managerial advisory services or internal control recommendations;
- 31) Attach an organizational chart of the applicant, licensee, or parent company, including position descriptions and the name of the person holding each position.
- 32) Attach copies of all Internal Revenue Forms 1120 (corporate income tax return), all Internal Revenue Forms 1065 (partnership return) or all internal Revenue Forms 1040 (personal return) filed for the last five (5) years.



- 33) Such information and documentation as may be required by the Division to establish compliance with all relevant facilities requirements of the rules of the Division including without limitation, the following: (List as Exhibit 33A, 33B, 33C, etc.)
- a. A certified copy of the applicant's license to engage in pari-mutuel wagering activities issued by the New York State Racing and Wagering Board.
  - b. A certified copy of the local law authorizing the applicant's participation in video lottery gaming, if applicable.
  - c. A certified copy of the certificate of occupancy demonstrating that the entire premises of the video lottery gaming agent, including those areas where video lottery gaming will not be conducted, is in compliance with all state and local fire, health and safety codes. Such copies shall be certified no earlier than four (4) months prior to the commencement of the video lottery gaming facility.
  - d. Certified payroll records showing that all workers engage or to be engaged in the construction, reconstruction, development, rehabilitation or maintenance of any area utilized or to be utilized for video lottery gaming will be paid prevailing wages in accordance with Articles 8 and 9 of the New York State labor Law to the extent provided in said articles.
  - e. A description of the proposed video lottery gaming facility site, including site plans, total acreage, total square footage, frontages and elevation;
  - f. A description of the proposed video lottery gaming facility, including number of terminals requested and proposed location of each VLT;
  - g. A certificate of general liability insurance in the amount of at least \$2,000,000.00 per claim covering tort claims by patrons of the video lottery gaming facility;
  - h. The construction program, including estimated construction time and anticipated date of opening, the status of all required governmental and regulatory approvals and any conditions thereto; the project budget; and the architect general contractor, construction manager and primary subcontractors, environment consultant and interior designer and proof of insurance of all phases of the construction process;
  - i. A copy of any agreements with the organization authorized to represent the horsemen in accordance with the Video Lottery Gaming Law.
  - j. A copy of your internal controls for video lottery operations.
- 34) Any other information or documentation which the Division may deem material to the licensing of the applicant, or of any person required to be licensed pursuant to the rules of the Division.

**Statement and Authorization**

**Statement**

I am the authorized officer of the applicant, and I supplied the information contained in this application on behalf of the applicant. I understand and read the English language or I have had an interpreter read, explain and record the answer to each and every question on this form. Any document accompanying this application that is not an original document is a true copy of the original document. I swear that the foregoing statements are true.

**Notification and Release Authorization**

The New York State Division of the Lottery is hereby authorized to provide information relative to the applicant's identity, including its name and video lottery gaming license to any other State agency for the purposes of obtaining a license.

To any person and all Courts, Probation Departments, Selective Service Boards, Employers, Educational Institutions, Banks, Financial and Other Such Institutions, and All Governmental Agencies – federal, state and local, including unemployment insurance agencies, without exception, both foreign and domestic: The applicant has authorized the New York Lottery and the New York Division of Criminal Justice Services to conduct a full investigation into its background and activities.

The applicant hereby authorizes the New York Lottery to obtain a credit report on the applicant through a credit agency of its choice and the applicant further authorize the New York Lottery to check its credit record, as needed, on a continuing basis as it relates to its employment or suitability for employment. If an adverse employment decision is made totally or partially due to the information on the Credit Report, the New York Lottery will provide a copy of the Credit Report, a summary of rights under the Fair Credit Reporting Act, and the source of the credit report so that the applicant may contact the credit agency, if it wishes.

Therefore, you are hereby authorized to release any and all information pertaining to the applicant, documentary or otherwise, as requested by any employee or agent of the New York Lottery, provided that he or she certifies to you that the applicant has an application pending before the New York Lottery or that the applicant is presently a licensee or registrant required to be qualified under New York Tax Law Section 1617-a.

This authorization shall supersede any prior request or authorization to the contrary.

A copy of this authorization shall be considered as effective and valid as the original.

<i>(Print Name Authorized Officer)</i>	<i>(Title)</i>	<i>(Date of Birth)</i>	<i>(Social Security #)</i>
<i>(Company)</i>	<i>(FEIN #)</i>		
<i>(Address)</i>		<i>(City, State, Zip)</i>	

DATED: \_\_\_\_\_ (SIGNATURE OF AUTHORIZED OFFICER)

Subscribed and sworn to  
before me this \_\_\_\_\_ day  
of \_\_\_\_\_,

\_\_\_\_\_  
NOTARY PUBLIC