

GAMING-RELATED VENDOR LICENSE RENEWAL APPLICATION

Office Use Only
1st year License Date:
FP Date:
Fee: How Pd:
Clerk:

RENEWAL LICENSE FEE: (3-year License)
Year 2 and Year 3 - \$2,000 per year

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

NAME OF APPLICANT OR HOLDING COMPA	ANY*		
*NAME AS APPEARS ON THE CERTIFICATE OTHER OFFICIAL DOCUMENT.	OF INCORPORATION, CHARTER, BYLA	AWS, PART	NERSHIP AGREEMENT OR
D/B/A OR TRADE NAME(S)			
FEDERAL TAX ID OR SOCIAL SECURITY NU	MBER*		
PERSON TO BE CONTACTED IN	REFERENCE TO THESE FO	RMS:	
NAME			
TITLE	TELEPHONE: (AREA CODE) NUMBE	ΞR	FAX NO. (IF AVAILABLE)
E-MAIL ADDRESS			
THE PRINCIPAL BUSINESS ADD	PRESS OF THE APPLICANT (OR HOL	DING COMPANY:
STREET LOCATION (NUMBER/STREET)	CITY	STATE	ZIP
COUNTRY	TELEPHONE: (AREA CODE) NUMBE	R	FAX NO. (IF AVAILABLE)
MAILING ADDRESS (IF DIFFERENT)	CITY	STATE	ZIP
WEBSITE ADDRESS			

Check all that apply:
Manufacture gaming-related equipment and/or goods.
Sell or lease gaming-related equipment and/or goods.
Provide gaming-related equipment and/or goods maintenance or repair.
Leases a casino facility to a casino operator or otherwise permits a casino operator to use a casino facility to conduct or participate in the conduct of casino gaming.
Provide other services, including but not limited to services to be provided by a third-party gaming junket entity, that relate to casino gaming or gaming-related equipment or goods.
Describe:
☐ Holding Company of Gaming-Related Vendor Applicant
Name of Applicant:
Please answer the following questions as they relate to your Gaming- Related Vendor License since the last time you submitted your initial application or last renewal application form.
Please provide your most recently filed tax statements
Are you current in filing all required income tax returns?
☐ No ☐ Yes If you answered NO , please explain.
2. Are you delinquent in the payment of <u>federal</u> , <u>state or city</u> tax required under state or federal law?
☐ No ☐ Yes If you answered YES , please explain and submit documentation from the tax authority indicating the delinquency.

3.	Since your last application has your entity had any court or formal proceeding filed against the entity to adjust, defer, suspend, or otherwise work out the payment of any debt, including garnishment of employee wages?
	☐ No ☐ Yes If you answered YES , please explain and submit relevant documentation.
4.	Since your last application has your entity filed proceedings for bankruptcy?
	☐ No ☐ Yes If YES , please explain and submit a court document.
5.	Since your last application has any key persons been convicted of a misdemeanor or felony involving gambling, dishonesty, theft, or fraud in any state?
	☐ No ☐ Yes If YES , please explain and submit a final court disposition for each charge.
6.	. Since your last application has your entity been indicted, charged, arrested, convicted, plead guilty, no contest, or forfeited bail for any felony or misdemeanor offense in any jurisdiction?
	☐ No ☐ Yes If YES , please explain and submit final court dispositions for all cases.
7.	Since your last application has any key persons been convicted of either a felony or misdemeanor, or had said conviction dismissed, expunged, or set aside under the laws of any jurisdiction?
	□ No □ Yes If YES , please explain and submit final court dispositions for all cases.
8.	Since your last application has your entity been fined, suspended, restricted, or revoked in any jurisdiction?
	□ No □ Yes If you answered YES , please explain.
9.	Has there been changes to your ownership or principles?
	☐ No ☐ Yes If you answered yes , please explain.

COMPLIANCE STATEMENT

By acceptance of a license issued pursuant to this application, I agree to comply with the rules and regulations of the Nebraska Racing and Gaming Commission (NRGC); the laws of the United States of America, the statutes of the State of Nebraska, Municipalities and other subdivisions.

I hereby certify that the information and statements I have provided herein are true and correct. I further certify that I understand all of the statements above and further authorize all consumer reporting agencies to release to the NRGC any information requested by them in connection with the background investigation and processing of this application. I understand that failure to disclose all information completely and accurately may result in refusal to issue, denial, suspension, revocation, or cancellation of this license and/or other disciplinary action by the Board of Stewards and/or the Commission. I have read and understand the foregoing statements and conditions and knowingly and voluntarily attach my signature hereunto.

PRINTED Applicant's Name
Applicant's SIGNATURE

Privacy Act Statement

This privacy act statement is located on the back of the FD-258 fingerprint card.

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

As of 03/30/2018

The FBI Privacy Act Statement can be found at https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement.

Applicant Notification of Procedures for Obtaining an Amendment to an FBI Record

Your fingerprints will be used to check the criminal history records of the FBI. You have the opportunity to complete or challenge the accuracy of the information contained in the FBI identification record. The procedure for obtaining a change, correction, or update of an FBI criminal history record are set forth at 28 CFR 16.34. Information regarding this process may be found at https://www.fbi.gov/services/cjis/identity-history-summary-checks and https://www.edo.cjis.gov.