



Badge Replacement Request Form
Nebraska Racing and Gaming Commission
3401 Village Drive, Suite 100, Lincoln, Nebraska 68516
(402) 471-8038 * nrgc.nebraska.gov

PLEASE READ THE FOLLOWING INFORMATION CAREFULLY BEFORE YOU COMPLETE THIS FORM

All information must be typed or printed legibly in blue or black ink. If the space available is insufficient, attach a separate sheet of paper and precede each answer with the applicable section and question number. Any corrections, changes, or other alterations must be initialed and dated by the applicant.

*If you are requesting a replacement due to a name change, you must present authorizing legal document or Driver's License/State ID showing name change.

PERSONAL INFORMATION				
Last Name:	First Name:	Middle Name:		
License Number:				
License Type				
☐ Racing	☐ Key Person	☐ Occupational Level 1	☐ Occupational Level 2	☐ Occupational Level 3
Replacement Reason				
☐ Lost	☐ Stolen	☐ Damaged	☐ Name Change	
Former Name:				
New Name:				
DECLARATION				
I declare under penalty of perjury under the laws of the State of Nebraska that the information in this form is true, accurate, and complete, and that this declaration is executed by me at _____.				
(City and State)				
Signature:			Date:	
COMMISSION OFFICE USE ONLY:				
Commission Employee:		Date:		
Total \$: _____	☐ Check	☐ Credit Card	☐ Money Order	☐ Invoice