

ARIZONA DEPARTMENT OF GAMING

APPLICATION FOR CERTIFICATION

Date _____

The undersigned hereby makes application for an Arizona Department of Gaming Certification:

1. Name _____
Name of applicant entity (business enterprise)

Street Address _____ Telephone _____

City/State/Zip Code _____ Fax # _____

E-Mail Address _____

Mailing Address _____
Indicate only if different than above (include city/state/zip code)

Main Office _____
Indicate location only if different than above (include city/state/zip code)

Contact Person _____
Name Position Title

(a) Trade name to be used _____

(b) If application is to replace a certification obtained under another name at the same location, state former name:

(c) Type of services to be provided:
 Services (must specify type) _____

2. Tribal Gaming Facility _____ Tribal Gaming License # _____

3. Applicant type: (Check one of the following)

Corporation Partnership Limited Liability Company Sole Proprietorship

Federal Tax I.D. Number _____

4. Complete the following: (if the applicant is a partnership or limited liability company, furnish comparable information)

(a) State of incorporation/organization _____ Date _____
(If incorporated out of state, you must attach a letter of good standing from the state incorporated)

(b) A general description of the nature of the business. (Attach a separate page, if necessary) _____

4. (c) Sales agreements and contracts with Native American Tribes for the most recent 12 month period, including any pending sales agreements or contracts:

NAME OF TRIBE	LOCATION	PURPOSE	TERMS

5. List the tax reporting status the company has for the State of Arizona.

State ID Number	Tax Type	Filing Status/list Month Current Or Past Due	Amount of Tax Liability, if Past Due

6. List gaming licenses issued or pending with other jurisdictions: _____

7. Provide the contact person's name, telephone number and mailing address, who is responsible for your company's accounts payable and billing questions:

8. Provide a list of current and past civil and or criminal litigation that the company has had to defend, provide a response, has been named as a co-defendant or has had any of its employees give depositions for civil or criminal proceedings.

9. Has the company or any of its employees been denied, suspended, revoked or had a license and or permit under review to conduct business with Tribal Casinos or any of the Federal, State or any Government regulated Casinos in or outside of the United States? Yes_____ No_____

10. The applicant **must provide** with this application, copies of all contracts/sales agreements and/or invoices relating to business conducted with Indian Gaming Facilities in Arizona. The initial application filing fee is \$1,500. The renewal application filing fee is \$500.

11. **The Tribal-State Compact requires the payment of all fees or costs of investigation of the applicant prior to granting State Certification.** The amount of such fees and costs vary on a case by case basis and often exceed the initial application fee. Monthly invoices are submitted by the Department to the applicant for such fees and costs, and must be paid in full before the certification process can be continued or completed.

