

- ☐ **1 LICENSE TYPES (Check on Application One, and Only One, of the Following Types)**
Key: Any executive, employee, or agent of a gaming licensee having the power to exercise a significant influence over decisions affecting any part of the gaming operation while physically working in a retail gaming establishment.
Associated Person: Any stockholder holding five percent or greater interest in a gaming licensee, or any officer or director, who does not act as a Key executive, employee or agent.
Associated Key: Any stockholder holding five percent or greater interest in a gaming licensee, or any officer or director, who also acts as a Key executive, employee or agent.
- ☐ **2 APPLICATION COMPLETED & SIGNED**
Type or clearly print an answer to every question. If a question does not apply to you, indicate so with an N/A. If you are unsure if a question applies to you or what information the form is asking you to provide, contact any Division of Gaming office to seek clarification. If the available space is insufficient, continue on a separate sheet and precede each answer with the appropriate title. Sign and date the application. **Notice:** You are required by state law to provide your social security number. If you do not have a social security number, you must complete a sworn statement (available at any Division of Gaming office) stating you do not have a social security number.
- ☐ **3 ATTACHMENTS**
The following must be attached:
- ☐ Copies of federal income tax returns for the past three (3) years
 - ☐ Certified copy of DD214, if applicable
 - ☐ Copies of diplomas for all higher education degrees, if applicable
 - ☐ Copies of divorce decree(s), if applicable
 - ☐ Copies of 12 months of bank statements and six months of credit card statements
 - ☐ Explanations for all "Yes" answers
- ☐ **4 CERTIFIED BIRTH CERTIFICATE OR VALID PASSPORT**
Supply proof of identity and date of birth to ensure you are lawfully permitted to work in the country by providing one of the following documents:
- ☐ Birth certificate from the Vital Statistics office in the state you were born, or
 - ☐ Valid U.S. passport
 - ☐ If not U.S. citizen, valid passport issued by country of citizenship, or
 - ☐ Certificate of Naturalization with photo, along with Alien Registration Number
- ☐ **5 FINGERPRINT CARD & VERIFICATION OF FINGERPRINTS**
Ensure that 2 fingerprint cards are filled out completely and signed, bearing separately captured fingerprints. Also ensure the form "Verification of Fingerprints" is filled out and signed by the person performing the fingerprinting.
Notice: If you already possess a Colorado supportgaming license, you *must* submit new fingerprint cards.
- ☐ **6 \$275 APPLICATION FEE/\$1,000 BACKGROUND DEPOSIT**
Submit \$275 ***NON-REFUNDABLE*** application fee for a two-year license along with \$1,000 background deposit*. Make check or money order payable to: **COLORADO DIVISION OF GAMING**.
Notice to Associated Person applicants: If you are submitting this application as part of the associated business's original Business Gaming License Application, no application fee or background deposit is required. If you are submitting this application separate from an original business application, no application fee is required, but the \$1,000 background deposit must be submitted.
*Colorado law requires applicants to fund the cost of their background investigations. The Division of Gaming bills at the rate of \$73 per hour for time spent by investigators, and charges for all out-of-pocket expenses incurred during the investigation, such as travel costs and costs to reproduce documents.
- ☐ **7 MAIL OR BRING IN APPLICATION FORM & RIDER**
Mail or bring in application to: Colorado Division of Gaming, 17301 W. Colfax Ave., Suite 135, Golden, CO 80401.

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

Colorado Limited Gaming Control Commission

Colorado Rider to Uniform Personal Gaming Application

Gaming License Number

LICENSE TYPES & FEES

(Check at Least One and Only One of Top Three Boxes)

☐ Key \$275 3702 \$
☐ Associated Key \$275 3706 \$
☐ Associated Person No fee \$
☐ Background Deposit \$1,000 3750 \$
Total Remitted \$

IF PAYING BY CREDIT CARD:

CANNOT CHARGE BACKGROUND DEPOSIT TO CREDIT CARD

Card Type ☐ Visa ☐ Mastercard Expires
Name on Card
Card #

Applicant's Printed Name (last, first, middle)			If Associated Key or Associated Person, Name of Gaming Licensee Associated With		
Maiden/Married Names Used (Full Name)(Attach separate sheet if necessary)			Nicknames, Aliases, Etc. Used (Full Name)(Attach separate sheet if necessary)		
Social Security Number			Other Social Security Numbers Used <input type="checkbox"/> Yes <input type="checkbox"/> No *If "Yes", attach details.		Date of Birth
Street Address					Primary Phone Number ()
City	State	Zip	County	Length at This Address	
Mailing Address, if different from Street Address (city, state, zip)					E-Mail Address
U.S. Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No *If "No", attach details and indicate Alien Registration Number here:					
Name of casino or licensed gaming business where you will be working			Work Phone Number ()	Job Title	
Name of present employer, if different from above			Work Phone Number ()	Occupation or Job Title	
Do you currently possess a Colorado support gaming license or are you an associated person in any other type of Colorado gaming license? <input type="checkbox"/> Yes <input type="checkbox"/> No *If "Yes", indicate license type and number here:					
Have you ever applied before for a gaming license in this or any other jurisdiction, domestic or foreign, whether or not the license was ever issued? <input type="checkbox"/> Yes <input type="checkbox"/> No *If "Yes", explain here:					
Have you ever been denied a gaming license, withdrawn a gaming license application or had any disciplinary action taken against any gaming license that you have held, either individually or as part of an ownership group, in this or any other jurisdiction? <input type="checkbox"/> Yes <input type="checkbox"/> No *If "Yes", explain here:					

AFFIRMATION & CONSENT

I state under penalty of perjury that the entire Uniform Personal History and Financial Form 1-A for Gaming Licensure/Qualification, Colorado Rider to Uniform Personal Gaming Application, statements, attachments, and supporting schedules are true and correct to the best of my knowledge and belief, and that this statement is executed with the knowledge that misrepresentation or failure to reveal information requested may be deemed sufficient cause for the refusal to issue a gaming license by the State of Colorado. Further, I am aware that later discovery of an omission or misrepresentation made in the above statements may be grounds for the denial of a temporary gaming license or the revocation of the license. I am voluntarily submitting this application to the Colorado Limited Gaming Control Commission under oath with full knowledge that I may be charged with perjury or other crimes for intentional omissions and misrepresentations pursuant to Colorado law. I further consent to any background investigation necessary to determine my present and continuing suitability and that this consent continues as long as I hold a Colorado Gaming License, and for 90 days following the expiration or surrender of such gaming license. I also agree that the State of Colorado, its agencies, officers and assigns, shall be entitled to collect from me all expenses incurred in recovery of any debt created by this license application, or in pursuing any other remedy provided by law, including but not limited to reasonable attorney fees and costs.

APPLICANT'S SIGNATURE

X

DATE

Applicant's Printed Name (last, first, middle)

NOTICE: The Uniform Personal History form and this Rider are official documents. If you provide false information on your gaming license application and/or do not disclose all information the application asks, your license is subject to denial or revocation, and you may be subject to criminal prosecution. The Division of Gaming will conduct a complete background investigation and will check all sources of information. You are advised that it is better to disclose all information than face denial, revocation or criminal prosecution.

If you need clarification of any of the following questions, please contact the Investigations Section at any of the three Division of Gaming offices in Golden, Central City or Cripple Creek.

1. Have you ever been convicted of any gambling-related felony at any time?	<input type="checkbox"/> YES <input type="checkbox"/> NO
2. Have you ever been convicted of any felony involving theft by deception (including, but not limited to, embezzlement and other thefts using fraud, trickery, scams, con games, illegal schemes, etc.) at any time?	<input type="checkbox"/> YES <input type="checkbox"/> NO
3. Have you ever been convicted of any felony involving fraud or misrepresentation (including, but not limited to, bad checks, fraud, forgery, perjury, tax or welfare fraud, and crimes involving false documentation) at any time?	<input type="checkbox"/> YES <input type="checkbox"/> NO
4. Have you served a sentence, including probation or parole, within the past 10 years upon conviction for any felony, even if the conviction occurred more than 10 years ago?	<input type="checkbox"/> YES <input type="checkbox"/> NO
5. Have you served a sentence, including probation or parole, within the past 10 years upon conviction of any misdemeanor gambling-related offense, even if the conviction occurred more than 10 years ago?	<input type="checkbox"/> YES <input type="checkbox"/> NO
6. Have you served a sentence, including probation or parole, within the past 10 years upon conviction of any misdemeanor theft by deception offense (including, but not limited to, embezzlement and other thefts using fraud, trickery, scams, con games, illegal schemes, etc.), even if the conviction occurred more than 10 years ago?	<input type="checkbox"/> YES <input type="checkbox"/> NO
7. Have you served a sentence, including probation or parole, within the past 10 years upon conviction of any misdemeanor involving fraud or misrepresentation (including, but not limited to, bad checks, fraud, forgery, perjury, tax or welfare fraud, and crimes involving false documentation), even if the conviction occurred more than 10 years ago?	<input type="checkbox"/> YES <input type="checkbox"/> NO
8. Are you currently being prosecuted or facing pending charges, in any jurisdiction, for any of the above offenses, or are you on a deferred prosecution or a deferred judgment and sentence for any of the above offenses?	<input type="checkbox"/> YES <input type="checkbox"/> NO
9. Have you ever been convicted of professional gambling as defined by Colorado law?	<input type="checkbox"/> YES <input type="checkbox"/> NO
10. Have you ever been identified as a career offender or a member of a career offender cartel?	<input type="checkbox"/> YES <input type="checkbox"/> NO
11. Have you ever refused to cooperate with any legislative body or other official investigatory body involved in the investigation of crimes related to gaming, official corruption or organized crime?	<input type="checkbox"/> YES <input type="checkbox"/> NO
12. Are you under 21 years of age at the time of this application?	<input type="checkbox"/> YES <input type="checkbox"/> NO
13. Are you the spouse or child living in the household of any person employed by the Colorado Division of Gaming or the Limited Gaming Control Commission?	<input type="checkbox"/> YES <input type="checkbox"/> NO
14. Are you an officer, reserve police officer, agent, or employee of any law enforcement agency of the state of Colorado with the authority to investigate or prosecute crime in Teller or Gilpin counties or of any law enforcement agency or detention or correctional facility within Teller or Gilpin counties?	<input type="checkbox"/> YES <input type="checkbox"/> NO
15. Are you a district, county or municipal court judge whose jurisdiction includes all or part of Teller or Gilpin counties?	<input type="checkbox"/> YES <input type="checkbox"/> NO
16. Are you an elected municipal official or county commissioner of Teller or Gilpin counties or the cities of Central City, Black Hawk or Cripple Creek?	<input type="checkbox"/> YES <input type="checkbox"/> NO
17. Are you a Central City, Black Hawk or Cripple Creek city manager or planning commission member?	<input type="checkbox"/> YES <input type="checkbox"/> NO



If you answered YES to any of the above questions, by Colorado law you cannot obtain or hold a Colorado gaming license. DO NOT CONTINUE WITH OR TURN IN THIS APPLICATION.

I have thoroughly read and understand the questions above, and understand that I cannot hold a Colorado gaming license if at any time in the future I can ever answer "Yes" to any of the questions above.

Signature of Applicant

Date

CRIMINAL HISTORY

1. Since you turned age 18, have you ever been arrested, served with a criminal summons, charged with, or ☐ YES* ☐ NO convicted of **ANY** crime or offense in any manner in this or any other country?
- You must include **ALL** arrests, charges, and convictions since the age of 18 regardless of the outcome, even if the charges were dismissed or you were found not guilty.
 - You must include **ALL** arrests, charges, and convictions regardless of the class of crime (felonies, misdemeanors, and/or petty offenses).
 - You must include **ALL** serious traffic offenses, including DUI; DWAI; reckless driving; leaving the scene of an accident (hit and run); driving under denial, suspension or revocation; or any other offense which resulted in your being taken into custody.
 - NOTICE: Do not rely upon your understanding that an arrest or charge is "not supposed to be on your record." A criminal record was not cleared, erased, sealed or expunged unless you were given, and have in your possession, a written order from a judge directing that action.

*If you answered **YES**, explain in detail on a separate sheet and attach it to your application. For each offense for which you were arrested or charged, YOU MUST OBTAIN OFFICIAL DOCUMENTATION FROM THE COURT WHERE YOU APPEARED, SHOWING THE FINAL DISPOSITION (OUTCOME) OF YOUR CASE. This information will include whether you were found guilty or not guilty; and the penalty (money fine, time in jail or prison, or probation or deferred sentence). If you received a deferred judgment, a deferred sentence, or probation, your documentation must include the date that you were discharged or released from probation or other supervision.

2. Have you ever received a pardon or its equivalent for any criminal offense in this or any other country? ☐ YES* ☐ NO
3. Has any member of your family or of your spouse's family ever been convicted of a felony or any gambling-related offense in this or any other country? ☐ YES* ☐ NO

*If you answered **YES** to any of the preceding questions, explain in detail on a separate sheet and attach it to your application.

FINANCIAL HISTORY

1. Are you delinquent in the filing of any tax return with any taxing agency anywhere? ☐ YES* ☐ NO
2. Are you delinquent in the payment of any taxes, interest, or penalties due to any taxing agency anywhere? ☐ YES* ☐ NO
3. Are you delinquent in the payment of any obligations to any governmental agency anywhere? ☐ YES* ☐ NO
4. Are you delinquent in the repayment of any government-insured student loans? ☐ YES* ☐ NO
5. Have you, as an individual, principal of any form of business entity, or as an owner, officer or director of a corporation, ever filed a bankruptcy petition, had such a petition filed against you or the business entity or the corporation; or had a receiver, fiscal agent, trustee, reorganization trustee or similar person appointed for you or the business entity or corporation? ☐ YES* ☐ NO
5. Do you now own, have ever owned, or otherwise derive a benefit from assets held outside the United States, whether held in your own name or another name, on your behalf or for another person or entity, or through other individuals or business entities, or in trust, or in any other fashion or status? ☐ YES* ☐ NO
7. Has a complaint, judgment, consent decree, settlement or other disposition related to a violation of federal, state or similar foreign antitrust, trade or security law or regulation ever been filed or entered against you or a business entity of which you were a principal or against a corporation for which you were an owner, officer or director. ☐ YES* ☐ NO

*If you answered **YES** to any of the questions above or checked any boxes above, give details on separate sheet. Include any items currently under formal dispute or legal appeal. Attach any documents to prove your settlement on any of these issues.

Applicant's Printed Name (last, first, middle)

PERSONAL FINANCIAL INFORMATION

1. ANNUAL INCOME

YOU MUST SUBMIT COPIES OF FEDERAL INCOME TAX RETURNS FOR THE PAST THREE (3) YEARS.

Salary (Source): _____ \$ _____

Salary (Source): _____ \$ _____

Interest (Source): _____ \$ _____

Interest (Source): _____ \$ _____

Dividends (Source): _____ \$ _____

Dividends (Source): _____ \$ _____

Other (Source): _____ \$ _____

Other (Source): _____ \$ _____

TOTAL \$ _____

(Questions 2-5 for Associated Persons and Associated Keys Only)

Please submit all executed agreements or documents that grant you any right to any percent of ownership or percent of income from the Colorado gaming business with which you are associated.

2. Amount to be invested in business: \$ _____

3. Percentage of ownership this amount represents: _____ %

4. Investment will be derived from the following sources:

5. Has your interest in this gaming establishment been assigned, pledged or hypothecated to any person, firm, or corporation, or has any agreement been entered into whereby your interest is to be assigned, pledged or sold, either in part or whole? ☐ YES ☐ NO

If YES, explain: _____

APPLICANT'S INITIALS _____

SCHEDULE “Q”
Business Investments

List below all business investments in which any direct, indirect, vested or contingent interest is held by you, your spouse or dependent children, or by any person or entity on your behalf in which you have a current, or anticipate a future, benefit. Include the names of all individuals or entities that share a direct, indirect, vested or contingent interest therein, including, but not limited to, joint ventures, partnerships, sole proprietorships and corporations.

Entity Name	Entity Type	# Shares or Units	% Owned	Purchase Price	Purchase Date	Name(s) in Which Held	Other Owners (with % Owned)	Market Value



AFFIDAVIT - RESTRICTIONS ON PUBLIC BENEFITS

I, _____, swear or affirm under penalty of perjury under the laws of the State of Colorado that **(check one)**:

- ☐ I am a United States citizen.
- ☐ I am not a United States citizen but I am a Permanent Resident of the United States.
- ☐ I am not a United States citizen but I am lawfully present in the United States pursuant to Federal law.
- ☐ I am a foreign national not physically present in the United States.

I understand that this sworn statement is required by law because I have applied for a public benefit. I understand that state law requires me to provide proof that I am lawfully present in the United States prior to receipt of this public benefit. I further acknowledge that making a false, fictitious, or fraudulent statement or representation in this sworn affidavit is punishable under the criminal laws of Colorado as perjury in the second degree under Colorado Revised Statute 18-8-503 and it shall constitute a separate criminal offense each time a public benefit is fraudulently received.

Signature

Date

AFFIRMATION & CONSENT

I, _____, state under penalty of perjury that the entire Multi Jurisdictional Personal History Disclosure Form and Colorado Rider, statements, attachments, and supporting schedules are true and correct to the best of my knowledge and belief, and that this statement is executed with the knowledge that misrepresentation or failure to reveal information requested may be deemed sufficient cause for the refusal to issue a gaming license by the State of Colorado. Further, I am aware that later discovery of an omission or misrepresentation made in the above statements may be grounds for the denial of a temporary gaming license or the revocation of the license. I am voluntarily submitting this application to the Colorado Limited Gaming Control Commission under oath with full knowledge that I may be charged with perjury or other crimes for intentional omissions and misrepresentations pursuant to Colorado law. I further consent to any background investigation necessary to determine my present and continuing suitability and that this consent continues as long as I hold a Colorado Gaming License, and for 90 days following the expiration or surrender of such gaming license. I also agree that the State of Colorado, its agencies, officers and assigns, shall be entitled to collect from me all expenses incurred in recovery of any debt created by this license application, or in pursuing any other remedy provided by law, including but not limited to reasonable attorney fees and costs. Note: If your check is rejected due to insufficient or uncollected funds, the Department of Revenue may collect the payment amount directly from your banking account electronically.

Printed Full Legal Name (Last, First, Middle)	
Signature	Date

INVESTIGATION AUTHORIZATION

AUTHORIZATION TO RELEASE INFORMATION

I, _____, hereby authorize the Colorado Limited Gaming Control Commission, the Division of Gaming, the Colorado Bureau of Investigation and the Colorado Attorney General (hereafter, the Investigatory Agencies) to conduct a complete investigation into my personal background, using whatever legal means they deem appropriate. I hereby authorize any person or entity contacted by the Investigatory Agencies to provide any and all such information deemed necessary by the Investigatory Agencies. I hereby waive any rights of confidentiality in this regard.

I understand that by signing this authorization, a financial record check may be performed. I authorize any financial institution to surrender to the Investigatory Agencies a complete and accurate record of such transactions that may have occurred with that institution, including, but not limited to, internal banking memoranda, past and present loan applications, financial statements and any other documents relating to my personal or business financial records in whatever form and wherever located.

I understand that by signing this authorization, a financial record check of my tax filing and tax obligation status may be performed. I authorize the Colorado Department of Revenue to surrender to the Investigatory Agencies a complete and accurate record of any and all tax information or records relating to me. I authorize the Investigatory Agencies to obtain, receive, review, copy, discuss and use any such tax information or documents relating to me. I authorize the release of this type of information, even though such information may be designated as "confidential" or "nonpublic" under the provisions of state or federal laws.

I understand that by signing this authorization, a criminal history check will be performed. I authorize the Investigatory Agencies to obtain and use from any source, any information concerning me contained in any type of criminal history record files, wherever located. I understand that the criminal history record files contain records of arrests which may have resulted in a disposition other than a finding of guilt (i.e., dismissed charges, or charges that resulted in a not guilty finding). I understand that the information may contain listings of charges that resulted in suspended imposition of sentence, even though I successfully completed the conditions of said sentence and was discharged pursuant to law. I authorize the release of this type of information, even though this record may be designated as "confidential" or "nonpublic" under the provisions of state or federal laws.

The Investigatory Agencies reserve the right to investigate all relevant information and facts to their satisfaction. I understand that the Investigatory Agencies may conduct a complete and comprehensive investigation to determine the accuracy of all information gathered. However, the State of Colorado, Investigatory Agencies, and other agents or employees of the State of Colorado shall not be held liable for the receipt, use, or dissemination of inaccurate information. I, on behalf of the applicant, its legal representatives, and assigns, hereby release, waive, discharge, and agree to hold harmless, and otherwise waive liability as to the State of Colorado, Investigatory Agencies, and other agents or employees of the State of Colorado for any damages resulting from any use, disclosure, or publication in any manner, other than a willfully unlawful disclosure or publication, of any material or information acquired during inquiries, investigations, or hearings, and hereby authorize the lawful use, disclosure, or publication of this material or information.

Any information contained within my application, contained within any financial or personnel record, or otherwise found, obtained, or maintained by the Investigatory Agencies, shall be accessible to law enforcement agents of this or any other state, the government of the United States, any foreign country, or any Indian Tribe.

Printed Full Legal Name (Last, First, Middle)	
Signature (Must be signed in front of two witnesses)	
Dated this _____ day of _____, 20____, at _____ <div style="display: flex; justify-content: space-between; font-size: small; margin-top: 5px;">(day)(month)(year)(time)</div> <div style="display: flex; justify-content: space-between; font-size: small; margin-top: 10px;">(city)(state)</div>	
Witness 1 Signature	Witness 2 Signature

APPLICANT'S REQUEST TO RELEASE INFORMATION

TO: _____

FROM: (Applicant's Printed Name) _____

NOTE: IF APPLICANT IS MARRIED, THE SPOUSE'S SIGNATURE IS REQUIRED BELOW.

1. I/We hereby authorize and request all persons to whom this request is presented having information relating to or concerning the above named applicant to furnish such information to a duly appointed agent of the Colorado Division of Gaming, or the Colorado Bureau of Investigation, whether or not such information would otherwise be protected from the disclosure by any constitutional, statutory or common law privilege.
2. I/We hereby authorize and request all persons to whom this request is presented having documents relating to or concerning the above named applicant to permit a duly appointed agent of the Colorado Division of Gaming, or the Colorado Bureau of Investigation to review and copy any such documents, whether or not such documents would otherwise be protected from disclosure by any constitutional, statutory, or common law privilege.
3. I/We hereby authorize and request the Colorado Department of Revenue to permit a duly appointed agent of the Colorado Division of Gaming, or the Colorado Bureau of Investigation to obtain, receive, review, copy, discuss and use any such tax information or documents relating to or concerning the above named applicant, whether or not such information or documents would otherwise be protected from disclosure by any constitutional, statutory, or common law privilege.
4. If the person to whom this request is presented is a brokerage firm, bank, savings and loan, or other financial institution or an officer of the same, I/we hereby authorize and request that a duly appointed agent of the Colorado Division of Gaming, or the Colorado Bureau of Investigation be permitted to review and obtain copies of any and all documents, records or correspondence pertaining to me/us, including but no limited to past loan information, notes co-signed by me/us, checking account records, savings deposit records, safe deposit box records, passbook records, and general ledger folio sheets.
5. I/We do hereby make, constitute, and appoint any duly appointed agent of the Colorado Division of Gaming, or the Colorado Bureau of Investigation, my/our true and lawful attorney in fact for me/us in my/our name, place, stead, and on my/our behalf and for my/our use and benefit:
 - (a) To request, review, copy sign for, or otherwise act for investigative purposes with respect to documents and information in the possession of the person to whom this request is presented as I/we might;
 - (b) To name the person or entity to whom this request is presented and insert that person's name in the appropriate location in this request;
 - (c) To place the name of the agent presenting this request in the appropriate location on this request.
6. I grant to said attorney in fact full power and authority to do, take, and perform all and every act and thing whatsoever requisite, proper, or necessary to be done, in the exercise of any of the rights and powers herein granted, as fully to all intents and purposes as I/we might or could do if personally present, with full power of substitution or revocation, hereby ratifying and confirming all that said attorney in fact, or his substitute or substitutes, shall lawfully do or cause to be done by virtue of this power of attorney and the rights and powers herein granted.
7. This power of attorney ends twenty-four (24) months from the date of execution.
8. The above named applicant has filed with the Colorado Limited Gaming Control Commission an application for a gaming license. Said applicant understands that it is seeking the granting of a privilege and acknowledges that the burden of proving its qualifications for a favorable determination is at all times on the applicant. Said applicant accepts any risk of adverse public notice, embarrassment, criticism, or other action of financial loss, which may result from action with respect to this application.
9. I/We do, for myself/ourselves, my/our heirs, executors, administrators, successors, and assigns, hereby release, remise, and forever discharge the person to whom this request is presented, and his agents and employees from all and all manner or actions, causes of action, suits, debts, judgments, executions, claims, and demands whatsoever, known or unknown, in law or equity, which the applicant ever had, now has, may have, or claims to have against the person to whom this request is being presented or his agents or employees arising out of or by reason of complying with the request.
10. I/We agree to indemnify and hold harmless the person to whom this request is presented and his agents and employees from and against all claims, damages, losses, and expenses, including reasonable attorneys' fees arising out of or by reason of complying with this request.
11. A reproduction of this request by photocopying or similar process shall be for all intents and purposes as valid as the original.

Printed Full Legal Name (Last, First, Middle)	
Signature (Must be signed in front of two witnesses)	
Dated this _____ day of _____ 20____ at _____, _____, _____ (day) (month) (year) (time) (city) (state)	
Witness 1 Signature	Witness 2 Signature

Printed Full Legal Name (Last, First, Middle)	
Signature (Must be signed in front of two witnesses)	
Dated this _____ day of _____ 20____ at _____, _____, _____ (day) (month) (year) (time) (city) (state)	
Witness 1 Signature	Witness 2 Signature

Signature of Division of Gaming agent presenting this request	Date
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VERIFICATION OF FINGERPRINTS

This form is to be completed by the law enforcement agency that takes your fingerprints.

The enclosed fingerprint card contains the prints of _____
taken by me. Name of Applicant

Name of Person Taking Fingerprints
Title
Law Enforcement Agency Name
ORI #
Signature
Date

Colorado Division of Gaming

**AUTHORIZATION FOR DISCLOSURE
FOR INTERNAL REVENUE SERVICE**

Printed Full Legal Name (Last, First, Middle)	
Social Security Number	Home Phone Number
Street Address (Street, City, State, Zip)	
Mailing Address (if different from Street Address)	
Name and Social Security Number of Person(s) You Have Filed a Joint Tax Return Within Past 5 Years	
Type of Return	Form 1040, Individual Income Tax
Taxable Periods	2014, 2015, 2016, 2017 and 2018
<i>I authorize the Internal Revenue Service to disclose tax return information (including, but not limited to, fact of filing, fact of payment, terms of installment agreement) regarding the above returns to the Division of Gaming, Colorado Department of Revenue.</i>	
Signature	
Date	

For Division of Gaming Use Only

Date: _____
Initials: _____
Fax Time: _____
Reply Received: _____
Mail In: _____



COLORADO
Department of Revenue
Enforcement Division – Gaming

17301 West Colfax Avenue, Suite 135
Golden, CO 80401

Dear Applicant:

Thank you for your interest in becoming a licensed gaming employee. Before you submit your application, I want to make you aware of a few facts.

The casino industry in Colorado is one of the most scrutinized businesses in the state, because Colorado citizens want the industry and everyone involved in it free from even the hint of any corruption or deceit. That's why we take our regulation of the industry very seriously, including the issuance of licenses.

During the licensing process, we will conduct a thorough check of your background. If you pass our qualifications, you will be issued a support license that will allow you to work in a casino. You should know that a gaming license is a privilege, not a right. And one thing you must do to obtain this privilege is be completely honest on your license application.

In particular, we ask you on page 4 of the application: "...since you turned age 18, have you ever been arrested, served with a criminal summons, charged with, or convicted of ANY crime or offense in any manner?" The application goes on to tell you to explain ALL such arrests or charges no matter the final outcome.

Did you list ALL arrests and charges since age 18? Are you clear about what you need to disclose? If not, then ask someone at the front desk to assist you and answer any questions you might have. Here are some of the excuses we have heard from people who have failed to disclose arrests to us:

- My attorney told me I didn't have to disclose.
- I didn't think I was arrested, because I only got a ticket.
- I didn't think the arrest had anything to do with gaming.
- I didn't think that was still on my record.

But there is no excuse not to disclose an arrest. You have been informed throughout the application to disclose ALL arrests. And you have just been informed again: You will not necessarily be denied a license if you have ever been arrested, but you will be denied if you fail to disclose any arrest.

Sincerely,

Daniel J. Hartman
Director
Colorado Division of Gaming

I have read and understand this letter.

Signed _____ Date _____



Colorado Division of Gaming

STATEMENT OF UNDERSTANDING

I understand the license being issued today is still subject to denial pending the final results of the Division of Gaming investigation of my background. This temporary license will become permanent upon the final results of the background investigation unless I receive notification otherwise. Upon receipt of a Notice of Denial, I agree to immediately surrender my identification badge to the Division of Gaming. I understand such a denial will be effective immediately. I understand I may appeal the denial of my application, and until a determination is made of that appeal, I cannot possess a gaming license. I understand I would have no right to work in any capacity that requires a gaming license unless the denial of my gaming license is reversed by an order of the Colorado Limited Gaming Control Commission.

I understand I am responsible for knowing and complying with state laws and regulations governing limited gaming. I understand I may obtain or view these documents at any of the Division of Gaming offices. I understand I am being made aware of the following regulations and agree to comply with them:

- I am required to notify the Golden office of the Division of Gaming online or in writing of any arrest, criminal charge, or conviction pending against me within 10 days of such arrest, charge or conviction. This notification requirement shall not apply to non-felony traffic violations unless they result in suspension or revocation of a driver's license, are based on allegations of driving under the influence or impairment of intoxicating liquor or drugs, or result in me being taken into custody. [Regulation 30-405(4)] In addition, infractions which must be reported include reckless driving, leaving the scene of an accident (hit and run), driving under denial, suspension, or revocation.
- I may pay a \$5 fee to obtain a duplicate license. (Regulation 30-232)
- I am required to renew my gaming license 30 days before the expiration of the license I am being issued. [Regulation 30-302(2)] (Note: You should receive a renewal application in the mail 60-90 days prior to your expiration date, but you are still ultimately responsible to obtain a renewal application if you do not receive one in the mail and to file 30 days before expiration.)
- If I allow my Gaming license to expire for even one day and then try to reapply, I must submit an original license application along with the original application fee. [Regulation 30-303(3)]

I understand during the period in which I hold a gaming license, I must:

- File state and federal income tax returns;
- Remain current on all state and federal tax and other governmental obligations, including any present and/or future payment plans;
- Remain current on all government-insured student loan obligations, including any present and/or future payment plans;
- Remain current on all child support obligations, including any present and/or future payment plans.

I understand the Division of Gaming will perform a background check one year from the month in which my license is being issued to check whether I have filed necessary tax returns and remained current on the government obligations listed above, and whether I have any outstanding arrest warrants. I understand if the Division of Gaming contacts me regarding any issues associated with this annual check, I will provide any information the Division of Gaming requests to show my continued suitability to hold a gaming license.

I understand I am responsible to notify the Division of Gaming office in writing when I have a change in name, residence address, mailing address or phone number, since all correspondence is sent to my last known address. Failure to notify the Division could result in my not receiving approval letters, renewal applications, legal notices, and other correspondence.

I have read all of the above information and understand my responsibilities as a gaming licensee. I further understand that failure to comply with any law, regulation, or the provisions of this Statement may be grounds for disciplinary action, including but not limited to the suspension or revocation of my gaming license and a monetary penalty after an administrative hearing.

LICENSEE'S FULL PRINTED NAME	LICENSE NUMBER
LICENSEE'S SIGNATURE	DATE