



COLORADO
Department of Revenue
Specialized Business Group—Gaming

Colorado Gaming and Sports Betting Business License Renewal Application Form

COLORADO DIVISION OF GAMING

1707 Cole Blvd., Suite 350, Lakewood, CO 80401

(303) 205-1300 / (303) 205-1342 (fax)

142 Lawrence St. / P.O. Box 721, Central City, CO 80427

(303) 582-0529 / (303) 582-0535 (fax)

350 W. Carr Ave. / P.O. Box 1209, Cripple Creek, CO 80813

(719) 689-3362 / (719) 689-3366 (fax)

COLORADO DIVISION OF GAMING

Gaming and Sports Betting Business License Renewal Application Form	
<input type="checkbox"/>	<p>1. BUSINESS FORM COMPLETE & SIGNED</p> <ul style="list-style-type: none"> <input type="checkbox"/> Preprinted information verified and updated <input type="checkbox"/> All questions answered and marked <input type="checkbox"/> Application signed & dated
<input type="checkbox"/>	<p>2. ATTACHMENTS TO BUSINESS FORM ENCLOSED</p> <ul style="list-style-type: none"> <input type="checkbox"/> Trade name registration from Colorado Secretary of State's Office to verify DBA <input type="checkbox"/> Ownership detail as requested in Question 1 <input type="checkbox"/> Explanations to any Yes answers <input type="checkbox"/> All information requested to be provided <input type="checkbox"/> Signed Investigation Authorization/Authorization to Release Information
<input type="checkbox"/>	<p>3. ASSOCIATED PERSON DISCLOSURE FORMS COMPLETE & SIGNED</p> <ul style="list-style-type: none"> <input type="checkbox"/> All form blanks filled in <input type="checkbox"/> All questions answered and marked <input type="checkbox"/> Application signed & dated
<input type="checkbox"/>	<p>4. ATTACHMENTS TO ASSOCIATED PERSON DISCLOSURE FORMS ENCLOSED</p> <ul style="list-style-type: none"> <input type="checkbox"/> Explanations to any Yes answers <input type="checkbox"/> Signed Investigation Authorization/Authorization to Release Information
<input type="checkbox"/>	<p>5. APPLICATION & CHECK MAILED TO DIVISION OF GAMING</p> <p>Mail or bring in application to: Colorado Division of Gaming, 1707 Cole Blvd., Suite 350, Lakewood, CO 80401.</p> <p>The Division is open for licensing by appointment only. You can find the link to make an appointment on our website at SBG.Colorado.gov/Gaming.</p>

GENERAL INSTRUCTIONS

1. Do not try to replicate Division of Gaming forms. You must use forms provided by or obtained from the Division of Gaming. You may photocopy Division of Gaming forms, but do not attempt to replicate them on your computer. Division of Gaming forms are available in electronic format online at <https://www.colorado.gov/pacific/enforcement/gaming>. You must download the form to your computer and use Adobe Acrobat Reader or Adobe Acrobat Exchange to fill in the forms. If you use Acrobat Reader, you cannot save the information, but you can print it out. If you use Acrobat Exchange, you can save the information.
2. Submit supporting documents electronically or in paper form. While the application must be submitted in paper form, you have the option of submitting all other supporting documents electronically on computer disk or flash drive, in .pdf, .doc, .xls or .tif format. (Do not submit by e-mail.) A legend must be submitted detailing the file names on the disk along with a description of the documents contained in each file.
3. Multiple licenses. If you are submitting multiple renewal forms at one time, you need only submit one set of Associated Person Disclosure Forms with attachments and IRS disclosure forms. You must submit IRS form 8821 for each entity's separate FEIN number.
4. Do not mail forms to anyone's attention at the Division of Gaming. Submit forms to the Division of Gaming's Lakewood address. Do not address the envelope to any particular individual within the Division, as this may delay the process.

Colorado Limited Gaming Control Commission
**GAMING AND SPORTS BETTING BUSINESS
 LICENSE RENEWAL APPLICATION FORM**

PLEASE VERIFY & UPDATE ALL INFORMATION BELOW				
Company Name				
DBA (Submit Trade Name Registration)				
License Number	License Type	Expiration Date	Due Date	Amount Due
Phone Number	Email	FEIN		
Street Address				
City			State	Zip
Mailing Address				
City			State	Zip
FINANCIAL INFORMATION				
<p>1. List all persons and/or entities with ownership interest, including parent companies, and all officers and directors, whether they have ownership interest or not. Include the effective dates of any changes in officers and directors since the last renewal. If an entity (corp., partnership, LLC, etc.) has an interest, list all persons associated with such entity, their ownership in the entity and their effective ownership in the license. If a PTC, submit recent shareholder list from your transfer agent for all shares of common and preferred stock. Include the following information for each person/entity (except PTC holders):</p> <p style="text-align: center;">Name, Ownership Percentage, Title, SSN/FEIN, Date of Birth, Address, Phone Number</p>				
<p>2. Submit the attached Associated Person Disclosure Form and Authorization for Disclosure for Internal Revenue Service form for all persons listed above with 5% or more effective ownership interest in a gaming licensee, or 10% or more effective ownership interest in a sports betting licensee, and all officers and directors., and all officers and directors.</p>				
<p>3. In the last year, has there been a change in ownership or ownership allocation, a transfer of stock, a change in the articles of incorporation or in the corporate by-laws, or any other change affecting ownership or organizational structure of the licensee and/or the licensed establishment? If Yes, explain in detail on a separate sheet and attach copies of all available documentation concerning the changes.</p>				<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>4. In the last year, has the licensee (including all parent or subsidiary companies, if any) filed for bankruptcy, been sued, had a civil judgment rendered against it, had a tax lien filed against it, or become delinquent in the payment or filing of any taxes, interest, penalties or judgments owed to the State of Colorado, the United States government or the government of any other state. If Yes, explain in detail on a separate sheet and attach copies of all available documentation.</p>				<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>5. List all persons or entities supplying goods, equipment, devices, or services in return for payment of a percentage, or calculated upon a percentage of limited gaming revenue or income.</p>				
<p>6. List the full name and address of every person or entity, including lending agencies, who have a right to share in the revenues of limited gaming, whether as an owner, assignee, landlord, or otherwise to whom any interest or share in the profits of limited gaming has been pledged or hypothecated as security for a debt or deposited as a security for the performance of an act or to secure the performance of a contract of sale.</p>				
<p>7. Describe any new financing or new lines of credit obtained or applied for the since the last renewal, including a description of the purpose for the financing or lines of credit.</p>				

Applicant's Printed Trade Name (DBA)

FINANCIAL INFORMATION (continued)

- 8. List all debt that has been retired or eliminated since the last renewal.
- 9. Describe any material changes in financial position since the last renewal.
- 10. Provide copies of management letters prepared by independent auditors and your responses to the management letters.
- 11. Provide a copy of any annual reports or other correspondence sent to shareholders since the last renewal period.
- 12. List existing capital and operating leases.
- 13. Provide a copy of all new leases executed since the last renewal period.
- 14. Describe any other material financial agreements, which are not covered by previous requests.

CRIMINAL INFORMATION

- 15. In the last year, has the licensee (including all parent or subsidiary companies, if any) been indicted, served with a criminal summons, charged with, or convicted of ANY crime or offense in any manner? Include ALL offenses regardless of class of crime or outcome, even if the charges were dismissed or you were found not guilty. Yes No

If Yes, explain in detail on a separate sheet and attach it to your application. Provide official documentation from the court showing the final disposition for any charge that was:
(1) gambling related; (2) theft by deception; (3) any other crime involving fraud or deception; or (4) any felony.

TAX INFORMATION

- 16. Provide a copy of the most recent federal income tax return.
- 17. Provide a copy of the most recent Colorado business income tax return.
- 18. Provide a listing of all other governmental entities with which you are required to file or pay taxes.
- 19. Provide a listing of any and all known delinquent taxes to governmental entities.

LITIGATION

- 20. Provide a listing of all new litigation since the last renewal, including a brief summary describing materiality, assessment of risk, potential loss, case status, etc. Multiple cases, such as slip and fall cases, may be grouped together by similarity of risk or materiality and summarized as a single class or group.
- 21. Provide a listing of continuing litigation and a brief description of the current status since the last renewal. If no change, state "N/A".

GAMING/SPORTS BETTING LICENSE INFORMATION

- 22. In the last year, has the licensee (including all parent or subsidiary companies, if any) been denied or surrendered a gaming/sports betting license, withdrawn a gaming/sports betting license application or had any disciplinary action taken against a gaming license in this or any other jurisdiction? If Yes, explain in detail on a separate sheet and attach copies of all available documentation. Yes No
- 23. Provide a listing of all approved gaming/sports betting licenses and applications in jurisdictions outside of Colorado, including date first licensed, status of license, and name, address, and phone number of the regulatory agency where the license is held.
- 24. Provide a listing of all pending gaming/sports betting licenses and applications in jurisdictions outside of Colorado, including date applied, status of application, and name, address, and phone number of the regulatory agency where the application was made.
- 25. Provide a listing of any ownership interest and/or business conducted with any internet gaming companies. Detail the nature of the relationship with the internet company.

Applicant's Printed Trade Name (DBA)

BOARD MINUTES

- 26. Provide copies of minutes of all Board of Directors' meetings held since the last renewal.
- 27. Provide copies of minutes of Compliance Committee and Audit Committee meetings held since the last renewal period.

EXCLUSIVE RIGHT TO PROPERTY

- 28. For retail licensees, provide a copy of the lease, title, deed or other applicable documentation that documents your legal right to possess the real casino property you own or occupy in Colorado.

OTHER DOCUMENTATION

- 29. Provide a detailed organizational chart including officers, managers, and departments.
- 30. Provide a copy of all internal audit reports submitted to management, other than those already provided to the Division's Audit Section.
- 31. For retail licensees, provide a current inventory listing of the number of slot machines, blackjack and poker tables on the gaming floor.
- 32. For retail licensees, provide a current break-even analysis that shows the average daily income per device required to cover the total operating costs of the casino property. Provide the financial documentation used to support the calculation.

Affirmation & Consent

I, _____, the undersigned, do hereby certify that I have not knowingly made a false statement or omitted any material fact on this application or any attachments. I understand that untruthful or misleading answers are cause for denial of the application or termination of any gaming license. I authorize the Colorado Bureau of Investigation, the Colorado Attorney General, the Division of Gaming and the Colorado Limited Gaming Control Commission to investigate matters set forth in this license application. I understand that further information may be requested of me in regard to this application and I agree to supply such information upon request. 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.

Type or Print Name of Applicant/Authorized Agent of Business

Title

Signature

Date

Investigation Authorization Authorization to Release Information

I, _____, as authorized agent of the applicant, 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 the background of the applicant business, using whatever legal means they deem appropriate. On behalf of the applicant, 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. On behalf of the applicant, I hereby waive any rights of confidentiality in this regard.

I understand that by signing this authorization on behalf of the applicant, a financial record check may be performed. On behalf of the applicant, 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 business financial records in whatever form and wherever located.

I understand that by signing this authorization on behalf of the applicant, a financial record check of the applicant's 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 the applicant. I authorize the Investigatory Agencies to obtain, receive, review, copy, discuss and use any such tax information or documents relating to the applicant. 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.

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 the applicant's 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.

Applicant's Business Name	Trade Name
Printed Full Legal Name of Authorized Agent (Last, First, Middle)	Title
Signature	Date
Signature of Division of Gaming Agent presenting this request	Date

Personal and Financial Disclosures Associated Persons

Please type or print clearly

You may duplicate this form as needed. This page must be completed by each person named on page 1.

Last Name			First Name			Middle Name		
Alias (i.e. nicknames, maiden name, aliases, other name changes or otherwise)						Your Gaming License Number		
Mailing Address (if applicable)				City		State	ZIP	
Present Business Address or Place of Employment								
Street Address				City		State	ZIP	
Occupation				Business Phone		Residence Phone		
Date of Birth		Place of Birth City			County		State	
Social Security Number		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> X	Color of Hair	Color of Eyes	Weight	Height	Driver License Number	State of Issue
<p>Within the last year, have you been arrested, served with a criminal summons, or charged with a crime in any other manner? You must include ALL offenses, regardless of class of crime, including serious traffic offenses (such as DUI, DWAI, hit & run, reckless driving, etc.). You do not need to include minor traffic tickets unless they resulted in your arrest or the suspension or revocation of your driver's license. If yes, explain in detail, attaching additional pages if needed. You must also provide official documentation from the court which shows the final disposition (outcome) of your case if the charge was: (1) gambling related; (2) theft by deception; (3) any other crime involving fraud or deception; or (4) any felony.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>								
<p>Within the last year, have you filed for bankruptcy, been sued, had a civil judgment rendered against you, had a tax lien filed against you, or become delinquent in the payment of any taxes, interest, penalties, or judgments owned to the State of Colorado, the United States government, or the government of any other state? If yes, explain in detail, attaching additional pages if needed.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>								
Affirmation & Consent								
State Of _____								
County Of _____								
<p>I, _____, being duly sworn, depose and say that the above statements and information are true and correct to the best of my knowledge and belief and that these statements and schedules are 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, that 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 a gaming license. I further state that I am voluntarily submitting this application to the Colorado Limited Gaming Control Commission with full knowledge that I may be charged with perjury or other crimes for intentional misrepresentations pursuant to Colorado law. I further acknowledge that I consent to any background investigation necessary to determine my continued suitability and that this consent continues as long as I hold a Colorado Gaming License.</p>								
_____				_____				
Date				Applicant's Signature				

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 applicants 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 Last Name	Legal First Name	Legal Middle Name
Signature		Date
Signature of Division of Gaming Agent presenting this request		Date

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 not 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/We 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 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, judgements, 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 intent s and purposes as valid as the original.

Printed Full Legal Name (Last, First, Middle)	Signature
Spouse's Printed Full Legal Name (Last, First, Middle)	Spouse's Signature
Signature of Division of Gaming agent presenting this request	Date