



COLORADO
Department of Revenue
Specialized Business Group—Gaming

Colorado Vendor Minor License Renewal Application Form

COLORADO DIVISION OF GAMING

1707 Cole Blvd., Suite 300, 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

Vendor Minor License Renewal Application Form

<input type="checkbox"/>	1. APPLICATION COMPLETED & SIGNED <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"/>	2. ALL FORMS SIGNED AND ATTACHED <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"/>	3. \$350 APPLICATION FEE A \$350 NON-REFUNDABLE application fee is required. The application fee covers background costs and will not be refunded once the application is submitted regardless of licensing outcome, to include a denial, withdrawal or surrender of the license. Check, credit card, or money order payments are accepted. Make check or money order payable to: COLORADO DIVISION OF GAMING.
<input type="checkbox"/>	4. MAIL OR BRING IN APPLICATION Mail or bring in application to: Colorado Division of Gaming, 1707 Cole Blvd., Suite 300, Lakewood, CO 80401. 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 If Paying by Credit Card This application may also be submitted via email to dor_gaming_licensing@state.co.us . <u>Emailed applications cannot be processed until payment is received.</u> Please include your payment information below. Card Type: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard Expires _____ <input type="checkbox"/> Discover <input type="checkbox"/> American Express Name on Card _____ Card # _____ CVV # _____

Credit card use will be charged a processing fee by a third party vendor - users will be charged \$.75 per transaction plus 2.25% of the amount of the service fee. Payment by echeck will be charged a processing fee of \$1.00 per transaction by a third party vendor.

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 SBG.Colorado.gov/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 the application may be printed. If you use Acrobat Exchange, you can save the information.
2. If the application is 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. A legend must be submitted detailing the file name on the disk along with a description of the documents contained in each file.
3. Applications submitted in paper form must be submitted 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.
4. Applications may also be submitted by email to dor_gaming_licensing@state.co.us.

Colorado Limited Gaming Control Commission
**VENDOR MINOR LICENSE
 RENEWAL APPLICATION FORM**

☐ Vendor Minor Renewal ☐ \$350

PLEASE VERIFY & UPDATE ALL INFORMATION BELOW

Business 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

1. 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.	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. 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.	<input type="checkbox"/> Yes <input type="checkbox"/> No

CRIMINAL INFORMATION

3. In the last year, has the licensee (including all parent or subsidiary companies, or individuals that have 10 percent or more ownership or control, 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. 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.	<input type="checkbox"/> Yes <input type="checkbox"/> No
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TAX INFORMATION

4. Provide a listing of any and all known delinquent taxes to governmental entities.
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LITIGATION

5. 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.
6. Provide a listing of continuing litigation and a brief description of the current status since the last renewal. If no change, state "N/A".

Applicant's Printed Trade Name (DBA)

GAMING/SPORTS BETTING LICENSE INFORMATION

7. 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
8. Provide a listing of all approved gaming 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.
9. Provide a listing of all pending gaming 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.
10. 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.

OTHER DOCUMENTATION

11. Provide a detailed organizational chart including officers, managers, and departments.

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

APPLICANT'S REQUEST TO RELEASE INFORMATION

TO:

FROM: (Applicant's Printed Name)

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 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

Signature of Division of Gaming agent presenting this request

Date