

**NEVADA GAMING CONTROL BOARD
APPLICATION FOR A NEVADA GAMING LICENSE
BY AN INDIVIDUAL**

A. Name of Individual Applicant:

Full Name _____
*Last**First**Middle*

Mailing Address _____
*Street Address**Apartment/Unit #*

*City**State**ZIP Code*

Physical Address _____
*Street Address**Apartment/Unit #*

*City**State**ZIP Code*

Phone _____ Email (Required) _____

B. Name of Gaming Establishment Where You Are Seeking Approval: (Entity, Gaming Establishment, Holding Company, Intermediary Company, Trust)

Entity Name: _____

Address: _____
*Street Address**Suite/Unit #*

*City**State**ZIP Code*

Federal Tax I.D. No. _____

C. Type of License/Approval:

- ☐ Nonrestricted gaming (*15+ devices and/or live gaming*)
- ☐ Officer Title _____
(If this application is for interest in existing license, signature of a present licensee is required)
- ☐ Director Title _____
(If this application is for interest in existing license, signature of a present licensee is required)
- ☐ Shareholder
Total percent _____% Number of shares/units _____
Purchased From: ☐ Treasury ☐ Individual ☐ _____
(If this application is for interest in existing license, signature of a present licensee is required)
- ☐ Key Employee Title _____
(Signature of a present licensee is required)
- ☐ Member
Total percent _____% Number of shares/units _____
Purchased From: ☐ Treasury ☐ Individual ☐ _____
(If this application is for interest in existing license, signature of a present licensee is required)
- ☐ Manager
(If this application is for interest in existing license, signature of a present licensee is required)

Signature of Licensee _____

Print Name _____ Title _____

- ☐ Restricted gaming (1-15 devices only)
- ☐ Officer Title _____
(If this application is for interest in existing license, signature of a present licensee is required)
- ☐ Director Title _____
(If this application is for interest in existing license, signature of a present licensee is required)
- ☐ Shareholder
Total percent _____% Number of shares/units _____
Purchased From: ☐ Treasury ☐ Individual ☐ _____
(If this application is for interest in existing license, signature of a present licensee is required)
- ☐ Key Employee Title _____
(Signature of a present licensee is required)
- ☐ Member
Total percent _____% Number of shares/units _____
Purchased From: ☐ Treasury ☐ Individual ☐ _____
(If this application is for interest in existing license, signature of a present licensee is required)
- ☐ Manager
(If this application is for interest in existing license, signature of a present licensee is required)

Signature of Licensee _____

Print Name _____ Title _____

- ☐ Interest in Existing License
Total percent _____% Number of shares/units _____
Purchased From: ☐ Treasury ☐ Individual ☐ _____

Signature of Licensee _____

Print Name _____ Title _____

- ☐ Finding of Suitability _____
☐ Participation in Gaming Revenue (Signature of a present licensee is required)

Signature of Licensee _____

Print Name _____ Title _____

- ☐ Other _____

D. Fee(s) to accompany this application (To be paid to Nevada Gaming Control Board):

Send a check or money order in the amount of \$1000 (non-refundable application fee) for the following:

- | | |
|---|---|
| <input type="checkbox"/> Nonrestricted – Officer | <input type="checkbox"/> Nonrestricted – Member |
| <input type="checkbox"/> Nonrestricted – Director | <input type="checkbox"/> Nonrestricted – Manager |
| <input type="checkbox"/> Nonrestricted – Shareholder | <input type="checkbox"/> Nonrestricted – Member/Manager |
| <input type="checkbox"/> Nonrestricted – Key Employee | <input type="checkbox"/> Nonrestricted – Interest in Existing License |

Please refer to the [Fee Schedule](#) for the application fee(s) and investigation fee(s) to submit with the application (non-refundable application fee):

- | | |
|--|--|
| <input type="checkbox"/> Restricted – Officer | <input type="checkbox"/> Restricted – Member |
| <input type="checkbox"/> Restricted – Director | <input type="checkbox"/> Restricted – Manager |
| <input type="checkbox"/> Restricted – Shareholder | <input type="checkbox"/> Restricted – Member/Manager |
| <input type="checkbox"/> Restricted – Key Employee | <input type="checkbox"/> Restricted – Interest in Existing License |

**THE OBLIGATIONS HEREIN CONTAINED ARE NOT INTENDED TO BE COMPLETE.
CITY, COUNTY AND NEVADA LAWS AND REGULATIONS MUST BE FOLLOWED
AND ARE APPLICABLE AT ALL TIMES.**

I, _____, being duly sworn, depose and say that the above statements 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 a municipality, or by a county or by the State of Nevada. Further, that I am aware that later discovery of an omission or misrepresentation made in the above statements may be grounds for the revocation of a gaming license. Further, that I am voluntarily submitting this application under oath with full knowledge that the Gaming Control Act (NRS 463.140(5)) provides that "Any person making false oath in any matter before either the board or commission is guilty of perjury." I am voluntarily submitting this application under oath with full knowledge that I may be required to submit this application to appropriate municipal and county authorities charged by law with granting gaming licenses.

APPLICANT _____
Signature

STATE OF _____

COUNTY OF _____ (SS)

SUBSCRIBED AND SWORN TO (OR AFFIRMED) BEFORE ME ON

THIS _____ DAY OF _____, _____

SIGNATURE OF NOTARY PUBLIC

MY COMMISSION EXPIRES _____

(SEAL)

NOTICE

**THIS APPLICATION MAY NOT BE WITHDRAWN WITHOUT THE
PERMISSION OF THE LICENSING AGENCY**

**DURING THE COURSE OF THE INVESTIGATION OF THE APPLICATION, AN
APPLICANT MAY BE REQUIRED TO UNDERGO A DRUG TEST. REFUSAL
TO UNDERGO A DRUG TEST COULD BE DEEMED GROUNDS FOR DENIAL,
PURSUANT TO NRS 463.170 AND NGC REGULATION 4.040.**