

APPLICATION FOR LICENSE TO DISTRIBUTE GAMING EQUIPMENT AND/OR SUPPLIES (Including Pull Tabs or Other Gaming Devices)

(Including Pull Tabs or Other Gaming Devices)
NORTH DAKOTA OFFICE OF ATTORNEY GENERAL
LICENSING SECTION
SFN 16021 (7-2023)

Name of Appliciant						Telephone Number	
Mailing Address			City		State	ZIP Code	
Name of Business (If Different)					Telephone	Telephone Number	
Address of Main Office			City		State	ZIP Code	
Name of Person to Contact with Questions	Contact Person's Title	Contact Pe	erson's Daytime	e Telephone Number C	Contact Person	's Email Address	
Distributing Business is a: General Partnership Partnership Limited Partnership Limited Liabili			Sole Proprietorship Corporation Limited Liability Company				
If Business Is A Partnership - List Names of All Partners							
1. If CORPORATION, list corporate officers; If GENERAL PARTNERSHIP, LIMITED LIABILITY PARTNERSHIP, or LIMITED PARTNERSHIP, list general partners, limited partners, individual partners; If LIMITED LIABILITY COMPANY, list managers, governors, or individual members. (Attach Additional If Needed)							
Name Title			A	ddress	State	ZIP Code	
2. List Shareholders having 5% or more Financial Interest in the Distributorship (Attach Additional Sheets if Necessary)							
Name of Shareholder					Percent of Share		
					%		
					%		
					<u>%</u>		
						76	
3. List all states in which applicant is licensed as a gaming distributor							
Has applicant ever been denied a gaming dist Yes No	If Y	If Yes, list the state(s) applicant has received denial from:					
5. List the names of all Employees of the Distributorship (Attach Additional Sheets if Necessary)							
6. LOCATIONS OF OFFICE(S), WAREHOUSE(S) OR OTHER OUTLET(S) OF THE APPLICANT DISTRIBUTING BUSINESS							
Name of Place	Activity	Сог	Complete Address (Street, Number, City, State, ZIP Code)				

SFN 16021 (7-2023) Page 2							
7. List all businesses that are or will be manufacturi partner(s), officer(s), corporate director(s), or spo			ces, equipment	or supplies in wh	ich the applicant owner(s),		
Name of Business		Product Distributed					
Address		City	у		ZIP Code		
Person Having Interest	Relationship to Distrib	ution Business	Business Type		/Amount of Interest		
Name of Business			Product Distr	ibuted			
Address		City	l	State	ZIP Code		
Person Having Interest	Relationship to Distrib	ution Business	Business		/Amount of Interest		
List any other business, organization, association any financial interest.	n, or corporation in whicl	h the applicant owner(s	s), partner(s), o	fficer(s), corporate	e director(s), or spouse has		
Name of Business		Product or Activity					
Address		City	l	State	ZIP Code		
Person Having Interest	Relationship to Distrib	ution Business	Business Type		Amount of Interest		
Name of Business		Product or Activity					
Address		City	1	State	ZIP Code		
Person Having Interest	Relationship to Distrib	ution Business	Тур	pe/Amount of Inter	rest		
Name of Business		Product or Activity					
Address		City	I	State	ZIP Code		
Person Having Interest	Relationship to Distrib	ution Business	Тур	pe/Amount of Inter	rest		
			!				
9. PROPERTY							
Does the applicant own the premises which will be a lf YES, submit a copy of a document proving owner If NO, submit a copy of your lease agreement.				dicate).	Yes No		
DIRECTIONS Read the INSTRUCTIONS carefully before complete	now submitted	I have read this application and all the information attached to it which is now submitted to the OFFICE OF ATTORNEY GENERAL. All the					
Type or print all answers.		information submitted with an for this application is true, accurate, and complete. All required information has been disclosed.					
Be sure you have attached all required information a		I am authorized to submit this application and I assume full responsibility for the fair and lawful operation of all activities conducted under the license for which this application is made.					
The FEE for this license is \$2,000. Make sure check "OFFICE OF ATTORNEY GENERAL"							
SIGNATURES: If applicant is a partnership, <u>all</u> partr	General's ager	I consent to allow the North Dakota Attorney General or the Attorney General's agents to enter and inspect the facility in which gaming equipment and supplies are distributed.					
ALL QUESTIONS MUST BE ANSWERED OR APPLICABLE. If information is omitted, the form This will delay processing you application. If yo answers, attach separate sheets in the same form Label all attachments.	oT u. or	Print or Type Name					
SEND THE APPLICATION, LICENSE FEE, AND A	Title						
OFFICE OF ATTORNEY GENERAL LICENSING SECTION		<u> </u>					
600 E BOULEVARD AVE DEPT. 125 BISMARCK, ND 58505-0040		Signature					

Date Signed

Telephone: 701-328-2329

	INSTRUCTIONS
The following o	locuments must be submitted when applying for a License to Distribute Gaming Equipment and/or Supplies
	Completed application (SFN 16021); must be signed by proper individual (refer to 'directions').
	Request for Record Check (SFN 50424) (ONE TIME ONLY) a. Corporations LLC, etc.: One for each corporate officer or member, and shareholder of 5% or more. b. Partnership or individuals: One for each partner or individual. c. One for each new employee.
	Partnership; attach a copy of any currently effective written partnership agreement(s). Attach full details on any oral agreements between partners with respect to operation of the business.
	Corporation LLC, etc.; attach a copy of your North Dakota Corporate Certificate, or Certificate of Organization, or Partnership Registration (new applicants only)
	Attach a copy of any lease or rental agreement for the premises where distribution of pull tabs or gaming devices will be headquartered. If the agreement is oral, explain in detail the terms of the agreement. If the agreement is in writing, attach a copy of the lease or rental agreement.
	Attach information or documentation of all existing loans, contract agreements, mortgages, security agreements, or other financial obligations between the applicant owners or partners, any officer, director, or manager, and any other licensee including manufacturer and gaming organizations of the Gaming Division, Office of Attorney General, State of North Dakota.
	License fee of \$2,000.00