



APPLICATION FOR LICENSE TO MANUFACTURE GAMING EQUIPMENT AND SUPPLIES

NORTH DAKOTA OFFICE OF ATTORNEY GENERAL

LICENSING SECTION

SFN 14995 (7-2023)

What will the applicant be selling to North Dakota licensed gaming distributors?

Pull Tabs

Paper Bingo Cards

Bingo Card Marking & Quick Shot Devices

Electronic Pull-Tab Devices

Pull Tab Dispensing Devices

Electronic Raffle Systems

Name of Applicant (Individual or Corporation, Limited Liability Company, Partnership, etc.)			Telephone Number	
Mailing Address		City	State	ZIP Code
Name of Business			Telephone Number	
Address of Main Office		City	State	ZIP Code
Name of Person to Contact with Questions	Contact Person's Title	Contact Person's Daytime Telephone Number	Contact Person's Email Address	

Manufacturing Business is a:

Sole Proprietorship Partnership General Partnership Corporation

Limited Partnership Limited Liability Company Limited Liability Partnership

1. If CORPORATION, list corporate officers; If PARTNERSHIP, GENERAL PARTNERSHIP, LIMITED LIABILITY PARTNERSHIP, or LIMITED PARTNERSHIP, list partners, general partners, limited partners, individual partners; If LIMITED LIABILITY COMPANY, list managers, governors, or individual members.
(Attach Additional Sheets if Necessary)

Name	Title	Address	State	ZIP Code

2. List Shareholders of a corporation or managers, governors or members of a LLC having 10% or more financial interest in the Manufacturing Business
(Attach Additional Sheets if Necessary)

Name of Shareholder, Manager, Governor, or Member	Percent of Share
	%
	%
	%
	%

3. List all states in which applicant is licensed as a gaming manufacturer

4. Has applicant ever been denied a gaming manufacturer's license?

Yes No

If Yes, list the state(s) applicant has received denial from:

5. List the names of each sales representative who will be having a contact or involvement in North Dakota
(Attach Additional Sheets if Necessary)

6. List the name and address of each and every separate location of the applicant's business at which manufacturing, warehousing, selling or promotion of gaming equipment and supplies takes place. **(Attached Additional Sheets if Necessary)**

Name of Place	Activity	Complete Address (Street, Number, City, State, ZIP Code)

7. List all businesses in which the applicant, owners, or partners, or in which any officer, shareholder of 10% or more, sales representative, or spouse of any such person, has any financial interest and give details of the financial interest. **(Attach Additional Sheets if Needed)**

Name of Business		Type of Business	
Address		City	State ZIP Code
Person Having financial Interest	Relationship to Person or Manufacturing Business	Telephone Number	
Explain, in detail, the interest held			
Name of Business		Type of Business	
Address		City	State ZIP Code
Person Having financial Interest	Relationship to Person or Manufacturing Business	Telephone Number	
Explain, in detail, the interest held			

8. List all businesses that are or will be distributing pull tabs, and/or gaming equipment, devices, and supplies in which the applicant owner(s), partner(s), officer(s), corporate director(s), or spouse, if any, that has ANY financial interest.

Name of Business		Product Distributed	
Address		City	State ZIP Code
Person Having Interest	Relationship to Manufacturing Business	Type/Amount of Interest	
Name of Business		Product Distributed	
Address		City	State ZIP Code
Person Having Interest	Relationship to Manufacturing Business	Type/Amount of Interest	
Name of Business		Product Distributed	
Address		City	State ZIP Code
Person Having Interest	Relationship to Manufacturing Business	Type/Amount of Interest	

9. PROPERTY

Does the applicant own the premises which will be used for the manufacturing of gaming equipment and supplies?
 If YES, submit a copy of a document proving ownership. (If current document is on file with our office, please indicate).
 If NO, submit a copy of your lease agreement.

Yes No

10. List every person and spouse, partnership, association, organization, or corporation having any incident of ownership or interest in any part of the premises/ buildings to be used for manufacturing of gaming products and devices. **(Attach Additional Sheets if Needed)**

Name of Person or Entity	Amount and Type of Interest	Complete Address (Street, Number, City, State, ZIP Code)

DIRECTIONS

Read the INSTRUCTIONS carefully before completing this application.

Type or print all answers.

Be sure you have attached all required information and documentation.

Any checks written are payable to "OFFICE OF ATTORNEY GENERAL"

SIGNATURES: If applicant is a partnership, all partners must sign.

ALL QUESTIONS MUST BE ANSWERED OR MARKED **N/A** IF NOT APPLICABLE. **If information is omitted, the form will be returned to you.** This will delay processing you application. If you need more space for answers, attach separate sheets in the same format as found on this form. Label all attachments.

SEND THE APPLICATION, LICENSE FEE, AND ATTACHMENTS TO:

OFFICE OF ATTORNEY GENERAL
 LICENSING SECTION
 600 E BOULEVARD AVE DEPT. 125
 BISMARCK, ND 58505-0040

Telephone: 701-328-2329

I have read this application and all the information attached to it which is now submitted to the OFFICE OF ATTORNEY GENERAL. All the information submitted with an for this application is true, accurate, and complete. All required information has been disclosed.

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.

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 manufactured.

 Print or Type Name

 Title

 Signature

 Date Signed

INSTRUCTIONS

The following documents must be submitted when applying for a License to Manufacture Gaming Equipment and/or Supplies

- Completed application (SFN 14995); must be signed by the proper individual (refer to 'directions').
- Request for Record Check (SFN 50424); A background check must be completed for each of the manufacturer's partners if a partnership, each stockholder owning 10% or more of the outstanding voting common stock of a corporation, including the corporation's parent or subsidiary corporation, if any.
- 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 the manufacturing of pull tabs and/or gaming devices will be headquartered. If the agreement is oral, explain in written 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 distributor and gaming organizations of the Gaming Division, Office of Attorney General, State of North Dakota.
- Remit license fee of \$1,500 if applicant manufacturer is a manufacturer of paper pull tab dispensing devices. **Payable to: Office of ND Attorney General**
- Remit license fee of \$5,500 if applicant manufacturer is a manufacturer of pull tabs, bingo cards, electronic quick shot bingo systems and devices, or bingo card marking devices. **Payable to: Office of ND Attorney General**
- Remit license fee of \$10,000 if applicant manufacturer is a manufacturer of electronic pull-tab systems or devices. **Payable to: Office of ND Attorney General**
- Remit license fee of \$1,000 if applicant manufacturer is a manufacturer of electronic raffle systems. **Payable to: Office of ND Attorney General**