



**STATE GAMING LICENSE -
APPLICATION FORM**
NORTH DAKOTA OFFICE OF ATTORNEY GENERAL
LICENSING SECTION
SFN 53839 (7-2023)

License Number G-
License Year Ending June 30, _____

1. Official, Legal Name of Organization (Do Not Abbreviate)		Business Telephone Number	
Business Address (Street)	City	State	ZIP Code
Mailing Address	City	State	ZIP Code
E-mail Address	Contact Person	Official Position of Contact Person	
2. To be applicable for a State Gaming License an eligible organization must demonstrate that they have been actively fulfilling their primary purpose by submitting copies of the non-profit corporation's charter, articles of incorporation, corporate certificate, organizational by-laws and minutes of board meetings for the last two years with this application for state gaming license.		Have the materials for demonstrating a primary purpose been included? <input type="checkbox"/> Yes <input type="checkbox"/> No	
3. Is the Organization recognized as tax exempt by the Internal Revenue Service a.) If yes, enclose copy of tax exemption letter received from IRS; if letter has not been received, enclose a letter of explanation (New Applicants Only)		<input type="checkbox"/> Yes <input type="checkbox"/> No	
4. Provide Organization's Federal Employer Identification Number (EIN)			
5. Type of ELIGIBLE Organization (Check One) <input type="checkbox"/> a) Charitable <input type="checkbox"/> e) Public Safety <input type="checkbox"/> b) Civic & Service <input type="checkbox"/> f) Public Spirited <input type="checkbox"/> c) Educational <input type="checkbox"/> g) Religious <input type="checkbox"/> d) Fraternal <input type="checkbox"/> h) Veterans		6. Is the Organization Chartered By <input type="checkbox"/> International Organization <input type="checkbox"/> National Organization <input type="checkbox"/> State Organization <input type="checkbox"/> None of the Above	
7. How long has the Organization existed in North Dakota?			
8. Name and Title of Organization's Top Executive Official (i.e., Cmdr, Pres., etc.)		Daytime Telephone Number	
9. Name of Gaming Manager		Daytime Telephone Number	
9a. Signature of Gaming Manager		Date	
10. List the Full Governing Board of the Organization (The full Governing Board of the organization is primarily responsible and may be held accountable for the proper determination and use of net proceeds)			
Name	Daytime Telephone Number	Name	Daytime Telephone Number
Name	Daytime Telephone Number	Name	Daytime Telephone Number
Name	Daytime Telephone Number	Name	Daytime Telephone Number
Name	Daytime Telephone Number	Name	Daytime Telephone Number
Name	Daytime Telephone Number	Name	Daytime Telephone Number
Name	Daytime Telephone Number	Name	Daytime Telephone Number
11. Has the Organization ever been Convicted of a Felony, Class A Misdemeanor Unlawful Gambling or Organized Criminal Activity?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
12. Is organization properly registered as a non profit organization with the North Dakota Secretary of State?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
13. Does the Organization currently have a <u>Local / Restricted Event Permit</u> that was issued by a City/County?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
14. Does the Organization Own or Rent the premises at which Games of Chance will be conducted?		<input type="checkbox"/> Rent <input type="checkbox"/> Own	

AFFIDAVIT

The Top Executive Official declares that the information is correct and authorizes the Attorney General to inspect the organization's bank and accounting records.	Signature of Top Executive Official	Date
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Cities or Counties (If site is outside limits of an incorporated city) in which games of chance will be conducted	
City	County (Provide ONLY if license was issued by the county)
A new Licensed Gaming Organization may not conduct gaming in more than 15 sites.	

Total number of licenses organization is applying for (add each city or county listed above) _____ x \$175.00 _____ Total fee.

Enclose total license fee with this application.
(Check payable to: ND Attorney General)

RETURN TO:
Office of Attorney General
Licensing Section
600 E Boulevard Ave Dept. 125
Bismarck, ND 58505-0040

Telephone
701-328-2329 or
1-800-326-9240