



GAMES OF CHANCE APPLICATION
FACILITY LICENSE

Official Use Only
Receipt #: _____
License #: _____
Lic. Date: _____

1. APPLICANT INFORMATION

Name of Applicant:
Mailing Address:
Street/PO Box City/Town State Zip
Phone Number: E-mail:
Does the applicant own, lease, or otherwise control the property where games will be held?
Owens Leases Otherwise Controls (explain)

2. FACILITY INFORMATION

Name of Facility (including DBA):
Physical Location:
Street Address City/Town State Zip
Address for Official Correspondences:
Street/PO Box City/Town State Zip
Phone Number: E-mail:

3. PROPERTY OWNER INFORMATION

Name of Property Owner:
Mailing Address:
Street/PO Box City/Town State Zip
Phone Number: E-mail:

4. ATTESTATION

I certify that I am authorized to submit this application. I further certify, under penalty of unsworn falsification pursuant to RSA 641:3, that the information provided on this application and on any supporting documentation is true, accurate and complete and that there are no willful misrepresentations in or falsifications of the information provided herein.
Signature of Applicant (individual) or Authorized Official* (entity) Date
Printed Name Title
Phone Number E-mail Address
*Proof of authorization is required.

INSTRUCTION FOR COMPLETING A GOC FACILITY APPLICATION

A. Determine If A License Is Required

A Games of Chance Facility license is required if:

1. Five or more game dates per calendar year will be held at the facility; and
2. The facility is not owned by a licensed charitable organization or a government subdivision.

B. Provide Supporting Documentation

- ✓ When the applicant is the property owner, submit a copy of the property deed.
- ✓ When the applicant is not the owner, submit a copy of the agreement which clearly indicates: (1) the applicant has control of the property, and (2) the owner is aware that Games of Chance events will be held at the Facility.
- ✓ When the applicant is an entity, submit proof that the signor has authority to submit the application.
*If current documents are already on file with Lottery, please submit letter indicating such.

C. Release of Criminal History Records

A criminal release is required for each of the following individuals:

1. When the application is being submitted by either the property manager or the primary owner of the property, a background and criminal record check shall be required for:
 - ✓ Each owner, partner or trustee holding 10 percent or more ownership interest in the underlying business; or
 - ✓ In the case of a corporation, each officer, director, or shareholder holding more than 10% of the stock; or
 - ✓ In the case of a limited liability company, each manager or member.
2. When the application is being submitted by the lessor of the property with authority and oversight responsibilities of the facility, a background and criminal record check shall be required for:
 - ✓ Each owner, partner or trustee holding 10 percent or more ownership interest in the underlying business; or
 - ✓ In the case of a corporation, each officer, director, or shareholder holding more than 10% of the stock; or
 - ✓ In the case of a limited liability company, each manager or member.

Submit the following for each individual identified above:

- ✓ A completed and notarized Criminal Records Release Authorization Form authorizing the release of the applicant's criminal history record to NH Lottery. This form can be obtained from NH Lottery, or at www.racing.nh.gov;
- ✓ A complete set of fingerprints taken by a qualified law enforcement agency, as follows:
 - ✓ If fingerprints are digital captured via a Livescan device (preferred method), submit the Livescan Site Form; or
 - ✓ If fingerprints are captured via ink impressions, submit the FBI FD-258 fingerprint card;
- ✓ Payment in the form of a check or money order, payable to the "State of NH – Criminal Records". For current charges, contact the NH State Police Criminal Records Unit at 603-223-3867, or visit their website at <https://www.nh.gov/safety/divisions/nhsp/ssb/crimrecords/>
- ✓ Your fingerprints will be used to conduct a national FBI criminal history background check. If you believe your criminal record is incorrect, and would like to request a correction, please contact the law enforcement agency that contributed the questionable information, or the FBI's Criminal Justice Information Services Division. The procedure for making such a request can be found in Title 28 CFR§16.34 of the Code of Federal Regulations.
- ✓ If a criminal history record check is on file with NH Lottery that was completed within the previous 6 months, an updated record check is not required.

D. Background Investigation

In accordance with RSA 287-D:11, upon submitting an initial application and every 5 years thereafter, any person or entity applying for or holding a Games of Chance Facility license must file the following information with the Attorney General's Office:

1. The name, residence address, and nature of the ownership interest including, where applicable, the number of shares of stock held and if known, how obtained, of every person who possesses an ownership interest in such entity;
2. The name, address, present principal occupation or employment, and name and principal business of any corporation or other organization in which such employment is carried on of every director, officer, and holder of 10 percent or more ownership interest in such entity; and
3. Such information as the attorney general may prescribe by rule.

Please contact the Attorney General's Office with any questions or for more information about this requirement.

E. Include Payment of the Application Fee

Include a payment of \$250, payable to the NH Lottery.

F. Submit the Application to NH RCGC

Submit the completed application, supporting documentation, criminal release form, and payment to:

NH Lottery Commission, 14 Integra Drive, Concord, NH 03301

Applications must be received at least 60 days prior to the first game date, or expiration of the current license.

G. Call If There Are Any Questions

Questions? Contact the New Hampshire Lottery Commission at 603-271-3391. Ask for Games of Chance licensing, or e-mail the licensing unit at licensing@lottery.nh.gov.

H. Keep All Information Up-To-Date

If any of the information provided on or with the application changes or is found to be inaccurate, the organization must submit updated or corrected information to NH Lottery within 15 days of the event that resulted in the change, or discovery of the inaccuracy.