

BINGO/LUCKY 7 MANUFACTURER APPLICATION

OFFICIAL USE ONLY
Check #:
Amount:

1. BUSINESS INFORMATION							
Business Entity Name:							
Entity's Address:							
Street/PO Box			City/I		Stat	e	Zip
Entity's Mailing Address (if different):							
Street/PO Box			City/I		State	<u>e</u>	Zip
Entity's Phone Number:			Entity's Email:				
IRS Federal EIN#:			Web Ad	ldress:			
Type of Business (check one):							
Sole Proprietor Partne	ership 🗌 Co	orpor	ation		Trust	t/Estate	Other
2.344		ED (ATTION		
2. MANUFACTURER CONTACT INFORMATION							
Name:	Position Title:						
Contact's Phone Number:	Contact's Email:						
	3. PRO	DU	CTS OF	FERED			
Check off all products that will be manufactured and offered for sale in New Hampshire.							
☐ Bingo Paper ☐ Card-Minding Systems ☐ Ticket Dispensing Devices							
☐ Lucky 7 Tickets ☐ Shared Bingo Systems ☐ Other Related Supplies (describe below)							
4. SUBSIDIARY COMPANIES							
List all subsidiaries manufacturing Bingo/Lucky 7 products/supplies for the NH market under the applicant's license.							
BUSINESS NAME BUS		SINESS ADDRESS			IRS FEDERAL EIN#		

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5. DISTRIBUTORS SERVED BY THE MANUFACTURER

Provide the following information for each of the licensed Distributors that have purchased Lucky 7 deal or supplies from thus business within the past year or anticipate will make such purchases in the coming year.

DISTRIBUTOR	BUSINESS ADDRESS	CONTACT PERSON	PHONE # OF CONTACT PERSON

6. BUSINESS OWNERS/PARTNERS/OFFICERS

Identification depends on the business type you selected in section 1:

- For sole proprietorship, complete for all owner(s).
- For partnership, complete for all general partners.
- > For corporation:
 - o Non-publicly traded, complete for the president, secretary and treasurer.
 - o Publicly traded, complete for the chief operating officer and chief financial officer.
- For limited liability corporations, complete for all managers and members.
- For trusts and estates, complete for all trustee(s) and executor(s).

<u>INDIVIDUALS</u>								
NAME	TITLE	LEGAL ADDRESS	PHONE #	% OWNERSHIP				

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7. CURRENTLY HELD LICENSES Provide a list of all other states and jurisdictions where the applicant is currently licensed: State/ **License Description Expiration** State/ **License Description Expiration** Jurisdiction Date **Date** Jurisdiction 8. ATTESTATION I hereby certify that I am an official of the business entity authorized to sign and submit this application. I further certify that the applicant nor any of the individuals listed in section 6 above have been convicted of a felony, which has not been annulled by any court, within 10 years from the date of the application. Under penalty of unsworn falsification pursuant to RSA 641:3, I certify that the information provided on this form and on any supporting documentation submitted with this application is true, accurate and complete, and that there are no willful misrepresentations in, or falsifications of the information provided herein. I acknowledge that giving false information is grounds for denial, suspension, or revocation of a gaming license. Signature of Authorized Official* Printed Name Date

* Authorized Official must be an individual listed in section 5 of the application. Proof of authority may be required.

INSTRUCTIONS FOR COMPLETING A BINGO AND/OR LUCKY 7 MANUFACTURER APPLICATION

A. LICENSING FEE

Submit the following payment with the application:

Payment of a \$5,000.00 license fee made payable to "NH LOTTERY COMMISSION".

B. BOND REQUIREMENT

A copy of a bond must be submitted with the application. The bond must:

- ➤ Be secured in the amount of \$50,000;
- > Be conditioned up on the licensee's compliance with all applicable gaming statute and rules; and
- ➤ Identify the New Hampshire Lottery Commission as the oblige.

The bond may be issued using the "Bingo/Lucky 7 Manufacturer Bond Form" available at on the Division's website at www.compliance.lottery.nh.gov.

C. SUBMITTING THE APPLICATION

This application must be received by the New Hampshire Lottery Commission at least 60-days to the expiration of the new or current license.

Submit the completed application, license fee, and supporting documentation to:

NEW HAMPSHIRE LOTTERY COMMISSION ATTN: INVESTIGATION & COMPLIANCE DIVISION 14 INTEGRA DR, CONCORD, NH 03301

Applications that are incomplete, illegible or do not include correct fee payments will be returned to the applicant, which will delay the processing.

If any information provided on or with the application changes or is found to be inaccurate, the applicant must submit updated or corrected information to the NH Lottery's Investigation & Compliance Division within 10 days of the event that resulted in the change, or discovery of the inaccuracy.

D. QUESTIONS OR CONCERNS

Questions regarding this application? Contact the NH Lottery Investigation & Compliance Division by phone at (603) 271-7613, by email at licensing@lottery.nh.gov, or visit our website at www.compliance.lottery.nh.gov for more information.