SERVICE PROVIDER & ACCOUNT DEPOSIT WAGERING - LICENSE APPLICATION

NORTH DAKOTA RACING COMMISSION

SFN 53785 (10-2015)

North Dakota Racing Commission
500 N 9th Street, Bismarck, ND 58501-4509
Telephone: (701) 328-4633 Fax: (701) 328-4280
//racingcommission.nd.gov

Date	Year	☐ New ☐ Renewal

License Fee - nonrefundable

First time or lapsed license application $7,500.00

Renewal of an existing license $2,500.00

Payable to: North Dakota Racing Commission

FOR OFFICE USE ONLY	
Date of Issue	NDRC Director's Approval
License Fee $	Paid By ☐ Wire ☐ Check_____
Receipt Number	NDRC License Number

Official, Legal Name of Organization (Do Not Abbreviate)			Type of Business ☐ Corporation ☐ Partnership ☐ Other		
Business Address (Physical Street Address)	City		State	ZIP Code	Country
Mailing Address (if different than above)	City		State	ZIP Code	Country
Federal Taxpayer ID Number	Website				

Name of Contact Person		Title			
Mailing Address (if different than above)	City		State	ZIP Code	Country
Telephone Number	Email Address				

Board Members

Name	Address

List all officers, directors, partners, and shareholders or entities which have a proprietary interest in the ownership structure of the applicant.

Full Name	Address	Social Security Number	Date of Birth	Federal Employer ID Number	Percent of Ownership

(continued on next page)

Full Name	Address	Social Security Number	Date of Birth	Federal Employer ID Number	Percent of Ownership

Statement of Purpose and Planned Activities of the Applicant

Detailed plan of operation including, but not limited to, the following:

☐ A business plan demonstrating the revenues and the costs expected in connection with providing services to the North Dakota simulcast system, i.e., pro forma operating statement for the anticipated license year.

NOTE: Applicant may be required, after consideration of applications by the North Dakota Racing Commission, to submit an independent CPA audit and may require a SAS 70 audit including the yearend prior to issuance of license.

☐ A business plan demonstrating full disclosure of all fees and other financial considerations relating to the operation of the Account Deposit Wagering, i.e., pro forma operating statement for the first year of operation.

Key Employees

Name	Relationship to Operating Plan

Estimated Date of Beginning Operation	Estimated Date of Acquiring Horse Race Track Content
Schedule of Operations Wagering Activities	

☐ Include certification of prompt ND Racing Commission access to reports, logs, wagering transaction detail, and customer account detail, in printed form or standard electronic format approved by the Commission.

Is there any impairment with applicant that would result in a failure to register with the North Dakota Secretary of State?

☐ Yes ☐ No

Provide a detailed description and certification of systems and procedures used to validate the identity, age, and jurisdiction of legal residence of account holders and to validate the legality of wagers accepted.

☐ Include certification of prompt ND Racing Commission access to all records relating to customer identity, age, and residency in hard copy or standard electronic format approved by the Commission.

☐ Include certification of prompt ND Racing Commission access to customer account detail in hard copy or standard electronic format approved by the Commission for persons the Commission has reason to investigate based on possible placing of wagers for persons other than the account holder, wagers that may be related to the investigation of any race or wagering pattern, or relevant to any other investigation as may be determined by the Commission.

☐ Include certification of secure retention of all records related to wagering and customer's accounts for a period of not less than three years or such longer period specified by the Commission.

☐ Include, as an attachment, a certified copy of rules governing the acceptance and management of accounts, and certified copy of any changes in such rules at least thirty days prior to the effective date.

Name of Totalizator Provider to be Utilized in Communicating Wagers to the Licensed Racing Associations

Explain how the Account Deposit Wagering (ADW) company will operate and communicate with the totalizator system in such a way as not to provide or facilitate a wagering advantage based on access to information and processing of wagers by ADW account holders relative to persons who wager at race tracks or public off-track wagering facilities. The ADW shall have in place an independent real-time monitoring system and use approved by the Commission, and use other procedures as needed, to insure compliance with this requirement.

Describe the accounts used to maintain a separate record of all revenues collected by the applicant and the distribution of such revenues.

☐ Provide a blank copy of the service agreement to be used between the service provider and all charities licensed by the North Dakota Racing Commission.

Financial statement of the applicant including, but not limited to, the following:

- ☐ Balance sheet through the quarters:
  - ended June 30 of the current year
  - ended June 30 of the previous year
  - ended June 30 of the two (2) years previous
- ☐ Income and expense statements through the quarter ended June 30 of the current year and for the year ended previous December 31.
- ☐ Copies of any loans or other operating agreements between the applicant and persons or entities having a proprietary or other interest in the applicant which are not reflected in the applicant's financial statement.

☐ Authorization from the applicant and persons or entities having a proprietary interest to obtain credit reports from bureaus, lenders, suppliers, and vendors.

Explain the applicant's history and experience in gaming and wagering activities. The statement must include any rulings, fines, penalties, or investigation in regard to the applicant or principal officers of the applicant.

Brief biographical history of the owners and managers of the operation. Should include professional and employment background.

List any arrests, misdemeanor or felony history, if such exists.

If applicant is associated with racing in the state, explain that association.

☐ Provide a copy of Certificate of Incorporation

☐ Provide evidence of the applicant's ability to be bonded in amounts sufficient to cover the projected level of operation.

Applicants for renewal of an existing license must complete all of the questions contained in this application. They may, however, refer to and attach materials previously submitted if no changes have taken place in the response.

I certify that the foregoing information is true and correct to the best of my knowledge. I acknowledge that failure to provide complete and accurate information, or submission of false information, may be grounds for disqualification.

Name of Preparer	Title	Telephone Number
Signature		Date

Name of President/Chairman	Name of Organization	Telephone Number
Signature		Date