Arizona Department of Gaming

Supplier Application



Arizona Department of Gaming 100 N. 15th Ave, Suite 202 Phoenix, AZ 85007 (602) 771-4263

APPLICATION FEE:

Event Wagering

Fantasy Sports

Suppliers
Initial License Fee: \$1,500 Renewal License Fee: \$500 <u>Suppliers</u>

Initial License Fee: \$250 Renewal License Fee: \$125

Ancillary Suppliers See List Below

Initial License Fee: \$1,500 Renewal License Fee: \$500

Additional Information:

- You are advised that this application is an official document and false or incomplete answers could result in criminal prosecution and the denial, or subsequent revocation, of State Licensing. You are further advised that an application for State License may not be withdrawn without the permission of the Department of Gaming.
- > Event Wagering Supplier or Vendor includes persons who provide goods or services, directly or indirectly, to a responsible party in connection with event wagering pursuant to the Act, including those referred to as ancillary suppliers for purpose of the licensing fee structure, to include (R19-4-101(B)(27)):
 - a. Affiliates;
 - b. Bookmakers:
 - c. Data Centers;
 - d. Geofence Providers;
 - e. Identity Verification Service Providers;
 - f. Independent Test Laboratories;
 - g. Integrity Monitoring Providers;

- h. League Data Providers;
- i. Marketing Affiliates;
- j. Payment Processors; and
- k. Any Other Person as Determined by the Department.
- Fantasy Sports Supplier or Vendor includes persons who provide goods or services to a responsible party in connection with fantasy sports pursuant to the Act to include (R19-4-201(B)(10)):
 - a. Fantasy Sports Contest Platform Providers;
 - b. Identity Verification Service Providers;
 - c. Payment Processors;
 - d. Geofence Providers; and
 - e. Any Other Person as Determined by the Department.
- An applicant for licensure, or renewal thereof, that wishes to withdraw an application must submit a request to the Department in writing. The application will not be considered withdrawn without the written permission of the Department. A.A.C. R19-4-105(K) & R19-4-205(H)

Application Packet Checklist

On receipt of a completed application and the required fee, the Department shall conduct the necessary background investigations to determine if the applicant meets the qualifications for licensure. The applicant agrees to provide access to the following information and/or documents and to provide copies, as requested.

This information includes, but is not limited to, the following:

Please verify all items are checked-off and included in the application packet in order to avoid a rejected application.

✓	Application – Do NOT staple applications
	EWFS – Supplier Application
	ADG-903 Release Form
	ADG-906 Authorization to Release Credit Information
	ALL Applications requested for Individuals
	Articles of Incorporation or Organization/Partnership Agreement and all amendments
	Bylaws
	Certification of Good Standing from Registered State
	Current Litigation List
	List of all Gaming Licenses
	Updated – Detailed Internal and External Organizational charts
	Payment – https://adgpay-ewfs.az.gov/ - Please Provide a Copy of Payment Confirmation
	Financial Information for Event Wagering Suppliers
	Audited Financial Statements for the last three (3) years to include, but not be limited to:
	Annual Reports
	Income Statement
	Balance Sheet
	Statement of Cash Flows
	Notes to Financial Statements
	Last three (3) years of tax returns
	List of past and current SEC violations if Publicly Traded

Pursuant to A.R.S §41-1030:

- ...B. An agency shall not base a licensing decision in whole or in part on a licensing requirement or condition that is not specifically authorized by statute, rule or state tribal gaming compact. A general grant of authority in statute does not constitute a basis for imposing a licensing requirement or condition unless a rule is made pursuant to that general grant of authority that specifically authorizes the requirement or condition.
- ...D. This section may be enforced in a private civil action and relief may be awarded against the state. The court may award reasonable attorney fees, damages and all fees associated with the license application to a party that prevails in an action against the state for a violation of this section.
- E. A state employee may not intentionally or knowingly violate this section. A violation of this section is cause for disciplinary action or dismissal pursuant to the agency's adopted personnel policy.
- F. This section does not abrogate the immunity provided by section 12-820.01 or 12-820.02.

ARIZONA DEPARTMENT OF GAMING SUPPLIER APPLICATION

EVENT WAGERING		FANTA	ASY SPORTS Dat		Date:	
1.					Phone:	
	Trade Name/ dba Name:					
	Physical					
						Zip
			State:			Code:
	Mailing					
			State:			Zip _ Code:
		arters? Yes	No Website:			
2.	Parent Company: Mailing				Phone:	
					Fax:	
			State:			Zip
		arters? Yes				
3.	Contact Dargon					
3.						
	Email address:					
4.	Accounting	Contact Person			Phone:	
	E 11 11				Fax:	
	Mailing					
						Zip
	City:		State:	Country:		Code:
5.	Entity Type: Sole Propriete Other:		S-Corp	nited Liability Cor	-	

6.	Ownership: Private [Public	Ticker	Symbol	Exchange which tra	s on ided
7.	Accounting Year Calendar	r Year	Fiscal Y	ear Year End Date	»:	
8.	Federal Tax Id Number / Employ Social Security Number if Sole P					
9.	Complete the following: (if the ap	plicant is a part	nership or	limited liability company	v, furnish comp	
	organization:				Incorporation	on:
	(If incorporated out of sta	ate, you must at	tach a lette	r of good standing from	the state where	incorporated)
10.	A general description of the natu (Attach a separate page, if necess		ness to ir	aclude Product and S	ervices.	
11.	Tax Liability			Check here if you attac	hed a list. Plea	ase label list as "Item 12"
	Тах Туре	IRS or	r State	Filing Status/L Current or I		Amount of Tax Liability, if past due
						\$
						\$
						\$
	EVENT WACEDING	EANIT	A CV CD	AD TC		
	EVENT WAGERING If you selected "Event Wagering"		ASY SPO			
	If you selected "Fantasy Sports"	-			e.	

Agency	Agency City, Stat		pe of cense	here if you att Dated Issued	Date Expired	Status
List any past or c and/or permit to c	arrent letters of cor onduct business in	cern, violation any gaming ju	urisdiction in	or outside o	of the United	
	Agency					ease label list as "Item 1-
Agency	City, State	Date	of Violation	Vio	olation	Status
Is there nect or co	urrent litigation (civ	il or criminal) involving th	e Annlicant	÷9	
Yes (Explai	nrrent litigation (civen Below) \(\sum \) No	provide the foll	Check here	if you attach	ed a list. Plea	HOUT EXCEPTION.
Yes (Explai	n Below) 🗌 No		Check here	if you attach	ed a list. Plea	se label list as "Item 1 HOUT EXCEPTION. Date Filed
Yes (Explai	n Below) No	provide the foll	Check here	if you attach	ed a list. Plea all cases <u>WITF</u> nber	HOUT EXCEPTION.
Yes (Explaination of the If you answer Plaintiff	n Below) No red "Yes", you must sdiction	provide the foll Defendant	Check here	if you attach below. List o	ed a list. Plea all cases <u>WITF</u> nber	Date Filed
Yes (Explainable of Section 1)	n Below) No red "Yes", you must sdiction	provide the foll Defendant	Check here	if you attach below. List o	ed a list. Plea all cases <u>WITF</u> nber tatus	Date Filed
Yes (Explainable of Lities) If you answer Plaintiff Court Holding Jurianable of Lities Description of Lities	n Below) No red "Yes", you must sdiction gation:	Defendant City / State	Check here	if you attach below. List of Case Num Current St	ed a list. Plea all cases WITF ber tatus	Date Filed Date of Last Action

15.	Company Loans				st. Please label list as "Item 16"	
	Name of Cre	editor/Debtor	Description of Liability			Collateral
	Creditor	Debtor				
	Date Incurred (mm/yyyy)	Maturity Date (mm/yyyy)	Interest Rate	Interest Rate Original Amount		Balance
	Name of Creditor/Debtor		Description of Liability			Collateral
	Creditor	Debtor				
	Date Incurred (mm/yyyy)	Maturity Date (mm/yyyy)	Interest Rate		Original Amount	Balance
	Name of Cre	editor/Debtor	De	escrip	tion of Liability	Collateral
·	Creditor	Debtor				
	Date Incurred (mm/yyyy)	Maturity Date (mm/yyyy)	Interest Rate		Original Amount	Balance
16.		Ac on Checking, A/P,	counts should in Payroll, 401K, S	iclude Sweep	Check here if you attached a lats, domestic and/or foreign., but are not limited to: Accounts, Investment Funds, A reviewed on site prior to the issue	1/R, Savings, Deposits, etc.
	Name and Address of Bank or Financial Institution		Account N	lo.	Purpose of Account	Balance as of (Date)
						\$
						\$
						\$
						\$

State of) ss.			
County of			
I,, being duly swo			
to the best of my knowledge and belief and that this oath is execu			
could result in criminal prosecution and the denial, or subsequen		•	
Department of Gaming. Further, that I am voluntarily submitting	g this application	on under oath and wit	h full knowledge that it
will be reviewed by appropriate State authorities charged by law	with granting	gaming licenses.	
		Signature of A	pplicant
Subscribed and sworn to (or affirmed) before	re me this	day of	, 20
		Not	ary Public
	My commiss	sion expires	

APPLICANT'S REQUEST TO RELEASE INFORMATION

	ТО						
	Leave Blank - To Be Completed By the Department of Gaming						
	FROM						
	Name of Business Entity						
1.	I hereby authorize and request all persons to whom this request is presented having information relating to or concerning me furnish such information to a duly appointed agent of the Arizona Department of Gaming, whether or not such information wou otherwise be protected from disclosure by any constitutional, statutory or common law privilege.						
2.	I hereby authorize and request all persons to whom this request is presented having documents relating to or concerning me t permit a duly appointed agent of the Arizona Department of Gaming to review and copy any such documents, whether or no such documents would otherwise be protected from disclosure by any constitutional, statutory, or common law privilege.						
3.	If the person to whom this request is presented is a brokerage firm, bank, savings and loan, or other financial institution or at officer of the same, I hereby authorize and request that a duly appointed agent of the Arizona Department of Gaming be permitted to review and obtain copies of any and all documents, records or correspondence pertaining to me, including but not limited to past loan information, notes co-signed by me, checking account records, savings deposit records, safe deposit records, passbool records, and general ledger folio sheets.						
4.	This authorization ends eighteen (18) months from the date of execution.						
5.	I have filed with the Arizona Department of Gaming an "application" for Certification/License. I understand that I am seeki the granting of a privilege and acknowledge that the burden of proving my qualifications for a favorable determination is at times on me.						
6.	I do, for myself, my heirs, executors, administrators, successors and assignees, hereby release, remise, and forever discharge to person to whom this request is presented, and his agents and employees from all manner of actions, causes of action, suits, debigudgments, executions, claims, demands whatsoever, known or unknown, in law or equity, which I ever had, now have, meaning the person to whom this request is presented or his agents or employees arising out of or by reas of complying with this request.						
7.	I agree to indemnify and hold harmless the person to whom this request is presented and his agents and employees from a against all claims, damages, losses, and expenses, including reasonable attorneys' fees arising out of or by reason of complyi with this request.						
8.	A reproduction of this request by photo copy or similar process shall be for all intents and purposes as valid as the original.						
I h	ave executed this request at on the day of, 20						
	Signature of Officer, Member, Partner or Owner						
	Subscribed and sworn to (or affirmed) before me this day of, 20						
	Notary Public						
Sig Pre	exenting this request: County of, State,						
	My commission expires						

APPLICANT'S AUTHORIZATION TO RELEASE CREDIT INFORMATION

From:			
	Name of Business Ent	ity	
RE:	Licensure with the Arizona Depart	rtment of Gaming	
l.	In accordance with the Fair Credit Reporting authorize and request all persons to whom the relating to or concerning me to furnish a consequents of the Arizona Department of Gaming, be protected from disclosure by any constitution	is authorization is pre numer report of such in whether or not such in	sented having information formation to duly appointed aformation would otherwise
2.	I have filed with the Arizona Department recommendation, of which this document is a granting of a privilege and acknowledge that favorable determination is at all times on m embarrassment, criticism or other financial loss this application.	part thereof. I unders the burden for proving. I accept any risk	stand that I am seeking the ng my qualifications for a of adverse public notice,
3.	I hereby authorize the Arizona Department of consumer report and/or the consumer report for investigation, licensing, certification, any court procedures set forth in A.R.S. §§ 5-1201 throug A.A.C. Title 19, Chapter 4.	or License purposes, in or administrative proces	neluding but not limited to eeding and any and all other
l.	A reproduction of this request by photo coppurposes as valid as the original.	y or similar process s	hall be for all intents and
	I have executed this authorization on the	day of	, 20
) ss.	Applicant	t's Signature
County	of)		
Subscrib	bed and sworn to (or affirmed) before me this	day of	, 20

My commission expires:_____