



# Pennsylvania Gaming Control Board

## **VIDEO GAMING TERMINAL (VGT) - ESTABLISHMENT LICENSE APPLICATION**

## Instructions

The original form and one paper copy containing all forms must be sent to the Pennsylvania Gaming Control Board, Bureau of Licensing, 303 Walnut Street, Fifth Floor, Commonwealth Tower, Harrisburg, Pennsylvania 17101 with the appropriate fee.

An application that has been accepted for filing and all related materials submitted to the Board shall become the property of the Board and will not be returned to the applicant.

**1. VIDEO GAMING TERMINAL ESTABLISHMENT FEES**

**A. Application Fees**

Application fees must be submitted with the application package. These fees will be used by the Board to process and investigate the Video Gaming Terminal Establishment applicant, the applicant's affiliated entities and principals/key employees (individuals) filing forms as part of the application package.

The fees indicated are non-refundable deposits required to cover the reasonable and necessary costs of the background investigation. No additional costs or expenses related to the background investigation will be billed, unless an investigator is required to travel in overnight status or stenographic services are required. In either case, actual costs incurred by the Board shall be reimbursed by the applicant.

Video Gaming Terminal Establishment Fee ..... \$1,000  
Principals/Key Employees as defined in question four ..... \$500  
VGT Permittee ..... \$100

**B. Video Gaming Terminal Establishment License Fee**

License Fees must be paid prior to the issuance of the License.

Video Gaming Terminal Establishment License .....\$250  
for Each Video Gaming Terminal to be placed at the location (i.e. \$250 x a maximum of 5  
VGT's = \$1,250)

Conditional Video Gaming Terminal Establishment License ..... \$100  
(In addition to the VGT Establishment License Fee)

Applicant is requesting Conditional Licensure.....  Yes  No

Fees must be paid by money order or check made payable to the "Pennsylvania Gaming Control Board." Cash will not be accepted by the Board.

**2. Application form instructions**

As used in this form, the word "you" shall mean the Establishment completing this VGT Establishment Form.

All entries on the form must be typed or printed in block lettering. Initials and signatures must be handwritten by the person providing the information. If the answers are not legible, the application may not be accepted.

Read each question carefully prior to answering. Answer every question completely. Do not leave blank spaces. If a question does not apply, write "**Does Not Apply**" in response to that question.

All pages of the form must be initialed by the person who supplied the information in the Video Gaming Terminal Establishment Application. If additional pages are required in order to answer any question, additional pages may be utilized and must be attached to the form. Be sure to indicate the number(s) of the question(s) being answered and initial each additional page.

All required documentation must be submitted at the time of filing this form. Further, the applicant is under a continuing duty to promptly notify the Board if there is a change in the information provided to the Board.

Should you be unable to understand this form fully in English, it is your responsibility to acquire adequate means of translation. If you submit a document to the Board that is in a language other than English, you must also submit an English translation.

All notices regarding your establishment license will be sent to the address you provide on this form. You must immediately notify the Board if you change your address.

Failure to answer any question completely and truthfully will result in denial of your application and/or revocation of your establishment license and may subject you to criminal penalties under 18 Pa.C. S. A. §4903.

Any person who applies for and obtains a license, from the Board may be required to submit to warrantless searches when present in a an establishment licensee's premises pursuant to the Act.

A license issuance, renewal or other approval issued by the Board is a revocable privilege. No person holding a license, renewal, or other approval is deemed to have any property rights related to the license.

Confidential information supplied to the Board or otherwise obtained shall not be revealed except in the course of the necessary administration of the Gaming Act, or upon the lawful order of a court of competent jurisdiction or, with the approval of the Attorney General, to a duly authorized law enforcement agency. An applicant or licensee waives any liability of the Commonwealth of Pennsylvania and its instrumentalities and agents for any damages resulting from any disclosure or publication in any manner, other than a willfully unlawful disclosure or publication.

Once the application has been filed, the VGT Establishment may **not** withdraw its Establishment License Form without the permission of the Board.

**Note: The Bureau of Licensing will not consider an application “complete” until all deficiencies from all required applications are cured and the Board has received fingerprint results for all individual principals/key employees required at the time of filing.**

If you have any questions regarding the application package forms or the information required to complete any application, please contact the Pennsylvania Gaming Control Board – Bureau of Licensing at (717) 346-8300.

CONTACT NAME FOR VGT ESTABLISHMENT \_\_\_\_\_

ADDRESS \_\_\_\_\_

TITLE \_\_\_\_\_ CONTACT EMAIL ADDRESS \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ FAX NUMBER \_\_\_\_\_

I \_\_\_\_\_ (NAME) AM THE INDIVIDUAL WHO SUPPLIED THE INFORMATION IN THIS APPLICATION.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
POSITION OR TITLE

Appendix: The appendix is a document the applicant must provide or create. The appendix is not represented in the application questions. Each appendix must be presented in a tabbed manner and each tab must indicate the appendix number. If an appendix does not apply, write "DOES NOT APPLY" on the appendix page.

<input type="checkbox"/>	Appendix 1: Current ownership and management tables of organization.	MANDATORY
<input type="checkbox"/>	Appendix 2: Has the applicant ever been placed on the Commonwealth Debarment List maintained by the Pennsylvania Department of General Services? If yes, please provide the dates of any such debarment and explain the reason for the debarment.	MANDATORY
<input type="checkbox"/>	Appendix 3: Provide the most recent federal and state tax return for the establishment.	MANDATORY
<input type="checkbox"/>	Appendix 4: Provide documentation confirming that your establishment is equipped with Diesel islands used for fueling commercial motor vehicles.	MANDATORY
<input type="checkbox"/>	Appendix 5: Provide documentation confirming your establishment has sold an average of 50,000 gallons of diesel or biodiesel fuel each month for the previous 12 months or is projected to sell an average of 50,000 gallons of diesel or biodiesel fuel each month for the next 12 months.	MANDATORY
<input type="checkbox"/>	Appendix 6: Provide documentation confirming your establishment has a minimum of 20 parking spaces dedicated for commercial motor vehicles.	MANDATORY
<input type="checkbox"/>	Appendix 7: Provide documentation confirming your establishment has a convenience store on the premises. If the convenience store is not operated by your establishment, supply the name, address and telephone number of the operator.	MANDATORY
<input type="checkbox"/>	Appendix 8: Provide documentation confirming that the land you own or lease for the truck stop is situated on one parcel of land that is at least three acres.	MANDATORY
<input type="checkbox"/>	Appendix 9: Provide a copy of your deed or lease agreement confirming your establishment is not on land owned by the Pennsylvania Turnpike.	MANDATORY
<input type="checkbox"/>	Appendix 10: Provide the most recent federal and state tax return. For each principal/key employee listed in the application.	MANDATORY
<input type="checkbox"/>	Appendix 11: Provide a photograph of each principal/key employee listed in the application. The photograph must be 1.5 inches square and unmounted with a matte finish and include the name of the individual. The photograph must be taken within 60 days of the date the application is submitted.	MANDATORY

<input type="checkbox"/>	<p>Appendix 12: Provide the proposed surveillance and security measures to ensure the security of the video gaming area.</p>	<p>MANDATORY</p>
<input type="checkbox"/>	<p>Appendix 13: Provide a to-scale schematic or architectural rendering of the floor plan of the establishment which shows the following:</p> <ul style="list-style-type: none"> <li>(i) Total square footage of the video gaming area.</li> <li>(ii) A depiction of the video gaming area where video gaming will be offered in relation to the overall facility.</li> <li>(iii) Location of the video gaming terminals, and security and surveillance equipment locations.</li> <li>(iv) A detailed description of the surveillance to be utilized.</li> </ul>	<p>MANDATORY</p>
<input type="checkbox"/>	<p>Appendix 14: Provide a copy of the establishment's Pennsylvania Lottery Retailer's License.</p>	<p>MANDATORY</p>
<input type="checkbox"/>	<p>Appendix 15: Provide a copy of the terminal placement agreement between the establishment and operator once executed.</p>	<p>MANDATORY</p>

### 1. VGT Establishment Identification Information

Business name as it appears on VGT Establishment's certificate of incorporation, charter, bylaws, partnership agreement or other official documents (spell out complete name, do not use abbreviations)

Trade Name(s) and Doing Business As ("DBA") Names \_\_\_\_\_

VGT Establishment's principal address \_\_\_\_\_

County in which VGT Establishment is located \_\_\_\_\_

Yes  No Applicant has confirmed that the County allows for the placement of VGT's.

Email Address \_\_\_\_\_ Web URL \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

#### Billing Contact Information

Name \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Individual email address \_\_\_\_\_

VGT Establishment's Form of Organization (check one)

Sole Proprietorship  Partnership  Limited Partnership  C-Corporation  Trust

Limited Liability Company  S-Corporation  Other (describe) \_\_\_\_\_

VGT Establishment's State of Incorporation, Registration or other type of formation

Date of formation \_\_\_\_\_

Business name as it appears on formation documents \_\_\_\_\_

List all states in which the VGT Establishment is currently registered or authorized to do business

Is the VGT Establishment's registered or authorized to do business in the Commonwealth of Pennsylvania? \*

Yes  No

\* Note – A VGT Establishment must be registered as a business in Pennsylvania prior to conducting business in the state.

Federal Employer Identification Number/TIN	PA Unemployment Compensation Account Number
PA Department of Revenue Corporate Box Number	PA Liquor Control Board License Number
PA Workers Compensation Policy Number	PA Department of State – Entity Number

## 2. Bankruptcy or Insolvency Proceedings

Have you been adjudicated bankrupt or filed a petition for any type of bankruptcy or insolvency under any bankruptcy or insolvency law in the last ten (10) year period? If YES, attach a copy of the bankruptcy petition and discharge, if granted.  Yes  No

BANKRUPTCY OR INSOLVENCY PROCEEDINGS			
Case name & docket number	Date filed	Name and address of agency or court involved	
	Date of disposition	Name of court appointed receiver, agent or trustee	Date receiver, agent or trustee appointed
Nature of judgment or relief			

\* Make additional copies and attach additional pages as necessary.

### 3. Liens and Judgments

Have you had any financial liens or judgments filed against you in the last five (5) year period? (Include federal tax liens, state tax liens, unemployment compensation judgments, etc.).

Yes  No

Do you have any outstanding tax liabilities to either the Commonwealth of Pennsylvania or any other local, municipal, county, state, federal or foreign jurisdictions?

Yes  No

If you answer YES to either question, complete the following chart:

<b>Violation</b>		
Case name & docket number	Date of judgment, order or decree	Name and address of agency or court involved
Liability type and nature of offense		
Disposition <input type="checkbox"/> Acquitted <input type="checkbox"/> Convicted <input type="checkbox"/> Dismissed <input type="checkbox"/> Other _____		
Nature of judgment, decree or order		
<b>Violation</b>		
Case name & docket number	Date of judgment, order or decree	Name and address of agency or court involved
Liability type and nature of offense		
Disposition <input type="checkbox"/> Acquitted <input type="checkbox"/> Convicted <input type="checkbox"/> Dismissed <input type="checkbox"/> Other _____		
Nature of judgment, decree or order		

\* Make additional copies and attach additional pages as necessary.



#### 4. Principal/Key Employee Qualifiers

Please provide the information requested below for each:

1. Principal Qualifier – Owner, officer and director of the applicant. For purposes of completing this form the term owner means any individual who has a direct or indirect ownership or beneficial interest of 10% or more and any entity that has a direct ownership or beneficial interest of 20% or more in the VGT Establishment applicant. The term officer means a president, chief executive officer, a chief financial officer and a chief operating officer, and any person routinely performing corresponding functions with respect to an organization whether incorporated or unincorporated.
2. Key Employee Qualifier - An individual employed by an VGT Establishment licensee who is a director or department head or otherwise empowered to make discretionary decisions that regulate the conduct of video gaming.

Each individual listed below will be required to provide fingerprints to the Board for investigation purposes. A fingerprint package will be sent by the Bureau of Investigations and Enforcement to the residential address supplied for each individual listed below once the application is received by the Board. Each individual listed below is also required to complete a separate Application for Pennsylvania Tax Clearance Review and Release Authorization located below in this form. A \$500 fee is required to be sent with the Establishment application for each principal/key employee listed below.

Please indicate if the individual listed below is a Principal Qualifier or Key Employee Qualifier .

Name \_\_\_\_\_

Residential Address \_\_\_\_\_

\_\_\_\_\_

\*Social Security number \_\_\_\_\_

Email address \_\_\_\_\_

Phone number \_\_\_\_\_ Fax number \_\_\_\_\_

Position or title \_\_\_\_\_ Date of birth \_\_\_\_\_

Percentage of Ownership \_\_\_\_\_ Date Acquired \_\_\_\_\_

Describe nature, type, terms and conditions of ownership \_\_\_\_\_

\_\_\_\_\_

\*Please make copies of this page and complete it for each Principal/Key Employee that are required.

\* Disclosure of your social security number is mandatory in order for the PGCB to comply with the Federal Social Security Act pertaining to Child Support Enforcement, as implemented in the Commonwealth of Pennsylvania at 23 Pa. C.S. §4304.1(a). The social security number will also be used to confirm the identification of the applicant or licensee and will not be used as a personal identification number by the PGCB.

## Criminal History

<p>The next section asks about any offenses or charges applicant or any of its owner, officers, directors, or employees listed in question 4, may have committed or had filed against them. Prior to answering this question, carefully review the definitions and instructions that follow.</p>	
<p>Definitions</p>	<p>For purposes of this section:</p> <p>A. "Crime or offense" includes all felonies and misdemeanors, as well as summary offenses that may have required you to appear before a law enforcement agency, state or federal grand jury, justice court, municipal court, city court, traffic court, military court or any other court except Juvenile Court. Include all DUI/DWI offenses.</p> <p>B. "Arrest" includes any time that you were stopped by a police officer or other law enforcement officer and advised that you were under arrest, detained, held for questioning, requested by a police officer or law enforcement officer to come to a police station and answer questions, taken into custody by any police officer or other law enforcement officer, fingerprinted, held in jail, or instructed to appear in court or subpoenaed to answer for conduct which is a crime as has been defined in paragraph "A."</p> <p>C. "Charge" includes any indictment, complaint, information, summons, citation or other notice of the alleged commission of any crime or offense as defined in paragraph "A."</p>
<p>INSTRUCTIONS</p>	<p>1. Answer "Yes" and provide all information to the best of your ability even if:</p> <p>A. You did not commit the offense charged;</p> <p>B. The arrest or charges were dismissed or the charges were subsequently downgraded to a lesser charge;</p> <p>C. You pleaded not guilty or nolo contendere;</p> <p>D. You completed an accelerated rehabilitative disposition ("ARD") or equivalent diversionary program;</p> <p>E. The charges or conviction were expunged from your record, even if you have expungement papers;</p> <p>F. You were not convicted or were found "not guilty";</p> <p>G. You did not serve any time in prison or jail;</p> <p>H. The arrests, charges or offenses happened a long time ago;</p> <p>I. You were arrested or charged in another state (a state other than Pennsylvania);</p> <p>J. You were never physically taken into custody and/or transported to a police station or jail.</p> <p>2. Answer "No" if:</p> <p>A. You have never been arrested or charged with any crime or offense;</p> <p>B. Your arrest happened when you were under 18 years of age and your court appearance was in juvenile court.</p> <p><b>Failure to fully answer this question may result in the denial of your application.</b></p>

### 5. Criminal History

Has the applicant or any of its owners, officers, directors or employees that are required to be licensed ever been indicted, charged with or convicted of a criminal offense or been a party to or named as an unindicted co-conspirator in any criminal proceeding in the Commonwealth or any other jurisdiction? If YES, provide the following information.

<b>Criminal History Incident</b>						
Name of Case & Docket Number	Nature of Charge or Complaint	Date of Charge or Complaint	Disposition (Acquitted, Convicted, Dismissed, ETC.)	Name and address of Law Enforcement Agency or Court Involved	Sentence	Name of Owner, Officer, Director or Employee

### 6. Existing Litigation

Provide the following information for all existing litigation to which applicant is presently a party, whether in this Commonwealth or in another jurisdiction. Do not include the following: 1) litigation that is expected to be fully and completely covered through an indemnity agreement or under an insurance policy held by the applicant with a licensed insurance carrier; or 2) litigation in which the damages are not reasonably expected to exceed \$100,000. This description must include the title and docket number of the litigation, the name, and location of the court before which it is pending, the identity of all parties to the litigation and the general nature of all claims being made.

<b>EXISTING LITIGATION</b>	
Name of Case and Docket Number	Location and Name of Court Before Which Litigation Is Pending
Names of All Parties to Litigation	
Nature of The Claims	
<b>Existing Litigation</b>	
Name of Case and Docket Number	Location and Name of Court Before Which Litigation Is Pending
Names of All Parties to Litigation	
Nature of The Claims	

\* Make additional copies and attach additional pages as necessary.

## 7. Licenses and Permits

If the applicant has applied for any type of license, registration, certification, or permit from any governmental agency in the Commonwealth of Pennsylvania or any other jurisdiction, provide the following information for the last ten (10) year period. A government agency as used here includes any subordinate creature of Federal, state, Native American or local government created to carry out a governmental function or to implement a statute or statutes.

<b>Applicant Licensing</b>					
Type of License, Registration, Certification or Permit	Name and Location of Government Agency	Application Number	Disposition	Date of Disposition	If Granted, Provide the License/Permit Number and Expiration Date. If Denied, Pending, Expired, Suspended, Conditioned, Revoked or Withdrawn, Provide Details.
			<input type="checkbox"/> Granted <input type="checkbox"/> Denied <input type="checkbox"/> Pending <input type="checkbox"/> Expired <input type="checkbox"/> Suspended <input type="checkbox"/> Conditioned <input type="checkbox"/> Withdrawn <input type="checkbox"/> Revoked		
			<input type="checkbox"/> Granted <input type="checkbox"/> Denied <input type="checkbox"/> Pending <input type="checkbox"/> Expired <input type="checkbox"/> Suspended <input type="checkbox"/> Conditioned <input type="checkbox"/> Withdrawn <input type="checkbox"/> Revoked		
			<input type="checkbox"/> Granted <input type="checkbox"/> Denied <input type="checkbox"/> Pending <input type="checkbox"/> Expired <input type="checkbox"/> Suspended <input type="checkbox"/> Conditioned <input type="checkbox"/> Withdrawn <input type="checkbox"/> Revoked		

\* Make additional copies and attach additional pages as necessary.

## Applicant's Affirmation

### Video Gaming Terminal Establishment License

- Pursuant to 4 Pa C.S. §3519(d), the applicant affirms that the applicant is not licensed as a manufacturer, supplier or terminal operator.

Sworn to and subscribed before me this

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Signature of Notary Public

\_\_\_\_\_  
Printed name of Notary Public

\_\_\_\_\_ Date commission expires

VGT Establishment

By:

\_\_\_\_\_  
Signature and title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name and title of signatory  
authorized to sign for VGT Establishment

\*If a person other than the CEO of this entity is designated to execute this document, the Board must be provided with a resolution or an affidavit, certified as true and correct, identifying the individual so designated and authorizing that individual to execute the document on behalf of both the entity and the CEO.

**Application for Pennsylvania Tax Clearance Review**

Completion of this form is a condition of this application and will authorize the Pennsylvania Department of Revenue ("DOR") and the Department of Labor and Industry ("DLI") to review the tax records of the person and/or entity as part of the establishment license evaluation by the Pennsylvania Gaming Control Board ("Board"). Your signature on this form also represents a waiver of confidentiality of tax information. Your signature allows the DOR and DLI to provide tax information to the Board and its authorized investigatory agents. In addition, your signature authorizes the DOR, DLI and the Board to provide your tax information to the entity with which you are filing.

\_\_\_\_\_  
Name as listed on tax return

\_\_\_\_\_  
Employer Identification Number/Tax  
Identification Number/Social Security  
Number

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

I certify that I am the individual whose tax records are to be reviewed. If the tax records are for an entity, I certify that I am the authorized signatory for the applicant.

\_\_\_\_\_  
CEO/Applicant signature

\_\_\_\_\_  
Telephone number

\_\_\_\_\_  
Date

**Affidavit for Conditional Licensure**

STATE OF \_\_\_\_\_ :  
COUNTY OF \_\_\_\_\_ : ss:

Pursuant to 4 Pa.C.S. §3520, relating to conditional licensure for establishment, terminal operator and VGT related manufacturers and suppliers, I, being duly affirmed according to law, depose and state under penalty of perjury that I am an authorized representative for the foregoing applicant for licensure and that to the best of my knowledge, information, and belief the applicant is not otherwise prohibited from licensure according to the conditional licensure requirements of 4 Pa.C.S. §3520 or any other video gaming related provisions set forth in this Commonwealth.

DATE: \_\_\_\_ / \_\_\_\_ / 20\_\_\_\_

\_\_\_\_\_  
Signature of CEO/Authorized Signatory\*

\_\_\_\_\_  
Printed Name of CEO/Authorized Signatory\*

Sworn and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature of Notary Public

\*If a person other than the CEO of this entity is designated to execute this document, the Board must be provided with a resolution or an affidavit, certified as true and correct, identifying the individual so designated and authorizing that individual to execute the document on behalf of both the entity and the CEO.



**Affidavit and Waiver of Liability**

STATE OF \_\_\_\_\_:

SS:

COUNTY OF \_\_\_\_\_:

The applicant hereby certifies that the information contained herein is true and correct and that there is no misrepresentation, falsification or omission in this application. Further, the applicant is aware that any false or misleading statement or omitted information will be cause for rejection or revocation of a license and may be subject to criminal penalties under 18 Pa. C.S.A. §§4902, 4903 and 4904.

The applicant agrees to the terms of licensure in the Pennsylvania Race Horse Development and Gaming Act ("Act") and the Pennsylvania Gaming Control Board ("Board") regulations and agrees, if licensed, to abide by the same.

Applicant shall have the duty to:

1. Provide any assistance or information required by the Board or the PSP and to cooperate in any inquiry, investigation or hearing;
2. Consent to inspections, searches and seizures;
3. Inform the Board of any actions which applicant believes would constitute a violation of the act or regulations; and
4. Inform the Board of any arrests for any criminal violations or offenses including those enumerated under 18 Pa. C.S.A. (Relating to Crimes and Offenses).

In addition, to further effectuate the purposes of the Act and Board regulations, applicant acknowledges the Bureau of Investigations and Enforcement ("BIE") and the Pennsylvania State Police ("PSP") may obtain administrative warrants for the inspection and seizure of property possessed, controlled, bailed or otherwise held by an applicant or any of its intermediaries, subsidiaries affiliates or holding companies, licensees, registrants, certificants or permittees.

The applicant hereby expressly waives, releases, and forever discharges the Board, The Pennsylvania Department of Revenue, PSP, The Commonwealth of Pennsylvania and its instrumentalities, and their agents, employees and representatives from any and all manner of action and causes of action whatsoever which I, my administrators or executors can, shall, or may have against the Commonwealth of Pennsylvania, the Board and their agents, as a result of my applying for a license in the Commonwealth of Pennsylvania.

Furthermore, the applicant waives liability as to the Commonwealth of Pennsylvania and its instrumentalities and agents, for any damages resulting to the applicant from any disclosure or publication, in any manner, other than a willfully unlawful disclosure or publication, of any material or information acquired during the licensing process or during any inquiries, investigations or hearings related thereto.

Applicant certification (Required) Date: \_\_\_\_/\_\_\_\_/20\_\_

Subscribed and sworn to me this \_\_\_\_ day of

\_\_\_\_\_  
Name of applicant

\_\_\_\_\_ of 20\_\_\_\_\_.

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Individual preparing this form if different from applicant

My commission expires on \_\_\_\_/\_\_\_\_/20\_\_

\_\_\_\_\_  
Name, title and signature

## Release Authorization

To: \_\_\_\_\_  
(DO NOT WRITE ABOVE THIS LINE – For Gaming Control Board use only)

From: \_\_\_\_\_  
Applicants name (Please print)

### Note: Initials and signatures are required on this two-page form.

1. I hereby authorize and request every person, firm, company, corporation, board, association or institution of any kind, and every federal, state or local governmental agency, including, but not limited to, every court, every federal, state or local law enforcement, criminal justice agency or probation department, without exception, both foreign and domestic, to whom this release authorization is presented to make full and complete disclosure of any and all information on file or available concerning me, to furnish, make available for review and permit the copying of such information whether or not such information would otherwise be protected from disclosure by any constitutional, statutory, regulatory, or common law privilege, to any duly authorized investigator of the Pennsylvania Gaming Control Board.
2. If this release authorization is presented to a brokerage firm, bank, savings and loan, or other financial institution or an officer of same, I hereby authorize and request that any duly authorized investigator of the Pennsylvania Gaming Control Board 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 box records, passbook records, and general ledger folio sheets.
3. If this release authorization is presented to a regulatory agency, including any grievance or disciplinary agency, in any state to which I have been granted a permit, license, credential, privilege or any similar authority, I hereby authorize and request that any duly authorized investigator of the Pennsylvania Gaming Control Board be permitted by said agency to review and obtain copies of any and all documents, records, or correspondence pertaining to me, and I hereby authorize said agency, to make full and complete disclosure of any and all information including, but not limited to, complaints filed against me, disposition thereof, imposition of discipline, whether private or public, as well as such other information on file or available concerning me.
4. If this release authorization is presented to a federal, state or local taxing authority, including the Internal Revenue Service or other income taxing authority, personal property taxing authority, wage taxing authority, school taxing authority, and any other taxing body as may receive taxes or returns filed by me, I hereby authorize and request that any duly authorized investigator of the Pennsylvania Gaming Control Board be permitted by said taxing authority to review and obtain copies of any and all documents, records, tax returns, schedules and supporting documentation, audits, reports, or correspondence pertaining to me, and I hereby authorize said taxing authority to make full and complete disclosure of any and all information on file or available concerning me.
5. Pursuant to the laws of the Commonwealth of Pennsylvania, United States of America, I do hereby make, constitute, and appoint any duly authorized investigator of the Pennsylvania Gaming Control Board my true and lawful attorney in fact for me in my name, place, stead, and on my behalf and for my use and benefit:
  - (a) To request, review, copy, sign for, or otherwise act for investigative purposes with respect to documents and information in the possession of the person to whom this release authorization is presented as I might;
  - (b) To name the person or entity to whom this request is presented and insert that person's name in the appropriate location on this release authorization;
  - (c) To place the name of the Pennsylvania Gaming Control Board agent presenting this release authorization in the appropriate location on this release authorization.
  - (d) To do, take, and perform all and every act and thing whatsoever requisite, proper, or necessary to be done, in the exercise of any of the rights and powers herein granted, as fully to all intents and purposes as I might or could do if personally present, with full power of substitution.

The rights and powers herein granted are intended to facilitate the background investigation being conducted by the Pennsylvania Gaming Control Board at my request and is not otherwise intended to create or establish a fiduciary

relationship between the Pennsylvania Gaming Control Board, its agents or employees and me. I hereby ACKNOWLEDGE that no such relationship exists. This power of attorney ends two (2) years from the date of execution and shall be construed in accordance with 20 Pa.C.S. ch. 56 (relating to powers of attorney). I am familiar with the provisions of 20 Pa.C.S. §5601(c), (d) and (e) (relating to general provisions) and hereby expressly waive the applications of the requirements contained in those subsections to this power of attorney granting rights and powers to any duly authorized investigator of the Pennsylvania Gaming Control Board.

- 6. I the undersigned licensee(s) have filed with the Pennsylvania Gaming Control Board an "application" as that term is defined in the Board's regulations. I understand that I am seeking the granting of a privilege and acknowledge that the burden of proving my/our qualifications and suitability for a favorable determination is at all times solely my responsibility. I accept any risk of adverse public notice, embarrassment, criticism, or other action or financial loss which may result from action with respect to this application and I hereby authorize any employee, agent, or duly authorized investigator of the Pennsylvania Gaming Control Board to disclose any information obtained through my background investigation to the slot machine licensee/applicant with which I am conducting business as well as to the entity with which I am associated.
- 7. I do, for myself, my heirs, executors, administrators, successors and assigns, hereby release, remise, exonerate, and forever discharge the Pennsylvania Gaming Control Board, its members, agents and employees, the Pennsylvania State Police, the Commonwealth of Pennsylvania and its instrumentalities, and any agents and employees thereof, from any and all liabilities of every nature and kind, other than a willfully unlawful disclosure or publication of material or information acquired during my investigation. I agree to indemnify and hold harmless every person, firm, company, corporation, board, association or institution of any kind, and every federal, state or local governmental agency, including, but not limited to, every court, law enforcement agency, criminal justice agency, or probation department, without exception, both foreign and domestic, to whom this request is presented and any agents and employees thereof, from and against all claims, damages, losses, and expenses including reasonable attorneys' fees arising out of or by reason of, complying with this release authorization.
- 8. A reproduction of this request by photocopy, facsimile or similar process shall be for all intents and purposes as valid as the original. This release authorization extends to the review and copy of any information protected from disclosure, privilege, or obligation.

**Applicant has read this release authorization and understands all its terms. Applicant executes this document voluntarily and with full knowledge of its significance**

In witness whereof, I have executed this release authorization at \_\_\_\_\_, \_\_\_\_\_  
City State

On this, the \_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_. \_\_\_\_\_  
Signature of applicant

ON THIS, THE \_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_, Before me, The Subscriber, a Notary Public, In and for  
\_\_\_\_\_, \_\_\_\_\_, Personally Appeared \_\_\_\_\_,  
County State

(Known by me or satisfactorily proven) to be the person whose name is subscribed to this Release Authorization, and acknowledged that they executed the same for the purpose herein contained.

In witness whereof, I hereunto set my hand and official seal

\_\_\_\_\_  
Notary Public

Signature of Pennsylvania Gaming Control Board agent presenting this request:

\_\_\_\_\_ Date: \_\_\_\_\_

**Diversity Plan Statement**

VGT Establishment applicant name \_\_\_\_\_

VGT Establishment applicant mailing address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

VGT Establishment applicant phone number \_\_\_\_\_

Equal Opportunity Officer \_\_\_\_\_

Date submitted \_\_\_\_/\_\_\_\_/\_\_\_\_

Pursuant to §3307(B)(1)(2) of the Pennsylvania Race Horse Development and Gaming Act, as amended.

\_\_\_\_\_ (VGT Establishment Applicant's Name) has developed and implemented a diversity plan, and the diversity plan complies with the Act and its Regulations.

\_\_\_\_\_  
Signature of CEO

\_\_\_\_\_  
Name printed of CEO

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

## Statement of Conditions for Video Gaming Terminal Establishment

\_\_\_\_\_, having been duly authorized to legally bind  
Name of highest ranking official and title  
\_\_\_\_\_, (hereafter "VGT Establishment"), hereby expressly  
Name of VGT Establishment applicant

Accepts, agrees and stipulates that the VGT Establishment Licensee will abide by the following conditions as required by the Pennsylvania Gaming Control Board ("Board"):

1. To at all times comply with the provisions of this Statement of Conditions.
2. To at all times comply with all provisions of the Pennsylvania Race Horse Development and Gaming Act ("Act") as amended and any rules, regulations or orders in effect as of this date or later amended or promulgated by the Board.
3. To at all times acknowledge and agree that any license or other authorization issued by the Board is a non-transferable privilege to engage in activities regulated by the Board.
4. To promptly reimburse the Board for costs associated with any background or other investigation conducted in connection with any application filed by, associated with or filed in connection with the VGT Establishment and to promptly pay any other fine, fee, sanction or assessment imposed by the Board or the Department of Revenue.
5. To ensure at all times that information provided to the Board by the VGT Establishment, is true and correct, and to immediately notify the Board upon knowing or suspecting that any false or misleading information may have been provided to the Board.
6. To immediately notify the Board if the VGT Establishment, or any person required to be listed in its application for licensure, is charged, indicted or convicted of any felony or gambling offense.
7. To at all times ensure that the VGT Establishment meets and maintains the eligibility and suitability requirements of the regulations and to promptly report a change in circumstances that may render the VGT Establishment, ineligible, unqualified or unsuitable to hold a VGT Establishment license.
8. In addition to any notification and action required by Conditions 6 and 7, to ensure that the VGT Establishment, complies with the following:
  - A. Provide any requested assistance or information required by the Board, the Pennsylvania Department of Revenue, or the Pennsylvania State Police and cooperate in any inquiry, investigation or hearing.
  - B. Inform the Board of any actions which they know or suspect constitute a violation of the Act or any rules, regulations or orders in effect as of this date or later amended or promulgated by the Board.
  - C. Inform the Board of any arrests for any violations or offenses enumerated under 18 Pa.C.S. (relating to crimes and offenses) or any similar offense under the laws of another jurisdiction.
9. To develop, implement, and provide a Diversity Plan to the Board, in accordance with the Act and its regulations, which demonstrates a good faith effort to ensure that all persons are accorded equality of opportunity in employment and contracting by the licensee, its contractors, subcontractors, assignees, lessees, agents, gaming service providers and suppliers.
10. To provide to the Board on or before the twentieth day of the month following the end of each calendar quarter, and at any time upon the request of the Board, a Diversity Report in accordance with § 3307 of the Act and of the regulations promulgated thereunder. Each Diversity Report shall provide a performance assessment of the entity's Diversity Plan for the preceding calendar quarter and shall provide a summary of all employee recruitment and retention efforts undertaken to ensure the participation of diverse groups in employment with the licensee; the total number of hires and employment offers made including data related

to race, gender and residence of those hired or offered employment; all contracting and subcontracting data involving the licensee and minority-owned business enterprises and women-owned business enterprises; and any other supporting evidence that demonstrates a good faith effort on the part of the licensee. (In addition, an email copy of the diversity report should be sent directly to the Director of Diversity.)

11. To register with the Pennsylvania Department of Revenue and the Pennsylvania Department of Labor and Industry, as required, to ensure the proper reporting and remittance of all applicable Pennsylvania taxes.
12. To register with the Pennsylvania Department of State, if required, under Title 15, Corporations and Unincorporated Associations.
13. To ensure that at all times the VGT Establishment is not debarred or suspended by the Commonwealth of Pennsylvania, Department of General Services. The VGT Establishment must immediately notify the Board upon knowing or suspecting that it has been or will be debarred or suspended.
14. To immediately notify the Board of any change in the persons who are required to be licensed, permitted, or registered in association with the VGT Establishment 's application package.
15. To immediately notify the Board of the following:
  - A. Any known or suspected noncompliance with the Board's regulations or orders.
  - B. Any known or suspected failure to comply with any provision of this Statement of Conditions.
16. To immediately notify the Board of any change in the VGT Establishment 's name or mailing address.
17. To immediately provide upon request of the Bureau of Licensing any terminal placement agreement, contract, description of oral contract or other documentation evidencing a business relationship with a Terminal Operator and any amendment to such an agreement.
18. To intelligently, knowingly and voluntarily execute a separate indemnification agreement.

I hereby certify and affirm that I have read and fully understand the foregoing Statement of Conditions and acknowledge that my signature below shall legally bind the VGT Establishment and \_\_\_\_\_, as the executive officer of the VGT Establishment.

\_\_\_\_\_  
Name of highest ranking official and title

Sworn to and subscribed before me this

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Signature of Notary Public

\_\_\_\_\_  
Printed name of Notary Public

\_\_\_\_\_ Date commission expires

VGT Establishment

By:

\_\_\_\_\_  
Signature and title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name and title of signatory  
authorized to sign for VGT Establishment

## Indemnification Agreement

And now, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, this Indemnification Agreement (the "Agreement") is entered into by and between the Pennsylvania Gaming Control Board (the "Board") and \_\_\_\_\_ (hereafter " VGT Establishment") (the "Indemnitor") through its undersigned representative who is authorized to legally bind the "Indemnitor."

### WITNESSETH

WHEREAS, as a condition precedent to the issuance of said VGT establishment license, Indemnitor executed a Statement of Conditions, which is incorporated herein by reference, expressly accepting certain enumerated conditions to its VGT establishment license; and,

WHEREAS, Condition 17 of the above-referenced Statement of Conditions requires the VGT Establishment as Indemnitor to execute, a separate indemnification agreement in a form prescribed by the Board so as to indemnify and hold harmless the Board, the Pennsylvania Department of Revenue, the Pennsylvania State Police, the Commonwealth of Pennsylvania and its instrumentalities, and their agents, employees and representatives, from and against certain enumerated claims and payments.

NOW, THEREFORE, in consideration of the foregoing, Indemnitor agrees to the following:

1. Except to the extent the conduct of any one of the Indemnitees constitutes a violation of law or willful misconduct outside the scope of Indemnitees' duties, Indemnitor will be responsible for and will protect, indemnify and hold harmless the Board, the Pennsylvania Department of Revenue, the Pennsylvania State Police, the Commonwealth of Pennsylvania and its instrumentalities, and their agents, employees and representatives, from and against any and all claims or payments for personal injury, property damage or other loss of any kind by any and all parties and claimants, arising out of, or in connection with, any negligence, error or omission by the Board, the Pennsylvania Department of Revenue, the Pennsylvania State Police, the Commonwealth of Pennsylvania and its instrumentalities, or their agents, employees and representatives, attendant to any or all of the following:

- A. Any investigation, consideration, or action taken in connection with an application by Indemnitor;
- B. The denial, suspension, revocation or conditioning of the VGT establishment license issued to Indemnitor or any establishment license or other authorization associated therewith, including any enforcement action taken with respect to any such establishment license or other authorization;
- C. Any action taken which may or does result in the suspension of operations of the Indemnitor or the issuance of an emergency order relative to the Indemnitor; and,
- D. Any disclosure or publication in any manner, other than willfully unlawful disclosure or publication, of material or information acquired during any past, present or future investigation of the applicant or the VGT Establishment.

2. Indemnitor will be responsible for and will protect, indemnify and hold harmless the Board, the Pennsylvania Department of Revenue, the Pennsylvania State Police, the Commonwealth of Pennsylvania and its instrumentalities, and their agents, employees and representatives from and against, any and all claims or payments for personal injury, property damage or other loss of any kind by any and all parties and claimants, arising out of, or in connection with, any act or omission by Indemnitor, or any of its principals, key employees, permittees, registrants, affiliated entities required to be certified in Pennsylvania, representatives and agents, where 42 Pa.C.S., Part VII, Ch. 85, Subchapter B (relating to sovereign immunity), is alleged or determined to authorize liability on the part of the Board, the Pennsylvania Department of Revenue, the Pennsylvania State Police, the Commonwealth of Pennsylvania and its instrumentalities, and their agents, employees and representatives.

3. DEFENSE COSTS: Except to the extent the conduct of any one of the Indemnitees constitutes a violation of law or willful misconduct outside the scope of Indemnitees' duties, Indemnitor will be responsible to

indemnify the Board, the Pennsylvania Department of Revenue, the Pennsylvania State Police, the Commonwealth of Pennsylvania and its instrumentalities, and their agents, employees and representatives for all attorneys' fees, costs, other fees, judgments, settlements or other monies reasonably paid on account of and related to any litigation or associated with the defense of any litigation as set forth above.

4. INDEMNITEE OBLIGATIONS: The Board and all Indemnitees agree to (i) use reasonable efforts to cooperate with Indemnitor and its agents relative to any matters in which they seek indemnification under this Agreement, (ii) will provide prompt notice to the Indemnitor of any actions which are likely to lead to a request for indemnification under this Agreement and (iii) raise any and all available sovereign immunity defenses relative to claims for which indemnification is sought under this Agreement.

5. ENTIRE AGREEMENT: This Agreement sets forth the entire agreement and understanding between the above-referenced parties relating to the subject matter herein and supersedes all prior discussions between the parties. No modification of or amendment to this Agreement, nor any waiver of any rights under this Agreement, will be effective unless it is in writing and signed by both the Board and Indemnitor. Any subsequent change or changes in the Indemnitor's duties or commission will not affect the validity or scope of this Agreement. No waiver of this Agreement shall be construed as a continuing waiver or consent to any subsequent breach thereof.

6. GOVERNING LAW; CONSENT TO PERSONAL JURISDICTION: This agreement will be governed by the laws of the Commonwealth of Pennsylvania without regard to conflicts of laws principles. Indemnitor hereby expressly consents to the personal jurisdiction of the State courts located in the Commonwealth of Pennsylvania for any lawsuit filed against Indemnitor arising from or relating to this Agreement.

7. SEVERABILITY: If one or more of the provisions in this Agreement are deemed void by law, then the remaining provisions will continue in full force and effect.

8. HEADINGS: Section headings are not to be considered a part of this Agreement and are not intended to be a full and accurate description of the contents hereof.

Both the Board and Indemnitor hereby certify and affirm that their duly appointed representatives have read and fully understand the foregoing Indemnification Agreement and acknowledge that their signatures below legally bind the Board and VGT Establishment.

This Agreement, consisting of three pages, including this page, is entered into this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

VGT Establishment

Sworn to and subscribed before me this \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_\_.

By: \_\_\_\_\_

\_\_\_\_\_  
Signature of Notary Public

\_\_\_\_\_  
Printed Name and Title

\_\_\_\_\_  
Printed name of Notary Public

\_\_\_\_\_  
Date commission expires



**Below section to be completed by the PGCB only**

---

Sworn to and subscribed before me this

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature of Notary Public

\_\_\_\_\_  
Printed name of Notary Public

\_\_\_\_\_  
Date commission expires

Pennsylvania Gaming Control Board  
By:

\_\_\_\_\_  
R. Douglas Sherman, Chief Counsel  
Pennsylvania Gaming Control Board