

## SANTA CLARA PUEBLO GAMING COMMISSION – Gaming Vendor License Application (A-I)

### I. GENERAL INFORMATION

**(A) Name of Enterprise/Vendor**

State the complete name of the enterprise/vendor and list names under which this enterprise/vendor has done business within the last ten years. For the purpose of this form “enterprise/vendor” shall be defined to include any corporation, association, operation, firm, partnership, trust or other form of business as well as natural person.

Name of Enterprise/Vendor:
(Include Trade Names and/or DBA’s):
Name of Enterprise (past ten years):
Federal Tax ID Number:

**(B) Address**

Contact Person:	Title:	Telephone Number:
Business Mailing Address: (City/State/Zip/County)		
Physical (Street) Address: (City/State/Zip/County)		
Telephone Number:	Fax Number:	E-Mail Address:

**(C) List the address of each office, warehouse, or outlet where you manufacture, store, or sell your manufactured goods and/or provide services from.**

**(D)**

1. Premises Name:	Telephone Number:
Street, City, State/Province, Zip, County:	
2. Premises Name:	Telephone Number:
Street, City, State/Province, Zip, County:	
3. Premises Name:	Telephone Number:
Street, City, State/Province, Zip, County:	
4. Premises Name:	Telephone Number:
Street, City, State/Province, Zip, County:	

**\* Release of Information Authorization forms are attached and are required for all identified individuals in Sections II through III\***

**II. TYPE OF ENTERPRISE & OWNERSHIP INFORMATION** (Check applicable block and submit the required information). **Note: Include a copy of the business license and an organization chart which includes all parent, subsidiary, related entities, including holding companies, and their relationships. Provide the following information as applicable for the enterprise and all parent companies. (Label as Attachment A1)**

- Individual/ Sole Proprietor(s)
  - ⇒ Include spouse (include maiden name)
- Partnership (Limited and General)
  - ⇒ Attach a list of all partners and their spouses (include maiden name)
  - ⇒ Partnership Agreement (If no agreement, list terms and date formed)
- Limited Liability Company
  - ⇒ Attach a list of all members and their spouses (include maiden name)
  - ⇒ Filing with Secretary of State/Province
  - ⇒ Organizational documents and/ or member agreements
- Corporation
  - ⇒ Attach a list of Corporate Officers, Directors, and Shareholders owning 5% or more of stock, and their spouses (include maiden name)
  - ⇒ Signed and Dated Certification of Corporation and/ or Articles of Incorporation/ Bylaws

**NOTE:** Provide the following information for the above corresponding individuals in the format shown: **(Label as Attachment A2)**

Name	Title	Street Address, City, State, Zip, County	
SSN	A.K.A.	DOB	% of Ownership

**III. STATE THE NAME, DATE OF BIRTH, RESIDENCE ADDRESS, POSITION WITH OR RELATIONSHIP TO THE ENTERPRISE & ATTACH A RECENT 3”x 5” COLOR PHOTO FOR THE FOLLOWING PERSON(S). (Label as Attachment B):**

- (A)** \*All persons of the enterprise who will be directly dealing with any **Santa Claran Hotel·Casino** licensees. To include all sales representatives and technicians dealing with **Santa Claran Hotel·Casino**.
- (B)** \*All persons associated with the enterprise that will be signing agreements with any **Santa Claran Hotel·Casino** licensees.
- (C)** \*The immediate supervisor(s) of each of the persons with whom casino licensees will be directly dealing with.
- (D)** \* The person(s) responsible for or in charge of the offices out of which these supervisor(s) work.

\* All individuals will need to fill out a Release of Information Authorization Form, original forms on page 11 and 12.

**IV. FINANCIAL INTEREST**

Please submit the requested material for any “Yes” answers:

- |                          |                          |  |
|--------------------------|--------------------------|--|
| Yes                      | No                       |  |
| <input type="checkbox"/> | <input type="checkbox"/> | 1. Does any person or entity listed in Sections II or III have any financial or ownership interest in any other gambling activity or enterprise: Provide full details <b>(Label as Attachment C1)</b>  |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. Does any person or entity, other than those listed in Sections II & III have any financial or ownership interest in this enterprise? Provide a list, including names and details of interest (including assigns, landlords, etc.) or to whom any interest or share of profits has been pledged as a security for the performance of a contract or sale, or whom as an obligation for enterprise liabilities relating to the gambling operation. <b>(Label as Attachment C2)</b> |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. Does any person or entity have an option to purchase any share of the enterprise (5% or more)? Explain, giving details including names and terms of option. <b>(Label as Attachment C3)</b>   |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. Was the purchase or startup of the enterprise a cash transaction (including cash from loans)? Provide narrative statement as to original source of cash. <b>(Label as Attachment C4)</b>  |
| <input type="checkbox"/> | <input type="checkbox"/> | 5. Does any person or entity other than the enterprise own the land, building(s), equipment, or any other assets (including patents) used by the applicant? Provide full details including owner, item and terms. <b>(Label as Attachment C5)</b>  |

**V. PUBLICLY TRADED**

(A) Is the enterprise a publicly traded corporation?  Yes  No

If Yes, please submit the following information on all institutional investors that hold 5% or more interest in the enterprise:

Name and Address of Institutional Investor	% of Ownership	Number of Shares Held

Table continued **(Label as Attachment D)**

(B) **Ticker Symbol:** \_\_\_\_\_ **Exchange Traded On:** \_\_\_\_\_

**VI. IS THIS ENTERPRISE ENTITLED TO INDIAN PREFERENCE?**

(At least 51% Owned and Controlled by Native Americans)

\_\_\_\_\_ Yes

\_\_\_\_\_ No

If Yes, list Name and Location of Tribal affiliate and attach Tribal Membership documentation. **(Label as Attachment E)****VII. TYPE OF PRODUCT/SERVICE:**

Check all that apply:

 Manufacturer Distributor Service Supplier Gaming Equipment/Supplies Gaming Machines Bingo Paper/ Supplies Pull Ticket/Tab or Punchboard Management Co./ Financier Consultant Casino Junket Other (State primary nature of goods/services to be provided.) \_\_\_\_\_**VIII. SUBCONTRACTORS/CONSULTANTS/OTHERS PERFORMING SERVICES FOR ENTERPRISE:**

For licensing application purposes, the term “subcontractor” means any corporation, business, organization, or entity, consultant, or person(s) other than the enterprise or enterprise’s employees that the enterprise contracts or authorizes to do work for Santa Claran Hotel-Casino. The enterprise may not anticipate the of subcontractors at the time of the initial license application however, all subcontractors will be required to complete a separate licensing application prior to any work being authorized. If the enterprise has not yet selected a subcontractor, the enterprise must provide the requested information as soon as it becomes known. **No subcontracted work may be authorized under the enterprise’s license.** Failure to identify subcontractors or provide the required information on subcontractors could adversely impact the enterprise’s licensing process or the enterprise’s license.

Will the enterprise use a subcontractor to provide all or part of the described services or products listed under Section VII? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please provide the name, address, telephone number and designated agent of the subcontractor. **(Label as Attachment F)**

**IX. RECORD KEEPING**

(A) Who (company or individual) maintains the enterprise’s business records?

(B) Who (company or individual) prepares the tax returns, government forms, audits, and reports for the

enterprise(s)?

(C) Where are the financial books and records for the enterprise’s business kept?

(D) For each financial institution in which this enterprise currently maintains its operating and/or investment account, attach a list of the following information. Include: **(Label as Attachment G1)**

Institution Name	Account #	Contact name	Telephone #
Street Address	City	State/Province	Zip

(E) For each outstanding loan and/or financial obligation (institutional/ personal/ other) obtained for use of operating this enterprise, attach a list of the following information: **(Label as Attachment G2)**

Creditor Name	Street Address	City	State/Province	Zip
Loan Number	Loan Amount	Date Acquired	Date Due	

(F) Attach a copy of the enterprise’s financial records. The financial records must reflect the business operation for which the application is being submitted. Failure to supply adequate financial information will result in delays or denial of the application. Include the following:  
**(Label as Attachment G3):**

- 1) Certified copies of Tax Returns from previous three (3) years.
- 2) Certified copies of financial statements for previous three (3) years.

**NOTE:** If the enterprise is a prospective or has recently begun operating, submit an estimated beginning balance sheet (proforma) and a statement of the amount(s) and source(s) of funding for the enterprise and specific documentation to support declaration.

**X. DEBT/BANKRUPTCY ACTIONS**

Has the enterprise ever filed, or had filed against it, a proceeding for bankruptcy or ever been involved in any formal process to adjust, defers, suspend or otherwise work out payment of a debt?

Yes       No      If you answered Yes, complete the following: **(Label as Attachment H)**

Date of Filing	Name and Location of Court	Case Number	Disposition

**XI. TAX INFORMATION**

Has there been filed against the enterprise or has the enterprise been served with a complaint, lien, judgment, or other notice filed with any public body regarding the payment of any tax required under Federal, State or Local law?

Yes       No      If you answered Yes, complete the following table:

Taxing Agency	Type of Tax	Date of Taxing Period (MM/YY)	Amount	Status/Disposition

Table continued (Label as Attachment I)

## XII. LITIGATION

- (A) Is your enterprise currently a party to any civil lawsuits?  
 Yes  No

If you answered Yes, submit a description of all existing civil litigation to which the enterprise or any subsidiary is presently a party whether in this state or another jurisdiction. Include the following information: (Label as Attachment J1)

1. Official title or caption of the case
2. Docket or case number
3. Name and location of the court before which the case is pending
4. Identity of all parties to the litigation
5. General nature of all claims being made
6. Status/disposition

- (B) Has your enterprise been a party to any other litigation:

1. In the previous ten years in which the enterprise or any of its officers, executives, or managers were accused of intentional misconduct?  
 Yes  No
2. In which an ultimate decision adverse to the enterprise or any of its officers, executives or managers would have or could have a current or future effect on the enterprise?  
 Yes  No
3. In which the *owner, partner, director* has ever been (for any offense): arrested, charged, indicted, tried, court martialled, plead no contest, or had any criminal record expunged in this or any other state or foreign country?  
 Yes  No
4. In which an ultimate decision adverse to the enterprise or any of its officers, executives or managers could reasonable be expected to reflect upon the current or future financial responsibility or ability of the enterprise or the character, reputation, or integrity of the enterprise or any of its officers, executives or managers?  
 Yes  No

If you answered Yes submit the following: (Label as Attachment J2)

1. Official title or caption of the case

2. Docket or case number
3. Name and location of the court before which the case is pending
4. Identity of all parties to the litigation
5. General nature of all claims being made
6. Status/disposition

- (C) Has the enterprise ever had a judgment, consent decree or consent order pertaining to a violation or alleged violation of the Federal Antitrust, Trade Regulation or Securities Laws, or similar laws of any state, province or country entered against it or has the enterprise been named as an un-indicted co-conspirator in any criminal proceeding in this state or any other jurisdiction?  
 Yes  No

If you answered Yes to the above, submit the following: **(Label as Attachment J3)**

1. Official title or caption of the case
2. Docket or Case number
3. Name & Address of Court or Agency
4. Nature of Judgment
5. Decree or Order
6. Date Entered

### XIII. REPRESENTATIVES

Submit the name, business address, and the telephone number of the enterprise’s representatives for:

(A) Legal Services

(B) Registered or authorized agent upon whom services of process in any proceeding against the filing entity pursuant to applicable rules, regulations and/or statutes of the State of New Mexico or proceeding in any court of the state including the United States District Court for the District of New Mexico may be made. **(Label as Attachment K1)**

### XIV. REGULATORY AGENCIES

- (A) Does a public or regulatory agency (other than gaming agencies) regulates the enterprise?  
 Yes  No If Yes, complete the following chart: **(Label as Attachment L1)**

Name and Location of Public Agency/Regulatory Agency	Type of Regulation	License No. or Other Identifying No.

- (B) Has the enterprise (including parent, subsidiaries, directors and/or principals) ever applied in any jurisdiction for a license, permit or other authorization to participate in **Indian gaming** or other lawful gaming operations (including manufacturer or distributor of gaming supplies & equipment, casino gaming, horse racing, dog racing, parimutual operations, lottery, or sports betting)?  
 Yes  No If Yes, submit the following information: **(Label as Attachment L2)**

Name & Address of Licensing Agency	License No.	Type of Gaming Activity	Status


(C) Has the enterprise ever had a complaint or other notice of pending disciplinary action from any jurisdiction?  Yes  No

(D) Has the enterprise ever had any license or certificate issued by any jurisdiction denied, restricted, suspended, revoked or not renewed?  Yes  No

(E) Has the enterprise ever withdrawn its application, license or certificate in any jurisdiction?  Yes  No

If you answered Yes to any of the questions above, submit the following information, include a statement describing the facts or circumstances: **(Label as Attachment L3)**

Name of Licensing Authority	Action Taken	Date of Action

(F) Provide a copy of the enterprise’s registration with the Department of Justice **(Label as Attachment L4)**

**XV. AGREEMENTS**

(A) Has the enterprise entered into any written agreements with Santa Claran Hotel-Casino?  
 Yes  No If Yes, submit a copy of such an agreement. **(Label as Attachment M1)**

(B) Has the enterprise entered into any unwritten agreements with Santa Claran Hotel-Casino?  
 Yes  No If Yes, submit a description of the terms of each agreement, including in said description the expected duration and terms of compensation of each such agreement. **(Label as Attachment M2)**

(C) List the annual volume of business in terms of dollars the enterprise is doing or expects to do with Santa Claran Hotel-Casino and the ending fiscal period. \_\_\_\_\_.

(D) For each agreement or expected agreement with Santa Claran Hotel-Casino explain:

1. How and when the terms of compensation are to be determined. If different responses are required for different agreements, identify each response with the particular agreement to which it relates.
2. How and when orders, if any, are to be placed under each agreement. **(Label the above responses as Attachment M3)**

(E) Are, or were, any agreements between this enterprise and Santa Claran Hotel-Casino, in any way subject to or conditioned upon any other agreement between Santa Claran Hotel-Casino its employees or either this enterprise or any other enterprise whatsoever?



Yes

No

If Yes, submit a list of each such agreement, explain the relationship and name the enterprise. (Label as Attachment M4)

(F) Are any of the suppliers, vendors or subcontractors of the enterprise, directly or indirectly, either holders of any securities or creditors as to any long or short term secured or unsecured debt of the enterprise?

Yes

No

If yes, identify the said suppliers, vendor or subcontractors, the nature of the interest or debt and the amount thereof. (Label as Attachment M5)

## XVI. CERTIFICATION

**I CERTIFY THAT THE FOREGOING INFORMATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF.**

*I further understand that any false statements or misrepresentation of any information, as well as a failure to consent to the disclosures on any part of this application may be grounds for the denial and/or revocation of the enterprise's gaming license.*

Name of Enterprise: \_\_\_\_\_

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

(Print Name)

\_\_\_\_\_

(Title)

\_\_\_\_\_

(Signature)

\_\_\_\_\_

(Date)

Subscribed and Sworn before me on this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_

Notary

SEAL

My Commission Expires: \_\_\_\_\_

**RELEASE OF AUTHORIZATION FOR LICENSING**

1. The undersigned has filed an application for a gaming license with the Santa Clara Pueblo Gaming Commission. Federal and/or Tribal law requires the Gaming Commission to perform a thorough investigation of the undersigned, including, but not limited to, background, associates and finances.
2. The undersigned, hereby authorizes the Gaming Commission:
  - (A) to obtain any information from any source necessary to make a determination whether to issue a gaming license to undersigned; and
  - (B) to release the information to other appropriate federal, tribal, state, local or foreign law enforcement and regulatory agencies when relevant to civil, criminal or regulatory investigations or prosecutions or when, pursuant to a requirement by the Gaming Commission or the National Indian Gaming Commission, the information is relevant to the licensing of the undersigned by the Gaming Commission.
3. The undersigned hereby releases, and forever discharges the Santa Clara Pueblo, its agents and employees, from any and all causes of action, and other claims, as well as any and all judgments known or unknown, that the undersigned may have or claim to have arising out of or by reason of the processing and investigation related to consideration of the undersigned’s gaming license application or any legally required reporting.
4. On behalf of \_\_\_\_\_,  
(Name of Enterprise)

I, \_\_\_\_\_, have authorized the Santa Clara Pueblo Gaming Commission to conduct a full investigation into the background of said enterprise.

5. THEREFORE, you are hereby authorized to release any and all information pertaining to this enterprise, documentary or otherwise, as requested by any employee or agent of the Santa Clara Pueblo Gaming Commission.
6. A photo static copy of this authorization is as effective and valid as the original.

I, the undersigned, have read this release and understand all its terms. I execute it voluntarily and with full knowledge of its significance.

In witness whereof, I have executed this release on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

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

\_\_\_\_\_  
SIGNATURE

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

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

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

My Commission Expires: \_\_\_\_\_

SEAL

**RELEASE OF INFORMATION AUTHORIZATION**

I, \_\_\_\_\_, authorize any investigator, special agent or other representative of the United States Department of the Interior, the Federal Bureau of Investigation, or any tribal, state or local law enforcement or investigatory agencies, in order to determine my suitability for licensing in Indian gaming, to obtain any information requested related to my activities including: employment, schools, criminal justice agencies, consumer reporting agencies, regulatory agencies, property interests (real or personal) and other sources. This information includes, but is not limited to, my academic, residential, performance, disciplinary, financial, credit, employment, and criminal history records, whether or not such information would otherwise be protected from disclosure by any constitutional, statutory or common law privilege.

I authorize custodians of such records and sources of information to release such information, including permitting the review and copying of any and all documents, records or correspondence pertaining to me, upon request of the representative of the agencies listed above, regardless of any previous agreement to the contrary.

I do, for myself, my heirs, administrators, successors and assigns, hereby release, remise and forever discharge any person to whom this request is presented and his agents and employees from any and all manner of actions, causes of action, suits, debts, judgments, executions, claims and demands whatsoever, known or unknown in law or equity, which I ever had, now have, may have or may claim to have against such person or his agents or employees arising out of or by reason of complying with this request.

I agree to accept any risk of adverse public notice, embarrassment, criticism or financial loss that may result from use of information that is obtained in connection with a background investigation for the purpose listed in this document.

I agree to indemnify and hold harmless any person to whom this request is lawfully presented, his agents and employees from and against all claims, damages, losses and expenses, including reasonable attorney's fees, arising out of or by reason of complying with this request. I understand that the Santa Clara Pueblo Gaming Commission will ensure that access to all provided information is held in the strictest of confidence and restricted only to personnel involved in licensing and investigative deliberation. The Santa Clara Pueblo Gaming Commission shall not disclose any information or documents provided under this release without the prior, written consent of the enterprise. The information provided will be stored and maintained in such a manner as to safeguard against unauthorized access and dissemination.

I understand that the information released by records, custodians and other sources of information is required for a background investigation and to process my license application for gaming employment or management or providing goods or services as a vendor to a gaming operation.

Residence Address: \_\_\_\_\_ City: \_\_\_\_\_ County: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ SSN: \_\_\_\_\_

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

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_

Subscribed and sworn to before me on this \_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_\_.

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

My Commission Expires: \_\_\_\_\_

SEAL

# AUTHORIZATION FOR RELEASE OF INFORMATION

I, \_\_\_\_\_  
NAME (MUST BE **PRINTED-LEGIBLY**) (SSN) (DOB)

PURSUANT TO NMSA 1978, SECTION **29-10-6(A)** (Repl. Pamp. 1990), OF THE NEW MEXICO ARREST RECORD INFORMATION ACT, HEREBY APPOINT:

**SANTA CLARA PUEBLO GAMING COMMISSION**  
NAME (MUST BE **PRINTED**) (IF NO AGENT, **PRINT "SELF"**)

AS AN AUTHORIZED AGENT FOR ME FOR THE PURPOSE OF INSPECTING (AND /OR OBTAINING COPIES) ANY NEW MEXICO ARREST FINGERPRINT CARD SUPPORTED RECORD INFORMATION MAINTAINED BY THE DEPARTMENT OF PUBLIC SAFETY, INCLUDING INFORMATION CONCERNING FELONY OR MISDEMEANOR ARRESTS.

TO THE CUSTODIAN OF THE RECORDS IN QUESTION, I HEREBY DIRECT YOU TO RELEASE SUCH INFORMATION TO THE AUTHORIZED AGENT AS DESCRIBED ABOVE.

I HEREBY RELEASE THE CUSTODIAN OR CUSTODIANS OF SUCH RECORDS AND THE DEPARTMENT OF PUBLIC SAFETY, INCLUDING ANY OF THEIR AGENTS, EMPLOYEES, OR REPRESENTATIVES IN ANY CAPACITY, FROM ANY AND ALL CLAIMS OF LIABILITY OR DAMAGE OF WHATEVER KIND OR NATURE, WHICH AT ANY TIME COULD RESULT TO ME, MY HEIRS, ASSIGNS, ASSOCIATES, PERSONAL REPRESENTATIVE OR REPRESENTATIVES OF ANY NATURE BECAUSE OF COMPLIANCE BY SAID CUSTODIAN OR CUSTODIANS WITH THIS "AUTHORIZATION FOR RELEASE OF INFORMATION" AND MY REQUEST CONTAINED HEREIN FOR THIS RELEASE OR BECAUSE OF ANY USE OF THESE RECORDS. THIS RELEASE IS BINDING, NOW AND IN THE FUTURE, ON MY HEIRS, ASSIGNS, AND ASSOCIATES, PERSONAL REPRESENTATIVE OR REPRESENTATIVES OF ANY NATURE.

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

**(\*ATTN: NOTARY-ENSURE DOCUMENT IS SIGNED IN YOUR PRESENCE AND NAME, DOB, SOC INFORMATION IS VERIFIED WITH A VALID ID)**

*SUBSCRIBED AND SWORN TO BEFORE ME THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20 \_\_\_\_\_.*

\_\_\_\_\_  
(NOTARY PUBLIC)

( SEAL )

MY COMMISSION EXPIRES: \_\_\_\_\_