

**South Dakota Lottery**

711 East Wells Avenue  
 Pierre, SD 57501  
 Telephone: (605) 773-5770

**Individual History****DO NOT WRITE HERE**

Control # \_\_\_\_\_  
 License # \_\_\_\_\_  
 Oper. # \_\_\_\_\_  
 Cash Access   
 Tech I   
 Tech II

This form must be completed by each owner, each partner of a partnership, each officer and/or director of a corporation, machine access personnel and all stockholders of 5% or more. (This form may be duplicated.)

**Business Name**  
 (Same as on application form)

Business Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Last Name:

First Name

Middle Name:

AKA (also known as i.e. maiden name, nickname, etc.)

Date of Birth:

City of Birth:

Social Security Number:

Drivers License Number:

State Issued

List all addresses where you have lived for the last five years including your present address. (Attach separate sheet if necessary.)

Address

City / State / Zip

From Year:

To Year:

Current:

Previous:

Previous:

Name of Spouse, if any:

AKA (also known as, i.e. maiden name/nickname, etc.)

Spouse's Date of Birth:

City of Birth:

Spouse's Social Security Number

Individual's relationship to business  
 (owner/partner/officer/director/stockholder – 5% or more/employee):

Percent of stock  
 or business owned:

Name of present employer,  
 if different from business name:

Occupation or Title:

U.S. Citizen?  Yes  No  
 If "No" attach details

Are you an employee of a vendor doing business with the South Dakota Lottery?  
 Yes  No

S.D. Resident?  Yes  No

List names of all relatives who are employees or  
 Commission members of the South Dakota Lottery:

**READ THIS SECTION CAREFULLY**

Have you ever been arrested? If "Yes", list all arrests, including DUI's, regardless of when they occurred on a separate attached sheet. Include approximate date, location, charge and final disposition for each incident. Failure to disclose arrests may result in denial of application.

 Yes  No

Do you consent, for the duration of the license, to inspection by any law enforcement official or duly authorized lottery official without a warrant or other process, of your licensed premises to determine whether you are complying with the provisions of the South Dakota Lottery Laws, Rules, and Regulations?

 Yes  No

Do you authorize the SD Lottery to release information from this form to the person(s) on whose behalf this form was filed?

 Yes  No

I declare and affirm under the penalties of perjury that this application, registration, or report has been examined by me, and to the best of my knowledge and belief is in all things true and correct.

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

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