Instruction Guide

Video Lottery License Application

Fill in all spaces as indicated.

- **1. Types of licenses:** Check the box indicating what type of video lottery license you are requesting according to the following definitions.
- **Distributor**: an individual, partnership, corporation or association that distributes or sells video lottery machines or associated equipment in this state. (*Click on Additional Distributor Information for details on how to apply for this type of license.*)
- Operator: an individual, partnership, corporation or association that purchases video lottery machines or associated equipment for placement in establishments in this state. (Click on Additional Operator for details on how to apply for this type of license.)
- **Establishment**: a business owned or managed by an individual, partnership, corporation or association with an on-sale alcoholic beverage license where video lottery machines are placed. (*Click on Additional Establishment and Operator/Establishment Information for further details.*)
- **2.** Business Name: Enter the name of the business, as it appears to the general public.

Business Telephone: Enter the telephone number of the business.

Federal Taxpayer ID #: Enter the Federal Taxpayer ID number for the business.

- 3. SD Sales Tax #: Enter the South Dakota sales tax number of your business.
- **SD Liquor License** #: If you are applying for an establishment license, enter the South Dakota Liquor License number of the business. This license authorizes the sale and consumption of alcoholic beverages on the premises including any distilled spirits, wine and malt beverage. Leave this space blank if you do not yet have this license (call when received).

Name of Liquor License Owner: Enter the name of the person or entity who holds the liquor license.

- **4.** Address of Business: Enter the street address, county, city, state and zip code of the business.
- **5. Mailing Address**: Enter the business mailing address if it is different from the business address.
- **6. Primary Business Bank**: Enter the name and address of the bank where the principal business accounts are maintained.

Bank Account Number(s): List the business bank account numbers.

- **7. Business Type**: Check one box, indicating the type of business organization. Depending upon the type of organization, the following people must each submit completed, notarized "Individual History" and "Investigation Authorization" forms with the application.
- · Sole Proprietorship: The owner.
- · Partnership: Each general partner, limited partner or joint venture.
- · Corporation/Profit: Each officer and director (including parent company, if subsidiary) and each stockholder who owns 5 percent or more stock.
- · Association, fraternal or civic: Each officer and director.
- · Trust: Each trustee.

NOTE: If the person or entity that holds the Liquor License is different from the person submitting application for an establishment or operator/establishment license, both the "Individual History" and "Investigation Authorization" forms for the license holder must also be submitted depending on the type of organization in which the liquor license is held.

- **8. Business Officials Names:** Using the information contained in item #7 above, list the names of all individuals required to submit "Individual History" and "Investigation Authorization" forms. Attach the "Individual History" and "Investigation Authorization" forms to the License Application. If there are more than six names, use an additional sheet and attach "Individual History" and "Investigation Authorization" forms for each name.
- **9. Contact Person:** Enter the name of the business/organization contact person regarding this application. **Title**: Identify the contact person's position with the business/organization.

Telephone Numbers: List the contact person's business and residence telephone numbers.

- 10. Residence Address: Enter the complete home address of the contact person.
- 11. Questions: A. If the business has ever filed bankruptcy under the current or a previous management, give full details regarding date, location, outcome, and all other pertinent information. B. If the business is currently delinquent in its financial obligations to the State of South Dakota, give full details. This includes any current or pending litigation with the state.
- **12.** Current Video Lottery Establishment: If this is an application for an establishment that has a video lottery license and is a change of ownership, please indicate "yes" and fill in name & video lottery license number. If not, indicate by checking "no."
- **13. Application Fee:** The application fee is \$50 per each location and \$43.25 per person with more than 5 percent ownership. The fees is used to conduct background checks.
- 14. Release of Information Forms: The applicant must submit signed and notarized, "Individual History" and "Investigation Authorization" forms for the business and all individuals whose names appear on the application. The application must be signed and dated by a person authorized by the business to file the application. The form must be returned to the South Dakota Lottery office with the \$50 fee and all other required "Individual History" and "Investigation Authorization" forms. Make copies of the forms for your records.

Application Checklist

The following forms must be returned to the South Dakota Lottery. Failure to return all forms will delay the application process.

- 1. Application for Video License
- 2. Individual History form(s) for each individual listed.
- 3. Investigation Authorization form(s) for each individual listed.
- 4. Any additional information required for operators, distributors and establishments (i.e. income tax records, service personnel information/contact, security bond, video lottery payment system form.)