

ILLINOIS GAMING BOARD

160 North LaSalle Street, 3rd Floor

Chicago, Illinois 60601

312-814-4700



VIDEO GAMING SALES AGENT AND BROKER LICENSE APPLICATION SHORT FORM

(for use only by Technicians and/or Terminal Handlers in good standing with the Illinois Gaming Board who will engage in the solicitation of any use agreement on behalf of a licensed terminal operator with whom the individual applicant is either an employee or independent contractor.)

Name of Individual Applicant submitting this application:

Date: _____

Current Technician and/or Terminal Handler license number(s) and expiration date(s):

<input type="checkbox"/> Terminal Handler	License #:		Expiration Date:	
<input type="checkbox"/> Technician	License #:		Expiration Date:	

Name of licensed Terminal Operator(s) on whose behalf you will act as a Sales Agent and Broker:

1.		<input type="checkbox"/> Employee
		<input type="checkbox"/> Independent Contractor
2.		<input type="checkbox"/> Employee
		<input type="checkbox"/> Independent Contractor
3.		<input type="checkbox"/> Employee
		<input type="checkbox"/> Independent Contractor
4.		<input type="checkbox"/> Employee
		<input type="checkbox"/> Independent Contractor

I am not currently affiliated with a licensed Terminal Operator. *(If not affiliated, you are required to promptly notify the Illinois Gaming Board of any future relationship with a licensed Terminal Operator).*

**INSTRUCTIONS FOR VIDEO GAMING
SALES AGENT AND BROKER LICENSE APPLICATION SHORT FORM**

WARNING

BY FILING THIS APPLICATION, YOU ACCEPT ANY RISK OF ADVERSE PUBLIC NOTICE, EMBARRASSMENT, CRITICISM, OR OTHER ACTION, OR FINANCIAL LOSS WHICH MAY RESULT FROM ACTION TAKEN OR NOT TAKEN WITH RESPECT TO THE FORM AND ANY LICENSE APPLICATION, AND EXPRESSLY WAIVE ANY CLAIM FOR DAMAGES AS A RESULT THEREOF. INFORMATION NOT REQUESTED IN THIS FORM OR IN ADDITION TO THAT PROVIDED IN RESPONSE TO THIS FORM MAY BE REQUESTED.

Read the entire Application before responding to the questions.

This Application is an official document. You should respond to the questions contained herein to the Best of your Knowledge after substantial inquiry. Do not misstate or omit any material fact(s) as each statement made herein is subject to verification. **ANY misrepresentation, failure to reveal information or omission is grounds for denial of a license application. “A person who knowingly makes a false statement on an application is guilty of a Class A misdemeanor.” 230 ILCS 10/9(f).**

You are under a continuing duty to disclose promptly any changes in the information provided in this Application and additional information and materials submitted to the Illinois Gaming Board. The duty to make such additional disclosures shall continue throughout any period of licensure granted by the Illinois Gaming Board associated with this VIDEO GAMING SALES AGENT AND BROKER LICENSE APPLICATION SHORT FORM.

If a question does not apply to you, so state with “N/A.” If space available is insufficient, continue on a separate sheet of paper and precede each answer by labeling the section to which it is responsive. Individual Applicant must initial each page, as provided in the lower right-hand corner. By placing such initials on each page, the Individual Applicant attests to the accuracy and completeness of the information contained on that page.

For the purpose of this VIDEO GAMING SALES AGENT AND BROKER LICENSE APPLICATION SHORT FORM, the terms herein shall have the meanings as provided for in the Video Gaming Act (230 ILCS 40/) and/or the Adopted Rules for Video Gaming, as may be updated from time to time by the Illinois Gaming Board.

REQUIRED FORMS AND DOCUMENTS

The following properly executed forms and documents are required prior to the processing of this VIDEO GAMING SALES AGENT AND BROKER LICENSE APPLICATION SHORT FORM.

1. Certification and Authorization
2. Release of All Claims
3. Request to Release Information
4. Copy of signed Sales Agent/Broker Agreement, *if applicable*
5. Copy of Terminal Handler and/or Technician License
6. Copy of government issued Driver’s License or Identification Card
7. Current Photo
8. \$100 Application Fee

SUBMISSION AND PAYMENT

The complete Application can be submitted on the [Sales Agent and Broker Submission Page](#) on the IGB website [Illinois Gaming Board](#) under Video Gaming; Applications and Forms. The Application Fee can be paid online by selecting the “Make a Payment to E-Pay” link at the bottom of the IGB website. The Applicant will select “Video Gaming Payments” and “Sales Agent Application Fees” from the drop-down menus.

SECTION 1 – GENERAL INFORMATION

Provide the information requested below if you intend to act as a Sales Agent/Broker and engage in the solicitation of business from current or potential Licensed Video Gaming Locations.

Last Name		First Name		Middle Name	
Date of Birth		Social Security Number		Cell Phone Number	
Alias Names (nicknames, other name changes, legal or otherwise)				Maiden Name	
Street Address			City/State/Zip Code		
Email Address		Job Title		Start Date	

SECTION 2 – ADDITIONAL QUESTIONS

Provide an accompanying Exhibit explaining any question that is answered yes.

Since your initial Application with the Illinois Gaming Board:	Yes	No
A. Has a Terminal Operator previously submitted an Exhibit 8D – Sales Agent/Broker Update on your behalf? Provide as Exhibit 4(A) a list of all Terminal Operators.	<input type="checkbox"/>	<input type="checkbox"/>
B. Have you been arrested, charged, indicted, convicted, pleaded guilty or nolo contendere, received supervision, conditional discharge or probation or forfeited bail concerning any criminal offense either felony or misdemeanor except for traffic violations for which a sentence of imprisonment could not be imposed? (You are not obligated to disclose sealed or expunged records of conviction or arrest.)	<input type="checkbox"/>	<input type="checkbox"/>
C. Have you accepted a finder's fee or any other compensation from another person or entity for services rendered in connection with the issuance of a gaming license in any jurisdiction? Please describe each instance.	<input type="checkbox"/>	<input type="checkbox"/>
D. Have you ever offered or provided anything of value to any video gaming location, or any person related to or affiliated with a video gaming location as identified in Section 1800.350(a)(2) of this Part, as an incentive or inducement to locate, keep or maintain video gaming terminals at a video gaming location?	<input type="checkbox"/>	<input type="checkbox"/>
E. Have you ever facilitated, enabled, or participated in the use of coin-operated amusement devices or any type of coupon or electronic product promotion kiosks (sweepstakes machines) for gambling purposes?	<input type="checkbox"/>	<input type="checkbox"/>
F. In any jurisdiction, have you had any Gaming-related license, certificate or application denied or found unsuitable, voluntarily withdrawn, suspended or restricted, revoked, non-renewed or considered for non-renewal, found unsuitable or ordered to economically disassociate from any business entity or for which a preliminary action relating to unsuitability or economic disassociation was initiated?	<input type="checkbox"/>	<input type="checkbox"/>
G. Does the Applicant owe any past due taxes, fees or obligations to any local, state or the federal government?	<input type="checkbox"/>	<input type="checkbox"/>
H. Have you ever been involved in a gambling related business in any state, country, or other jurisdiction, though never issued a license or permit?	<input type="checkbox"/>	<input type="checkbox"/>

Additionally,	Yes	No
I. As a Terminal Handler/Technician licensee, I am in compliance with my continuing duty to disclose promptly any changes in the information provided in my original application and any additional information and materials submitted to the Illinois Gaming Board.	<input type="checkbox"/>	<input type="checkbox"/>
J. Are you individually, or through a business entity that you own or control, licensed as a Video Gaming Manufacturer, Distributor, Supplier, Licensed Establishment, Licensed Fraternal Establishment, Licensed Veterans Establishment. Licensed Truck Stop Establishment and Licensed Large Truck Stop Establishment?	<input type="checkbox"/>	<input type="checkbox"/>
K. Will you individually, or through a Business Entity, be receiving any Net Terminal Income pursuant to a contractual agreement for the services you provide?	<input type="checkbox"/>	<input type="checkbox"/>
L. Do you intend to receive compensation from a licensed Terminal Operator for the solicitation of use agreements through a business entity you own or control? If yes, please proceed to Section 3 – Business Entity Information	<input type="checkbox"/>	<input type="checkbox"/>

SECTION 3 – BUSINESS ENTITY INFORMATION

Provide the information requested below if you intend to receive compensation for the solicitation of use agreements through a Business Entity that you own or control.

Each business entity disclosed must complete a Video Gaming Sales Agent and Broker License Application for Business Entities and be licensed as a Sales Agent and Broker prior to engaging in the solicitation of business.

Name of Business Entity		Doing Business As (D/B/A)	
Name of affiliated applicant or licensee for which this form is submitted:			
Street Address		City/State/Zip Code	
Mailing Address (if different)		City/State/Zip Code	
Business Phone	Facsimile	Email Address	
Federal Employer Identification Number (FEIN)		Illinois Business Tax Number (IBT or Sales Tax Number)	

SECTION 4 – RELATIONSHIPS

Do you have any immediate family that own, manage or control a location establishment applicant or licensee or are otherwise involved in any aspect of Video Gaming in the State of Illinois?

Family Members Last Name	First Name	Relation
Affiliated License Name		

Family Members Last Name	First Name	Relation
Affiliated License Name		

SECTION 5 – CERTIFICATION AND AUTHORIZATION

I swear and certify under penalty of law that all answers and information provided by me in this Video Gaming Sales Agent and Broker License Application Short Form are true, correct and complete to the Best of My Knowledge. I acknowledge that any misrepresentation, failure to reveal or update information or omission is grounds for denial of a license and/or revocation of any license for which this Application is submitted. I acknowledge that I am under a continuing duty to disclose promptly any changes in the information provided in the Application and additional information and materials submitted to the Illinois Gaming Board. The duty to make such additional disclosures shall continue throughout any period of license granted by the Illinois Gaming Board. I hereby authorize the Illinois Gaming Board to investigate my criminal history, financial records and all other sources as necessary for licensing.

Signature	Print Name	Date Signed

APPLICANT’S SIGNATURE MUST BE NOTARIZED

SUBSCRIBED and SWORN to before me this

_____ day of _____, 20_____

(Notary Public)

Notary Public in and for the

County of _____

State of _____

**VIDEO GAMING SALES AGENT AND BROKER LICENSE APPLICATION SHORT FORM:
SCHEDULE OF EXHIBITS**

(Print name of Applicant)

If an Exhibit is not applicable, indicate with N/A

Exhibit Number	Person who made or directed preparation of Exhibit	Official Title
1		
2(A)		
2(B)		
2(C)		
2(D)		
2(E)		
2(F)		
2(G)		
2(H)		
2(I)		
2(J)		
2(K)		
2(L)		
3		
4		

RELEASE OF ALL CLAIMS

The undersigned has filed with the Illinois Gaming Board ("Board") certain forms and documents in connection with a written request for licensing by the Board ("Application"). In consideration of the assurance by the Board that no vote on said Application will be taken except after a deliberate, intensive and thorough investigation of the undersigned, including but not limited to background, associations and finances, the undersigned does for myself, my heirs, executors, administrators, successors and assigns, hereby release, remise, and forever discharge the State of Illinois, the Board, its members, 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 the undersigned ever had, now has, may have, or claim to have against any or all of said entities or individuals arising out of or by reason of the processing or investigation of or other action relating to the Application.

I, _____, have read this release and understand its terms. I execute this release with full knowledge that I will be bound hereby.

IN WITNESS WHEREOF, I have executed this release at _____, _____
(City) (State)
on the _____ day of _____, 20_____.

SUBSCRIBED and SWORN to before me this

_____ day of _____, 20_____. (Name of Applicant)

(Notary Public)

Notary Public in and for the
County of _____ State of _____

(Signature)

AFFIDAVIT OF FULL DISCLOSURE

State of _____

County of _____

I, _____, and being first duly sworn upon oath or affirmation,
(Name of Applicant)

depose and state:

that, except as has been reported in writing to the Illinois Gaming Board (“Board”), undersigned has no agreements or understandings with any person or entity and no present intent to hold as agent, nominee or otherwise any direct or indirect interest whatsoever in any licensed gaming operation or any portion thereof for which the Applicant associated with this Video Gaming Business Entity Sales and Broker License Application (“Application”) seeks licensing by the Board;

that, except as has been reported in writing to the Board, undersigned has no agreements or understandings with any person or entity and no present intent to transfer at any future time any direct or indirect interest whatsoever in or to a licensed gaming operation or any portion thereof for which the Applicant associated with this Application seeks licensing by the Board.

I have read this Affidavit of Full Disclosure and understand its terms. On behalf of and in accordance with the instructions, I execute this Affidavit of Full Disclosure with full knowledge that I will be bound hereby.

IN WITNESS WHEREOF, I have executed this affidavit at _____
(City)
_____ on the _____ day of _____, 20____.
(State)

(Name of Applicant)

(Signature)

SUBSCRIBED and SWORN to before me this

_____ day of _____, 20_____

(Notary Public)

Notary Public in and for the

County of _____

State of _____

**VIDEO GAMING SALES AGENT AND BROKER LICENSE APPLICANT'S
REQUEST TO RELEASE INFORMATION**

TO: _____
(DO NOT WRITE ON THE ABOVE LINE – to be completed by the Illinois Gaming Board)

FROM: _____
(Print Name of License Applicant)

1. Applicant hereby authorizes and requests all persons or entities to which this request is presented having information relating to or concerning Applicant to furnish such information to a duly appointed agent of the Illinois Gaming Board, whether or not such information would otherwise be protected from disclosure by any constitutional, statutory or other legal privilege.
2. Applicant hereby authorizes and requests all persons or entities to which this request is presented having documents relating to or concerning Applicant to permit a duly appointed agent of the Illinois Gaming Board to review and copy any such documents, whether or not such documents would otherwise be protected from disclosure by any constitutional, statutory or other legal privilege.
3. If the person or entity to whom this request is presented is a brokerage firm, bank, savings and loan, or other financial institution or an officer of same, Applicant hereby authorizes and requests that a duly appointed agent of the Illinois Gaming Board be permitted to review and obtain copies of any and all documents, records or correspondence pertaining to Applicant, including but not limited to past loan information, notes co-signed by Applicant, checking account records, savings deposit records, safe deposit box records, passbook records, and general ledger folio sheets.
4. Applicant hereby makes, constitutes, and appoints any duly appointed agent of the Illinois Gaming Board Applicant's true and lawful attorney in fact for Applicant in Applicant's name, place, stead, and on Applicant's behalf and for Applicant's 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 or entity to whom this request is presented as Applicant might;
 - (b) to name the person or entity to whom this request is presented and insert that person's or entity's name in the appropriate location on this request;
 - (c) to place the name of the Illinois Gaming Board agent presenting this request in the appropriate location on this request.
5. Applicant grants to said attorney in fact full power and authority 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 Applicant might or could do, with full power of substitution or revocation, hereby ratifying and confirming all that said attorney in fact, or his substitute or substitutes, shall lawfully do or cause to be done by virtue of this power of attorney and the rights and powers herein granted.
6. This power of attorney ends eighteen (18) months from the date of execution or at the termination of all licenses issued relating to Applicant by the Illinois Gaming Board, whichever occurs later.

