

For Agency Use Only:
Date Approved: _____
License Number: _____



Maine Business Entity Application

**Slot Machine Operator – Casino Operator - Slot Machine Distributor
Table Game Distributor - Gambling Services Vendor**

FOR GAMBLING CONTROL BOARD USE ONLY

Maine Gambling Control Board

Department of Public Safety
Central Maine Commerce Center
87 State House Station
45 Commerce Drive, Suite 3
Augusta, Maine 04333-0087
(207) 626-3900 - Office
(207) 287-4356 - Fax

APPLYING FOR YOUR Gambling License

OBTAIN YOUR APPLICATION

Applications can be obtained from: Maine Gambling Control Board

FILL OUT YOUR APPLICATION

Items you must provide:

- Application forms (*completed & signed*)
- Supporting documentation as specified on the attached Application Instructions Checklist
- Application Fee
- Copy of completed application in approved electronic format

SUBMIT YOUR APPLICATION

Mail or deliver to: Maine Gambling Control Board
Department of Public Safety
Central Maine Commerce Center
87 State House Station
45 Commerce Drive
Augusta, Maine 04333-0104
(207) 626-3900 - Office
(207) 287-4356 - Fax

Make check or money order payable to: Treasurer, State of Maine

GAMBLING LICENSES REQUIRED

SLOT MACHINE OPERATOR LICENSE is required for any person who operates slot machines and associated equipment.

CASINO OPERATOR LICENSE is required for any person who operates a facility with both slot machines and table games and associated equipment.

SLOT MACHINE DISTRIBUTOR LICENSE is required for any person who sells, leases, or distributes slot machines and associated equipment for use in the State of Maine.

TABLE GAME DISTRIBUTOR LICENSE is required for any person who sells, leases, or distributes table games and associated equipment for use in the State of Maine.

GAMBLING SERVICES VENDOR LICENSE is required for any person who provides gambling services.

To the extent that an applicant claims that information submitted with this application is entitled to protection pursuant to 8MRSA §1006(1)(A), the applicant must, with respect to each specific question:

- 1) Assert that position, and
- 2) Submit facts demonstrating that the information:
 - a) is a trade secret as defined in 10 MRSA §1042;
 - b) that release of the information would be competitively harmful;
 - c) and that the information is not publicly available.

ANSWERS TO QUESTIONS THAT ARE SHADED WITHIN THIS APPLICATION MAY FALL WITHIN A CATEGORY THAT HAS BEEN DETERMINED BY THE GAMBLING CONTROL BOARD TO BE CONFIDENTIAL BY STATUTE (8 MRSA §§1006-1008). INFORMATION THAT IS NOT RESPONSIVE TO A SHADED CATEGORY WILL NOT NECESSARILY BE TREATED AS CONFIDENTIAL BY THE BOARD.

INFORMATION THAT IS CONFIDENTIAL PURSUANT TO 8 MRSA §1006(1)(A)-(G), IS NOT SUBJECT TO RELEASE UNLESS IT IS PUBLICLY AVAILABLE. HOWEVER, INFORMATION AFFORDED CONFIDENTIALITY PURSUANT TO 8 MRSA §1006(1)(H) IS NOT SUBJECT TO RELEASE BY THE GAMBLING CONTROL BOARD, OR STAFF, EVEN IF PUBLICLY AVAILABLE THROUGH OTHER SOURCES.

OTHER AREAS MAY BE CONFIDENTIAL IF PROTECTED BY APPLICABLE STATE OR FEDERAL LAW. APPLICANTS SHALL DISCLOSE THIS INFORMATION WITH THIS APPLICATION IF KNOWN.

1. APPLICATION FULLY COMPLETED.

Type or clearly print an answer to every question. If a question does not apply to you, indicate so with an N/A. If you are unsure if a question applies to you or what information the form is asking you to provide, contact the Maine Gambling Control Board office to seek clarification. If the available space is insufficient, continue on a separate sheet and precede each answer with the appropriate title and question number. The separate sheets are to be submitted as attachments, and are not to be inserted between pages of the application.

2. ALL FORMS SIGNED & ATTACHED

The following accompanying forms must be signed and returned with the application:

- Affirmation & Consent
- Investigation Authorization/Authorization to Release Information
- Applicant's Request to Release Information (leave top line of form blank)
- Provide signed copies of the personal federal and state income tax returns for the past three years for the key officers, directors and employees applying to the Maine Gambling Control Board for a license.

3. ALL REQUESTED INFORMATION

The application, as well as other documents submitted to the Gambling Control Board by or on behalf of the applicant for purposes of determining the qualifications of the applicant shall be sworn to or affirmed before a notary public in accordance with 8 M.R.S.A. §1017. If any form or document is signed by an attorney for the applicant, the signature shall certify that the attorney has read the forms or documents and that, to the best of his or her knowledge, information and belief, based on diligent inquiry, the contents of the form or documents so supplied are true.

To the extent, if any, that the information in the application or the supplemental information provided by the applicant becomes, outdated, inaccurate or incomplete, the applicant shall notify the Gambling Control Board in writing as soon as it is aware that the information is outdated, inaccurate or incomplete, and shall at that time supply the information necessary to make the application or supplementary information current, accurate and complete.

The applicant shall cooperate fully with the Gambling Control Board and the Maine State Police Gambling Control Unit in any background investigation of the applicant. The applicant, upon request of the Gambling Control Board or Maine State Police Gambling Control Unit, shall make any and all of its books and records available for inspection.

As soon as the Director has determined that the application is complete, it shall be forwarded to the Maine State Police Gambling Control Unit, which shall undertake and complete the background investigation of the applicant, its officers, directors, partners, owners and key employees. It will report its findings to the Board within six (6) months or such longer time as agreed by the applicant or as determined by the Board to be necessary for completion of the investigation due to circumstances documented by the Gambling Control Unit.

The following information must be attached for a SLOT MACHINE OPERATOR OR CASINO OPERATOR LICENSE:

Any applicant desiring to obtain a license to act as a Slot Machine or casino Operator shall apply on forms specified by the Board. In addition to any information required by statute, application forms may require the applicant to provide the following:

1. The applicant's legal name, form of entity, the names, addresses, employer identification or social security numbers (if applicable) and dates of birth (if applicable) of its directors, officers, partners, owners, key employees, and slot machine operators, casino operators, slot machine distributors, table game distributors, and gambling services vendors.
2. A description of the applicant's organizational structure.
3. With respect to any persons required by subparagraph (1) above that are not individuals, the names, addresses, social security numbers, and dates of birth of all individuals who are directors, officers, partners, owners, key employees, slot machine operators, casino operators, slot machine distributors, table game distributors, and gambling services vendors.
4. The percentages of shares of stock, if any, held by each person named in subparagraph (1) or subparagraph (3) above. The Director may, at his or her discretion, cause periodic reexamination of the percentage of shares held by persons subject to such disclosures under these regulations.
5. The names of the persons principally involved in the original creation of the applicant's enterprise.
6. Responses to questions designed to elicit information necessary for the Board to evaluate the qualification and suitability of the applicant pursuant to 8 M.R.S.A. Chapter 31, §1016, subsection 2.
7. Certified copies of the applicant's charter, articles of incorporation, partnership agreement, including amendments, restated articles, and other documents that explain the legal organization of the applicant.
8. The name, address, and date of birth of the record owner of the premises or the property upon which the premises are located or, if the applicant is not the sole owner of the premises or property, the information required by subparagraph (1) above with respect to all persons having an ownership interest in the premises or property and copies of all agreements pursuant to which the applicant occupies the premises or property, as well as copies of all documents relating to the premises or property including, without limitation, all mortgages, deeds of trust, bonds, debenture, pledges of corporate stock and voting trust agreements, but excluding easements; utility agreements; subdivision and plot plans; and, for the period prior to three years before the filing of the application, deeds in the chain of title and satisfied mortgages.
9. The information required by subparagraph (1) above as to any operator of any business conducted by such applicant and any other contractor (which is not a publicly traded entity) utilized by such applicant which has received compensation from such applicant in excess of \$50,000 for gambling-related services in any of the three (3) preceding fiscal years together with a copy of all agreements between such applicant and such operator or contractor and a statement of all compensation paid to such operator or contractor during said three-year period.
10. Copies of the applicant's audited financial statements for the preceding three (3) fiscal years and a copy of internally prepared financial statements for the current fiscal year as at the close of the most recent fiscal quarter.
11. Copies of the applicant's State and Federal tax returns for a period of three (3) fiscal years.
12. Copies of the declaration pages of all insurance policies insuring the applicant or the premises.
13. The information required by subparagraph (1) above as to the ten (10) largest unsecured creditors which are not publicly traded entities or accounting firms or legal firms of the applicant who are owed more than \$25,000 by the applicant for a period in excess of sixty days.
14. Any and all other information as the Director may require to determine the competence, honesty and integrity of the applicant as required by 8 M.R.S.A. Chapter 31.

15. The Slot Machine Operator shall certify by a sworn notarized statement that it has not entered and does not intend to enter into any joint venture, partnership or teaming agreement in order to fulfill its obligations in connection with the slot machine operations; that it is not acting as a distributor of products manufactured by another entity; and that it has not entered and does not intend to enter into any agreement whereby the proceeds generated by any agreement between the Slot Machine Operator and the Board would be shared with one or more other persons. Provided, however, that a slot machine operator may enter into a management agreement with a third-party, who is not licensed under these regulations, for the operation of the slot machines on the operator's premises provided that: (1) the proposed management agreement is provided to and approved by the Board, and (2) the third-party complies with all these regulations which apply to slot machine operators, including without limitation the licensure requirements.

The following information must be attached for a SLOT MACHINE OR TABLE GAMES DISTRIBUTOR LICENSE:

Any applicant desiring to obtain a license to act as a Slot Machine or Table Games Distributor shall apply on forms specified by the Board. In addition to any information required by statute, application forms may require the applicant to provide the following:

1. The applicant's legal name, form of entity, the names, addresses, employer identification or social security numbers (if applicable) and dates of birth (if applicable) of its directors, officers, partners, owners, key employees, and casino operators, slot machine operators, slot machine distributors, table game distributors, and gambling services vendors.
2. A description of the applicant's organizational structure.
3. With respect to any persons required by subparagraph 1 above that are not individuals, the names, addresses, social security numbers, and dates of birth of all individuals who are directors, officers, partners, owners, key employees, casino operators, slot machine operators, slot machine distributors, table game distributors, and gambling services vendors.
4. The percentages of shares of stocks, if any, held by each person named in subparagraph (1) or subparagraph (3) above. The Director may, at his or her discretion, cause periodic reexamination of the percentage of shares held by persons subject to such disclosures under these regulations.
5. The names of the persons principally involved in the original creation of the applicant's enterprise.
6. Responses to questions designed to elicit information necessary for the Board to evaluate the qualification and suitability of the applicant pursuant to 8 M.R.S.A. Chapter 31, §1016, subsection 2.
7. Certified copies of the applicant's charter, articles of incorporation, partnership agreement, including amendments, restated articles, and other documents that explain the legal organization of the applicant.
8. The information required by subparagraph (1) above as to any operator of any business conducted by such applicant and any other contractor (which is not a publicly traded entity) utilized by such applicant which has received compensation from such applicant in excess of \$50,000 for gambling-related services in any of the three (3) preceding fiscal years together with a copy of all agreements between such applicant and such operator or contractor and a statement of all compensation paid to such operator or contractor during said three-year period.
9. Copies of the applicant's audited financial statements for the preceding three (3) fiscal years and a copy of internally prepared financial statements for the current fiscal year as at the close of the most recent fiscal quarter.
10. Copies of the applicant's State and Federal tax returns for a period of three (3) fiscal years.
11. Copies of the declaration pages of all insurance policies insuring the applicant.
12. The information required by subparagraph (1) above as to the ten (10) largest unsecured creditors which are not publicly traded entities or accounting firms or legal firms of the applicant who are owed more than \$25,000 by the applicant for a period in excess of sixty days.
13. Any and all other information as the Director may require to determine the competence, honesty and integrity of the applicant as required by 8 M.R.S.A. Chapter 31.
14. Require the applicant to disclose the identity of all customers to whom it has furnished slot machines or other gambling equipment or technology within the three years immediately preceding the date of the application.
15. Require the applicant to list all persons with whom the applicant has a communications protocol agreement.
16. Provide a description of the means by which the applicant exercises security and financial control over the activities of service technicians in order to insure the integrity of slot machine distribution.
17. Require the applicant to disclose the names and addresses of individuals who have been authorized by the applicant to engage in dealings with the Board for purposes of representing the interests of the applicant.

The following information must be attached for a GAMBLING SERVICES VENDOR LICENSE:

Any applicant desiring to obtain a license to act as a Gambling Services Vendor shall apply on forms specified by the Board. In addition to any information required by statute, application forms may require the applicant to provide the following:

1. The applicant's legal name, form of entity, the names, addresses, employer identification or social security numbers (if applicable) and dates of birth (if applicable) of its directors, officers, partners, owners, and key employees, slot machine operations employees and casino operations employees.
2. A description of the applicant's organizational structure.
3. With respect to any persons named in subparagraph (1) that are not individuals, the names, addresses, social security numbers, and dates of birth of all individuals who are directors, officers, owners, partners, key employees, slot machine operations employees casino operations employees.
4. The percentages of shares of stock, if any, held by each person named in subparagraph (1) or subparagraph (3) above. The Director may, at his or her discretion, cause periodic reexamination of the percentage of shares held by persons subject to such disclosures under these regulations.
5. The names of all persons principally involved in the original creation of the applicant's enterprise.
6. Responses to questions designed to elicit information necessary for the Board to evaluate the qualification and suitability of the applicant pursuant to 8 M.R.S.A. Chapter 31, §1016, subsection 2.
7. Certified copies of the applicant's charter, articles of incorporation, partnership agreement, and other documents that document or explain the legal organization of the applicant.
8. The information required by subparagraph (1) above as to any operator of any business conducted by such applicant and any other contractor (which is not a publicly traded entity) utilized by such applicant which has received compensation from such applicant in excess of \$50,000 for gambling-related services in any of the three (3) preceding fiscal years together with a copy of all agreements between such applicant and such operator or contractor and a statement of all compensation paid to such operator or contractor during said three-year period.
9. Copies of the applicant's audited financial statements for the preceding three (3) fiscal years and a copy of internally prepared financial statements for the current fiscal year as at the close of the most recent fiscal quarter.
10. Copies of the applicant's State and Federal tax returns for a period of three (3) fiscal years.
11. Copies of the declaration pages of all insurance policies insuring the applicant or the premises.
12. The information required by subparagraph (1) above as to the ten (10) largest unsecured creditors, which are not publicly traded entities or accounting firms or legal firms of the applicant who are owed more than \$25,000 by the applicant for a period in excess of sixty days.
13. Any and all other information as the Director may require to determine the competence, honesty and integrity of the applicant as required by 8 M.R.S.A. Chapter 31.

Also include the following items:

1. All applicable information requested on pages 1 through 22 of the application.
2. Trade Name Registration
3. Certificate of authority to do business in the state of Maine, if incorporated outside Maine
4. Articles of Organization, including amendments
5. Bylaws
6. Organizational minutes and/or other corporate records reflecting ownership and election of officers.
7. Partnership Agreement, including amendments
8. Trust Agreement, including amendments
9. If a corporation, biennial reports and SEC filings, if any, for past 3 years.
10. If partnership, list of the amount and date of each capital contribution of any partner to the applicant
11. Organizational chart listing key applicants and positions being held for gaming operations, along with their duties and responsibilities.

4. APPLICATIONS AND QUESTIONNAIRES FOR AFFILIATED PERSONS ATTACHED

Submit Key Executive/Employee Applications for persons who are employed by the applicant and who are “key executives” as defined by 8 M.R.S.A. § 1001(27). Submit Background Questionnaires as applicable, for all persons identified in the “Ownership Structure” portion of this Application. The Maine Gambling Control Board and the Maine State Police may require that additional persons submit applications and questionnaires.

5. APPLICATION FEES AND BACKGROUND INVESTIGATION DEPOSIT

Submit appropriate license, application, and background fees.

- Slot Machine Distributor: \$200,000 nonrefundable license fee.
- Slot Machine Operator: \$200,000 nonrefundable license fee.
- Casino Operator: \$225,000 nonrefundable license fee.
- Table Game Distributor: \$5,000 nonrefundable license fee.
- Gambling Services Vendor: \$2,000 nonrefundable license fee.
- *Background Investigation Deposit: \$200 nonrefundable fee.

6. SUBMIT APPLICATION(S)

Mail or deliver application to: **Maine Gambling Control Board
Department of Public Safety
Central Maine Commerce Center
87 State House Station
45 Commerce Drive, Suite 3
Augusta, Maine 04333-0087**

FOR AGENCY USE ONLY

- Check # _____
 Money Order # _____

DATE RECEIVED _____

**Maine Gambling Control Board
 BUSINESS ENTITY APPLICATION**

<u>LICENSE TYPE</u>	<u>LICENSE FEE</u>	<u>TOTAL</u>
<input type="checkbox"/> Gambling Services Vendor	\$2,000	_____
<input type="checkbox"/> Slot Machine Distributor	\$200,000	_____
<input type="checkbox"/> Slot Machine Operator	\$200,000	_____
<input type="checkbox"/> Background Investigation Deposit	\$200	_____
<input type="checkbox"/> Table Game Distributor	\$5,000	_____
<input type="checkbox"/> Casino Operator	\$225,000	_____

Applicants Name		Control Number (Assigned by Gambling Control Board)	
Doing Business as(DBA) & Trade name		E-mail Address	
Street Address of Gaming Business (Required for Operator applicants)			Business Phone Number ()
City	State	Zip	Business FAX Number ()
Mailing Address, if different from Street Address (city, state, zip)			
On a separate sheet, list all principal places of business for the past 15 years if different from above.			
Primary Contact Person for Business		Title	FAX Number ()
Type of Business Structure			
<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Limited Liability Co <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Publicly Traded Corp <input type="checkbox"/> Trust <input type="checkbox"/> Other			
State of incorporation or creation of business entity			Date
Date of qualification to conduct business in Maine (IF CORPORATION, PROVIDE CERTIFICATE OF AUTHORITY OR EQUIVALENT)			
If a corporation, list all states where corporation is authorized to conduct business			
List all names used by the business entity (other than above)			
List all names used by the business entity (other than above)			
Attach copies of all articles of incorporation, bylaws, articles of organization, or a true copy of any partnership or trust agreement, including any and all amendments.			
If a corporation, attach copies of biennial reports and SEC filings, if any, for past three years.			
Premises Information (For Operators)			
Total Square Footage of the Building (Gross Building Area)		Total Square Footage to Be Licensed for Gaming	Anticipated # of Slot Machines
			Anticipated # of Table Games
Attach 8-1/2" x 11" drawing to scale of the building and each floor in which gaming will be conducted. Also attach a copy of your lease, rental agreement or other proof of legal possession of the premises.			

OWNERSHIP STRUCTURE

Please list the individual applicant and each key employee, officer, director, partner, shareholder, creditor, associate or owner of any legal or beneficial interest in the application, whether they have ownership interest or not. If an entity (corporation, partnership, LLC, etc.) has interest, list all persons affiliated with such entity; their ownership in the entity, and their effective ownership in the license. List all parent, holding or other intermediary business interests. A **Key Executive-Employee Application or Background Questionnaire form** must be submitted for each person with a direct or indirect interest in the company, including officers, directors, equity security holders or share holders of 10% or more, partners, general partners, limited partners, trustees, beneficiaries, key executives and any other individuals who exert significant influence in the company. If a publicly traded corporation, submit recent shareholder list from your transfer agent for all shares of common and preferred stock. Make additional copies of this page, if necessary.

Name	Title	SSN/FEIN*	Date of Birth	Application Submitted <input type="checkbox"/> Yes <input type="checkbox"/> No
Address (city, state, zip)			Phone ()	
Business Affiliated With (Parent business or sub-entity)		Own. % in Business Affiliated With	Effective Own. % in Applicant	
Name	Title	SSN/FEIN*	Date of Birth	Application Submitted <input type="checkbox"/> Yes <input type="checkbox"/> No
Address (city, state, zip)			Phone ()	
Business Affiliated With (Parent business or sub-entity)		Own. % in Business Affiliated With	Effective Own. % in Applicant	
Name	Title	SSN/FEIN*	Date of Birth	Application Submitted <input type="checkbox"/> Yes <input type="checkbox"/> No
Address (city, state, zip)			Phone ()	
Business Affiliated With (Parent business or sub-entity)		Own. % in Business Affiliated With	Effective Own. % in Applicant	
Name	Title	SSN/FEIN*	Date of Birth	Application Submitted <input type="checkbox"/> Yes <input type="checkbox"/> No
Address (city, state, zip)			Phone ()	
Business Affiliated With (Parent business or sub-entity)		Own. % in Business Affiliated With	Effective Own. % in Applicant	
Name	Title	SSN/FEIN*	Date of Birth	Application Submitted <input type="checkbox"/> Yes <input type="checkbox"/> No
Address (city, state, zip)			Phone ()	
Business Affiliated With (Parent business or sub-entity)		Own. % in Business Affiliated With	Effective Own. % in Applicant	
Name	Title	SSN/FEIN*	Date of Birth	Application Submitted <input type="checkbox"/> Yes <input type="checkbox"/> No
Address (city, state, zip)			Phone ()	
Business Affiliated With (Parent business or sub-entity)		Own. % in Business Affiliated With	Effective Own. % in Applicant	
Name	Title	SSN/FEIN*	Date of Birth	Application Submitted <input type="checkbox"/> Yes <input type="checkbox"/> No
Address (city, state, zip)			Phone ()	
Business Affiliated With (Parent business or sub-entity)		Own. % in Business Affiliated With	Effective Own. % in Applicant	
Total Shares Authorized	Total Shares Outstanding		Type of Shares Issued <input type="checkbox"/> Preferred <input type="checkbox"/> Common	
Are there any outstanding options or warrants? <input type="checkbox"/> YES* <input type="checkbox"/> NO *If YES, attach a list of persons with outstanding options and warrants				
Are there any other persons, other than those listed in the ownership structure, including but not limited to suppliers, lenders and landlords, who will receive, directly or indirectly, any compensation or rents based upon a percentage or share of gross proceeds or income of the gaming venture or who will enter into a contract or contracts with the applicant to manage its gaming operations or to conduct business in the applicant's gaming establishment or business operation? <input type="checkbox"/> YES <input type="checkbox"/> NO * If YES, attach list of person(s) and submit Key Executive/Employee Application form(s) for each and attach copies of all agreements and/or contracts.				

*The following statement is made pursuant to the Privacy Act of 1974, §7(b): Disclosure of your social security number is mandatory if the individual is applying for licensure. Solicitation of your social security number is solely for tax administration purposes pursuant to 36 M.R.S.A. §175 as authorized by the Tax Reform Act of 1976 (46 U.S.C. §405 (c)(2)(C)(i)) and for child support enforcement purposes pursuant to 42 U.S.C. §666 (a)(13)(A) and 19-A M.R.S.A. §2104, 2201. Your social security number may be disclosed to the State Tax Assessor or an authorized agent for use in determining filing obligations and tax liability pursuant to Title 36 of the Maine Revised Statutes and / or to the Department of Human Services, Division of Support Enforcement and Recovery for

use in child support enforcement procedures. No further use will be made of your social security number without your consent. It shall be treated as confidential tax information pursuant to 36 M.R.S.A. § 191 and confidential support enforcement information pursuant to 19-A M.R.S.A. §2152.

OWNERSHIP STRUCTURE EXAMPLE

GCL CASINO CORP. —A privately held company (Applicant)

<u>Affiliated Person</u>	<u>Title</u>	<u>Ownership</u>	<u>Effective Own.</u>
Martin Stone	President	50%	50%
George Peatree	Shareholder	20%	20%
Ava Cinchbloom	Director	0%	0%
MPA Gaming Inc.	Shareholder	30%	30%
Paul Dudley	CEO	(50%)	15%
STK Enterprises	Shareholder	(50%)	15%
Rhonda Rainham	Owner	(100%)	15%

Name MARTIN STONE	Title PRESIDENT	SSN/FEIN* 635-15-6775	Date of Birth 05/15/52	Application Submitted <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Address (city, state, zip) 23 HOLMES LANE, SACRAMENTO, CA 95656			Phone (966) 555-1619	

Business Affiliated With (Parent business or sub-entity) GCL CASINO CORP.	Own. % in Business Affiliated With 50.0%	Effective Own. % in Applicant 50.0%
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Name GEORGE PEATREE	Title SHAREHOLDER	SSN/FEIN* 556-58-1238	Date of Birth 06/06/61	Application Submitted <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Address (city, state, zip) 1236 PEPPER AVE., DENVER, CO 82563			Phone (385) 555-2265	

Business Affiliated With (Parent business or sub-entity) GCL CASINO CORP.	Own. % in Business Affiliated With 20.0%	Effective Own. % in Applicant 20.0%
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Name AVA CINCHBLOOM R	Title DIRECT OR	SSN/FEIN* 455-66-1277	Date of Birth 04/14/52	Application Submitted <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Address (city, state, zip) 485 TROPICANA AVE., BOULDER, CO 85111			Phone (782) 555-4563	

Business Affiliated With (Parent business or sub-entity) GCL CASINO CORP.	Own. % in Business Affiliated With 0.0%	Effective Own. % in Applicant 0.0%
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Name MPA GAMING INC.	Title SHAREHOLDER	SSN/FEIN* 98-8854542	Date of Birth	Application Submitted <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Address (city, state, zip) 2560 BROADWAY AVE., AUGUSTA, ME 56001			Phone (965) 555-4569	

Business Affiliated With (Parent business or sub-entity) GCL CASINO CORP.	Own. % in Business Affiliated With 30.0%	Effective Own. % in Applicant 30.0%
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Name PAUL DUDLEY	Title CEO	SSN/FEIN* 005-85-8545	Date of Birth 05/22/45	Application Submitted <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Address (city, state, zip) 1853 BLUEBIRD TERRACE, PORTLAND, ME 04103			Phone (546) 555-1560	

Business Affiliated With (Parent business or sub-entity) MPA GAMING INC.	Own. % in Business Affiliated With 50.0%	Effective Own. % in Applicant 15.0%
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Name STK ENTERPRISES	Title SHAREHOLDER	SSN/FEIN* 88-999999	Date of Birth	Application Submitted <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Address (city, state, zip) 2709 INDUSTRIAL PARK ROAD, AUGUSTA, ME 85267			Phone (585) 555-2636	

Business Affiliated With (Parent business or sub-entity) MPA GAMING INC.	Own. % in Business Affiliated With 50.0%	Effective Own. % in Applicant 15.0%
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Name RHONDA RAINHAM	Title OWNER	SSN/FEIN* 787-65-4321	Date of Birth 06/21/52	Application Submitted <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Address (city, state, zip) 4700 MAIN ST., BANGOR, ME 52876			Phone (589) 555-1856	

Business Affiliated With (Parent business or sub-entity) STK ENTERPRISES	Own. % in Business Affiliated With 100.0%	Effective Own. % in Applicant 15.0%
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LICENSING HISTORY

1. Has the applicant, the applicant's parent company or any other intermediary affiliate of applicant ever applied for a gaming license in this or any other jurisdiction, foreign or domestic, whether or not the license was ever issued? If YES, provide details on a separate sheet, including jurisdiction, type of license, license number, and dates license held or applied for. YES NO
2. Has the applicant, the applicant's parent company, any other intermediary affiliate of applicant, or any of the persons identified in the ownership structure ever been denied a gaming license, withdrawn a gaming license or had any disciplinary action taken against any gaming license that they have held in this or any other jurisdiction, foreign or domestic? If YES, provide details on a separate sheet, including jurisdiction, type of action, and date of action. YES NO
3. Is the applicant, the applicant's parent company or any other intermediary affiliate of applicant in good corporate standing in Maine and in all other states where it is authorized to transact business? If YES, provide jurisdictions on a separate sheet. If NO, provide details on a separate sheet, including jurisdiction, type of action, and date of action. YES NO
4. Has the applicant, the applicant's parent company or any other intermediary affiliate of applicant ever been charged with, or convicted of, any illegal gaming activity in Maine or any other jurisdiction? If YES, provide details on a separate sheet, including jurisdiction, type of action, and date of action. YES NO

FINANCIAL HISTORY

1. Is the applicant, the applicant's parent company or any other intermediary affiliate of applicant delinquent in the payment of any judgments or tax liabilities due to any governmental agency anywhere? If YES, provide details on a separate sheet and attach any documents to prove settlement or resolution of the delinquency. YES NO
2. Has the applicant, the applicant's parent company or any other intermediary affiliate of applicant ever held a financial interest in a gambling venture, including but not limited to, a racetrack, dog track, racehorse or dog, lottery, casino, bookmaking operation, internet casino, card room, bingo parlor or pull tabs, whether or not a license to hold such interest was applied for or received? If YES, provide details on a separate sheet. YES NO
3. Has the applicant, the applicant's parent company or any other intermediary affiliate of applicant ever filed a bankruptcy petition, had such a petition filed against it, or had a receiver, fiscal agent, trustee, reorganization trustee or similar person appointed for it? If YES, provide details on a separate sheet and attach any documents from the bankruptcy court. YES NO
4. Has a complaint, judgment, consent decree, settlement or other disposition related to a violation of federal, state or similar foreign antitrust, trade or security law or regulation ever been filed or entered against the applicant, the applicant's parent company or any other intermediary affiliate of applicant? If YES, provide details on a separate sheet and attach any documents to prove the settlement of any of these issues. Include any items currently under formal dispute or legal appeal. YES NO
5. Does the applicant, the applicant's parent company or any other intermediary affiliate of applicant now own, has it ever owned, or does it otherwise derive a benefit from, assets held outside the United States, whether held in the business' name or another name, on its behalf or for another entity, or through other business entities, or in trust, or in any other fashion or status? If YES, provide details on a separate sheet. YES NO
6. Is the applicant, the applicant's parent company or any other intermediary affiliate of applicant currently a party to, or has it ever been a party to, in any capacity, any business trust instrument? If YES, provide details on a separate sheet. YES NO
7. Has the applicant, the applicant's parent company or any other intermediary affiliate of applicant ever been a party to a lawsuit, either as a plaintiff or defendant, complainant or respondent, or in any other fashion, in this or any other country? If YES, provide details on a separate sheet and attach any documents to prove the settlement of any of these issues. Include any items currently under formal dispute or legal appeal. YES NO
8. Has the applicant, the applicant's parent company or any other intermediary affiliate of applicant filed a business tax return in the past three years? If YES, attach all business tax returns filed in the past three years. YES NO

FINANCIAL HISTORY (Continued)

9. Is the business a prospective business or has it recently begun operations? If so, submit an estimated beginning balance sheet (proforma) and a statement of amount(s) and source(s) of funding for the business and specific documentation to support the declaration. YES NO
10. Is the business a party to a lease? If YES, attach copies of all leases to which the business is a party YES NO
11. Does the applicant have a compliance committee or compliance officer? If YES, attach a copy of compliance committee minutes or compliance officer reports from the past 12 months. YES NO
12. Has any interest or share in the profits from gaming been pledged or hypothecated as security for a debt or deposited as a security for the performance of an act or to secure the performance of a contract? If YES, provide details on a separate sheet. YES NO

FINANCIAL HISTORY AND OTHER ATTACHMENTS

1. Attach a list detailing the operating and investment accounts for this business, including financial institution name, address, telephone number, and account number for each account.
2. Attach a list detailing each outstanding loan and financial obligation obtained for use in this business, including creditor name, address, phone number, loan number, loan amount, loan terms, date acquired, and date due.
3. Attach balance sheets and profit and loss statements, certified by independent certified public accountant(s) covering the last three years for the applicant, the applicant's parent company and any intermediary affiliates of applicant.
4. If the business entity has been in business for less than three years, attach balance sheets and profit and loss statements from the time of commencement of business operations and projected for three years from the time of commencement of business operations.
5. Attach a list of remuneration to persons other than directors, officers, and key executives, exceeding \$50,000 per year.
6. Attach a description of any bonus or profit-sharing arrangements within your organization.
7. Supply all existing contracts with business in Maine and any contracts over \$500,000 outside Maine. If there is no written contract, and then indicate the business arrangement showing business dealing, phone number, and address.
8. Identify, by complete name and date of birth, the employees who will be submitting license application pursuant to Title 8 M.R.S.A. §1015.
9. Identify, by job classification the employees for whom you will seek waiver of licensure pursuant to Title 8 M.R.S.A. §1015(3).

ANY CHANGES IN OWNERSHIP OR BUSINESS STRUCTURE, MUST BE DISCLOSED TO THE BOARD

Person who maintains applicant's business records	Title
Address	Phone Number
Person who prepares applicant's tax returns, government forms & reports	Title
Address	Phone Number
Location of financial books and records for applicant's business	
Applicant's Printed Name (Last name, First Name, Middle Name)	
Signature of Applicant	Date

STATEMENT OF PRE-OPENING CASH

Business Entity Application

A. Funds Available Prior to Opening:	Totals
1. Current investments (attach schedule providing detail as to who invested the money and what interest in the firm or entity they received for their investment.)	\$
2. Current loans from lending institutions (attach schedule identifying the institution date of each loan, the terms of each loan, and original and current balance).	\$
3. Current loans from individuals and other business entities (attach schedule identifying the individual or business, date of each loan, the terms of each loan, and original and current balance).	\$
4. Anticipated investments (attach schedule providing detail as to who will invest the money and what interest in the firm or entity they will receive for their investment).	\$
5. Anticipated loans from lending institutions (attach schedule certifying the institution and terms of the loan).	\$
6. Anticipated loans from individuals and other business entities (attach schedule identifying the individuals and other business entities and the terms of each loan).	\$
Total Funds Available Prior to Opening:	\$
B. Expenditure or Disposition of Available Funds Prior to Opening:	
1. Prepaid Gaming Taxes and Licenses:	
a. Federal Government Tax & Fees	\$
b. Application Fees	\$
c. Background Investigation Fee	\$
d. Other (describe)	\$
Total Prepaid Gaming Taxes and Licensing Related Fees	\$
2. Other License Fees (Attach Schedule)	\$
3. Incurred Expenditures for:	
a. Building, Including Construction and Repair (Attach Schedule)	\$
b. Equipment (Attach Schedule)	\$
c. Supplies (Attach Schedule)	\$
d. Attach all Other Pre-Opening Expenditures (Salaries, Advertising, Deposits, Etc.) (Attach Schedule)	\$
4. Anticipated Expenditures for:	
a. Building, Including Construction and Repair (Attach Schedule)	\$
b. Equipment (Attach Schedule)	\$
c. Supplies (Attach Schedule)	\$
Total Pre-Opening Cash Used	\$
C. Cash Available for Operation (A Minus B)	\$
Show in What Form This Cash Will Be:	
a. Bank	\$
b. Other Cash Register Funds	\$
c. Other (Describe)	\$
Total Opening Cash	\$
Printed Full Legal Name of Agent (Last Name, First Name, Middle Name)	
Signature of Authorized Agent	Date

AFFIRMATION & CONSENT

Name of Authorized Agent

I, _____, as authorized agent of the Applicant, state the following:

- A. That the statements made in the application and any documents made a part of the application are true and correct:
- B. That the applicant understands that the information provided on application forms required by the Maine Gambling Control Board is used by the Board, along with other information, in judging the applicant's suitability and that this information may be cause for refusal to issue a license: and
- C. That the applicant understands that knowingly making a false statement in the application, during the application process or in a document made a part of the application is among the grounds for refusal to issue a license or other disciplinary action, up to and including revocation or suspension of a license.

I understand that I/the Applicant may be subject to criminal prosecution for making false statements on my application, based on the following:

- A. Making a false statement under oath or affirmation constitutes false swearing in violation of 17-A M.R.S.A. § 452 (Class D) provided that I do not believe the statement to be true and that I make the statement with the intent to mislead a public servant performing his/her official duties.
- B. Making a written false statement that I do not believe to be true on my application constitutes unsworn falsification in violation of 17-A M.R.S.A. § 453 (Class D).
- C. Making a false written statement that I do not believe to be true with the intent to deceive a public servant in the performance of his/her official duties constitutes unsworn falsification in violation of 17-A M.R.S.A. § 453 (Class D).

I further consent to any background investigation necessary to determine the present and continuing suitability of the Applicant and that this consent continues as long as the Applicant holds a Maine gaming license or certification, and for 90 days following the expiration or surrender of such gaming license or certification. I understand that further information may be requested of the Applicant in regard to this application, and that the Applicant agrees to supply such information upon request.

I understand that the information provided in this form along with other information will be used by the Board to judge my suitability and that this information may be cause for the refusal to issue a license.

Applicant's Business name	Trade Name (DBA)
Printed Full Legal Name of Agent (Last, First, Middle)	Title
Signature	Date

State of _____)

County of _____)

Subscribed and sworn to before me by _____ this ____ day of _____, 20____.

My commission expires: _____

Signature (Notary Public or Justice of Peace)

INVESTIGATION AUTHORIZATION AUTHORIZATION TO RELEASE INFORMATION

Applicant's Name

Company Name

I _____ of _____, hereby authorize the Maine Gambling Control Board, the Maine State Police Gambling Control Unit, its agents, or employees to conduct a complete investigation into my personal background, using whatever legal means they deem appropriate.

I understand that by submitting this application, a criminal history check will be performed.

The Board reserves the right to investigate all relevant information and facts to its satisfaction. I understand that the Board may conduct a complete and comprehensive investigation to determine the accuracy of all information gathered. However, the State of Maine, the Board, and other agents or employees of the State of Maine shall not be held liable for the receipt, use, or dissemination of inaccurate information from any source.

I, on behalf of the applicant, its legal representatives and assigns, consent to the disclosure of information on the applicant by the board to any law enforcement or any regulatory agency of this or any other state, the government of the United States, any foreign country, or any Indian Tribe.

I, on behalf of the applicant, its legal representatives and assigns understand information could include any information contained within my application, within any financial or personnel record, and information obtained from any source, or any information maintained by the Board, unless otherwise designated confidential by law.

I, on behalf of the applicant, its legal representatives and assigns, hereby release, waive, discharge, and agree to hold harmless, and otherwise waive liability as to the State of Maine, the Board, and other agents or employees of the State of Maine for any damages resulting from any use, disclosure, or publication in any manner, other than a willfully unlawful disclosure or publication of any material or information acquired during inquiries, investigations, or hearings, and hereby authorize the lawful use, disclosure, or publication of this material or information.

Applicant's Business name	Trade Name (DBA)
Printed Full Legal Name of Agent (First, Middle, Last)	Title
Signature	Date

State of _____)

County of _____)

Subscribed and sworn to before me by _____ this ____ day of _____, 20____.

My commission expires: _____

Signature (Notary Public or Justice of Peace)

APPLICANT'S REQUEST TO RELEASE INFORMATION

Applicant's Name

ON BEHALF OF THE APPLICANT: _____

Entity to Which Request is Addressed

TO: _____

1. I hereby authorize and request full disclosure and release of any and all information, materials, and documents concerning the applicant requested by the Maine Gambling Control Board, the Maine State Police Gambling Control Unit, its agents, or employees, whether the information, materials, and documents are of a public, private, or confidential nature and whether the information, materials, and documents would otherwise be protected from disclosure by any constitutional, statutory or common law privilege.
2. I understand that my application will result in a financial records check. I authorize the person named above to release to the Board, the Maine State Police Gambling Control Unit, its agents, or employees, a complete and accurate record of the applicant's financial transactions, including but not limited to internal banking memoranda, past and present loan applications, checking account records, savings deposit records, safe-deposit box records, securities transactions, and any other documents relating to the applicant's personal or business financial records in whatever form and wherever located.
3. I authorize the Board, the Maine State Police Gambling Control Unit, its agents, or employees to determine the person or entity to which this request is to be presented and to insert that person or entity's name in the appropriate location in this request.
4. I understand that the Board, the Maine State Police Gambling Control Unit, its agents, or employees will conduct a complete and comprehensive investigation to determine the validity of all information gathered. The Board, the State of Maine, and the agents and employees of either, will not be held liable for inaccurate information.
5. If this request is not sufficient to obtain access to certain records, I understand that I or another authorized representative of the applicant may be asked to sign another appropriate authorization or release and that any failure to do so may be taken into consideration by the Board, its agents, or employees in reviewing the application.
6. I understand that I may revoke this request in writing at any time and that the Board, its agents, or employees may take the revocation into consideration in reviewing the application.
7. This request is valid for a period not to exceed 18 months from the date of execution.
8. I, for the applicant and its agents, administrators, successors, and assigns, hereby release the providers of the information collected pursuant to this request, and their agents and employees, from any and all liability arising out of or by reason of complying with this request.
9. A photocopy of this request will be considered as valid and effective as the original.

Applicant's Business name	Trade Name (DBA)
Printed Full Legal Name of Agent(First, Middle, Last)	Title
Signature	Date

ADDITIONAL REQUIREMENTS FOR SLOT MACHINE OPERATOR LICENSE APPLICANTS

1. Business Plan

The applicant shall submit with the application a proposed business plan for the conduct of slot machine operations. Such plan shall be submitted in conformity with a separate form specified and supplied by the Board. The plan shall include, without limitation, all of the following items, in the order shown below.

- An 8-1/2" x 11" drawing to scale of the proposed slot machine facility, to include: a floor plan of the area to be used for slot machine operations;
- An advertising and marketing plan;
- The proposed placement of slot machines on the premises;
- The kind, type and number of slot machines proposed, provided however that the name of the manufacturer(s) of such machines shall not be included;
- Administrative, accounting and internal control procedures, including monetary control procedures;
- A security plan;
- A staffing plan for slot machine operations;
- Detailed description of the administrative, accounting and tax compliance procedures;
- A method to be utilized for prize payments;
- The business plan shall provide the details of any progressive jackpot games;
- The specification of the kind, type and number of the slot machines in the business plans shall make clear whether or not the devices are video versus spinning reel; coin-in/coin-out versus coin-in/coin-out, etc.
- The business plan shall also propose the generic games to be played on the devices (e.g., video poker, keno, bingo, blackjack, line-up games).
- The business plan shall provide for payment for payout from slot machines such that the payouts have a minimum average daily aggregate payback percentage as required by the appropriate statute.
- The written internal control procedures must include, at a minimum, all of the following elements, in the order shown below:
 - Organizational chart depicting appropriate segregation of functions and responsibilities
 - Description of the duties and responsibilities of each position shown on the organizational chart
 - Written statement signed by the licensee's chief financial officer and either the licensee's chief executive officer or a licensed owner attesting that the system satisfies statutory requirements
 - If the written system is submitted by an applicant, a letter from an independent certified public accountant stating that the applicant's written system has been reviewed by the accountant and complies with statutory requirements.
 - Details of escrow account(s)
 - Details of depository account for payment of gaming taxes
 - Gaming machine payment provisions including copies of all contracts to purchase gaming machines
 - Business agreement with the municipality where the slot machines will be located.

2. COMMERCIAL TRACK LICENSE

All of the following documents must be submitted in the order shown below.

- Current copy of license to operate a commercial track at which you intend to operate slot machines
- Schedule of live race days and live races during licensed race meets for the previous and current calendar years

- 3. Pursuant to 8 M.R.S.A. § 1016 (1) (D),** outline the facts that demonstrate that you have sufficient knowledge and experience in the business of operating slot machines to effectively operate the slot machine facilities in accordance with 8 M.R.S.A. Chapter 31.

**ADDITIONAL INFORMATION REQUIRED FOR SLOT OPERATOR LICENSE
RELATING TO POSSESSION OF LICENSED PREMISES**

Provide the following information if the applicant leases all or part of the proposed licensed premises. Use additional sheets, if necessary.

Name, address and brief statement of the nature of business of the lessor of the premises.

Brief description of the material terms of the lease. Please attach a copy of the lease.

Statement describing any business relationships between the applicant and the lessor other than the lease.

If an applicant owns all or part of the premises on which gaming is proposed, fully disclose below complete information about the interest held by any other person, including an interest held under any mortgage, deed of trust, bond or any other instrument. Please attach a copy of the deed of ownership.

ADDITIONAL REQUIREMENTS FOR CASINO OPERATOR LICENSE APPLICANTS

1. Business Plan

The applicant shall submit with the application a proposed business plan for the conduct of casino operations. Such plan shall be submitted in conformity with a separate form specified and supplied by the Board. The plan shall include, without limitation, all of the following items, in the order shown below.

- An 8-1/2" x 11" drawing to scale of the proposed casino, to include: a floor plan of the area to be used for slot machine operations, table games and count room;
- An advertising and marketing plan;
- The proposed placement of slot machines and table games on the premises;
- The kind, type and number of slot machines and table games proposed, provided however that the name of the manufacturer(s) of such machines or table games shall not be included;
- Administrative, accounting and internal control procedures, including monetary control procedures and physical security of drop boxes or other devices for table games;
- A security plan;
- A staffing plan for slot machine and table game operations;
- Detailed description of the administrative, accounting and tax compliance procedures;
- A method to be utilized for prize payments;
- The business plan shall provide the details of any progressive jackpot games;
- The specification of the kind, type and number of the slot machines in the business plans shall make clear whether or not the devices are video versus spinning reel; coin-in/coin-out versus coin-in/coin-out, etc.
- The business plan shall also propose the generic games to be played on the slot machines (e.g., video poker, keno, bingo, blackjack, line-up games), and shall also propose the generic table games (e.g., black jack, poker, dice, craps, etc.).
- The business plan shall provide for payment for payout from slot machines such that the payouts have a minimum average daily aggregate payback percentage as required by the appropriate statute.
- The written internal control procedures must include, at a minimum, all of the following elements
 - Organizational chart depicting appropriate segregation of functions and responsibilities
 - Description of the duties and responsibilities of each position shown on the organizational chart
 - For Slot Machines: Written statement signed by the licensee's chief financial officer and either the licensee's chief executive officer or a licensed owner attesting that the system satisfies statutory requirements
 - For Slot Machines: If the written system is submitted by an applicant, a letter from an independent certified public accountant stating that the applicant's written system has been reviewed by the accountant and complies with statutory requirements.
 - Details of escrow account(s)
 - Details of depository account for payment of gaming taxes
 - Gaming machine payment provisions including copies of all contracts to purchase gaming machines.
 - A written certification that all table games will not have any means of manipulation that affect the random probabilities of winning a game.
 - For Table Games: A description of its system of internal procedures and administrative and accounting controls for table games operations accompanied by a certification by its chief

financial officer or equivalent officer that the submitted procedures provide adequate and effective controls, establish a consistent overall system of internal procedures and administrative and accounting controls and conform to generally accepted accounting principles. This description shall be submitted at least 30 business days before table game operations are to commence unless otherwise directed by the board.

2. Pursuant to 8 M.R.S.A. § 1016 (1) (D), outline the facts that demonstrate that you have sufficient knowledge and experience in the business of operating a casino to effectively operate the casino in accordance with 8 M.R.S.A. Chapter 31.

3. Eligibility Criteria

The applicant shall submit with the application confirmation of each of the following criteria:

- A) The casino is located on a parcel of land that is no less than 50 acres in size and located not more than:
1. Thirty miles from a Level I or Level II trauma center verified as such by the American College of Surgeons or successor organization;
 2. Fifteen miles from the main office of a county sheriff;
 3. Twenty-five miles from the main office of a state police field troop;
 4. Thirty miles from an interchange of the interstate highway system;
 5. Ten miles from a fire station;
 6. Ten miles from a facility at which harness racing was conducted pursuant to a license from the State Harness Racing Commission for the 2009 racing year; and,
 7. One-half mile from a state highway as defined in Title 23, section 1903, subsection 15.

In addition, the applicant shall provide information to confirm each of the following criteria:

- a. Ownership of a facility that is within 10 miles of the proposed casino at which harness racing was conducted pursuant to a license from the State Harness Racing Commission for the 2009 racing year; and,
- b. The casino is not located within 100 miles of a licensed casino or slot machine facility.
- c. The casino is approved by voters of the municipality in which the casino is located by a referendum election or by a vote of the municipal officers an any time after October 1, 2009 and on or before December 31, 2011.
- d. The slot machines and table games are located and operated in the casino.

For purposes of these criteria, distances are determined by measuring along the most commonly used roadway, as determined by the Department of Transportation.

ADDITIONAL INFORMATION REQUIRED FOR CASINO OPERATOR LICENSE

RELATING TO POSSESSION OF LICENSED PREMISES

Provide the following information if the applicant leases all or part of the proposed licensed premises. Use additional sheets, if necessary.

Name, address and brief statement of the nature of business of the lessor of the premises.

Brief description of the material terms of the lease. Please attach a copy of the lease.

Statement describing any business relationships between the applicant and the lessor other than the lease.

If an applicant owns all or part of the premises on which gaming is proposed, fully disclose below complete information about the interest held by any other person, including an interest held under any mortgage, deed of trust, bond or any other instrument. Please attach a copy of the deed of ownership.