

Michigan Gaming Control Board

Cadillac Place 3062 W. Grand Blvd., Suite L-700, Detroit Michigan 48202-6062



OCCUPATIONAL LICENSE APPLICATION RENEWAL

REPORT SUSPICIOUS OR ILLEGAL GAMBLING RELATED ACTIVITY ANONYMOUSLY

TIP LINE:
1-888-314-2682

SUBMIT A TIP:
WWW.MICHIGAN.GOV/MGCB

OCCUPATIONAL LICENSE BIENNIAL RENEWAL

This form is authorized under Public Act 69 of 1997, the Michigan Gaming Control and Revenue Act.

For the purposes of this renewal application, the term "licensee" means the person applying for the renewal of the occupational license.

The licensee shall provide all information, documents, materials, and certifications at the licensee's sole expense. The licensee will be billed for any additional cost incurred by the Michigan Gaming Control Board (Board) during the course of any background investigation. Failure to provide information could result in rejection of or delay in the processing of this application. The Board, in its discretion, may hereafter require the licensee to furnish additional information or complete and submit additional forms.

The licensee should respond to the questions contained herein to the best of his/her knowledge. Any misrepresentation or omission is grounds for denial of the application.

A licensee may claim any privilege afforded by the Constitution or laws of the United States or of the State of Michigan in refusing to answer questions or provide information requested by the Board. However, a claim of privilege with respect to any testimony or evidence pertaining to eligibility, qualifications, or suitability of a licensee to be granted or hold a license under the act and rules may constitute cause for denial, suspension, revocation, or restriction of the license.

INSTRUCTION

1. Complete the application form. Answer all questions. If a question is not applicable, indicate **NA**.
2. If you need more space to answer any of the questions attach additional pages as necessary.
3. **A notary public must certify your signature, on the verification page.**
4. The license renewal fees are as follows: \$250 for Level 1, \$100 for Level 2, \$50 for Level 3. Payment may be made by cashier's check, certified check, company check, or money order made payable to the "State of Michigan". **DO NOT SEND CASH**. All fees are non-refundable.
5. If you are currently employed by a Detroit casino or casino supplier company, contact your employer's human resource department to coordinate the renewal of your license. The renewal application form and application fee must be submitted **at least 30 days prior to the expiration of your occupational license.**

TAX RETURNS (LEVEL 1)

If you are renewing your Level 1 Occupational License, submit true and accurate copies of your federal, state and local tax returns for the last two years. Copies of all schedules to your tax return must also be submitted.

In addition, submit an IRS Form 4506-C IVES Request for Transcript of Tax Return with your application. A 4506-C Request form and instructions can be found at www.michigan.gov/mgcb (Click on Detroit Casinos → Occupational Licensee/Applicant → Occupational Licensee/Applicant Forms and Information OR by pressing ctrl and clicking [HERE](#)).

If you require assistance in completing this application, please contact the Michigan Gaming Control Board, Employee Licensing Section at (313) 456-4100. General information is also available from the Michigan Gaming Control Board Internet web site: www.michigan.gov/mgcb/.

Please PRINT or TYPE all

What license level are you renewing? Check one: 1 2 3

MGCB License _____ Current License Level: 1 2 3

Casino or Current Employer: _____ Current Position: _____

Name: _____
Last Name First Name Middle Name

Address: _____
Address City State Zip

Primary Telephone: _____ Alternative Number: _____

Primary Email: _____

Social Security Number: _____

Please answer the following questions as they relate to you since the last time you submitted your initial application or last renewal application form

1. Are you current in filing all required income tax returns?

No Yes If you answered **no**, please explain.

2. Are you delinquent in the payment of federal, state or city tax required under state or federal law?

No Yes If you answered **yes**, please explain and submit documentation from the tax authority indicating the delinquency.

3. Since your last application have you had any court or formal proceeding filed against you to adjust, defer, suspend or otherwise work out the payment of any debt, including garnishment of wages?

No Yes If you answered **yes**, please explain and submit relevant documentation.

4. Since your last application have you filed a proceeding for bankruptcy?

No Yes If you are applying for Level 1 or Level 2 licensing renewal and answered **yes** to this question, please submit a complete copy of the bankruptcy petition and discharge.

5. Since your last application have you been convicted of a misdemeanor involving gambling, dishonesty, theft, or fraud in any state?

No Yes If **yes**, please explain and submit a final court disposition for each charge.

6. Since your last application have you been indicted, charged, arrested, convicted, plead guilty, no contest, or forfeited bail for any felony or misdemeanor offense in any jurisdiction?

No Yes If **yes**, please explain and submit final court dispositions for all cases.

7. Since your last application have you had any criminal conviction, either felony or misdemeanor, dismissed, expunged, or set aside under the laws of any jurisdiction?

No Yes If **yes**, please explain and submit final court dispositions for all cases.

8. Since your last application have you had any gaming license or permit issued to you in any jurisdiction suspended, restricted, or revoked?

No Yes If you answered **yes**, please explain.

9. **Required ONLY for Level 1 Occupational Licensees**
 (Tax returns submitted are not considered a substitute)

NET WORTH STATEMENT as of	

mm/dd/yyyy	
	<u>Current Year</u>
Assets:	
Cash	
Loans Receivable	
Stocks, Bonds, and Debentures	
Pensions, IRAs, 401(k)s, Other Retirement Plans	
Business Investments	
Real Estate	
Other Assets	
Total Assets:	
Liabilities:	
Loans Payable	
Taxes Payable	
Mortgages Payable	
Other Liabilities	
Total Liabilities:	
Net Worth:	
{Total Assets minus Total Liabilities}:	
Contingent Liabilities	
*Provide the information in the aggregate for you, your spouse, and any dependent children.	

ATTACHMENT A
APPLICANT VERIFICATION

I am the individual responsible for submitting this renewal application. I swear (or affirm) that the information contained in this renewal application is true, complete and accurate to the best of my knowledge and belief.

I acknowledge that I am under a continuing duty to promptly disclose to the Board any changes in the information provided in the application and requested materials submitted to the Board. To comply with this requirement, I must submit a letter to the Board stating the changes.

I acknowledge that while applying for, or holding a license under this act, I must disclose to the Board and its agents, confidential records, including tax records held by any federal, state or local agency, credit bureau or financial institution.

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

Applicant's Signature

Printed Name

WITNESS, my hand and Notary Seal, this _____ day of _____, of 20____.

Notary Public, (Written

Notary Public, (Printed Name)

My commission expires: _____

County of Residence: _____

ATTACHMENT B
CONSENT TO RELEASE INFORMATION MATERIALS AND DOCUMENTS

To all Courts, Probation Departments, Selective Service Boards, Employers, Educational Institutions, Banks, Financial and Other such Institutions, and all Governmental Agencies federal, state and local, without exception, both foreign and domestic.

I, _____

have authorized the Michigan Gaming Control Board and its employees and agents to conduct a full background investigation into my personal and business activities.

Therefore, I authorize and request that you release any and all information, materials and documents in your possession which have been requested by any employee or agent of the Michigan Gaming Control Board regarding my personal or business activities. I consent to release information, materials and documents provided that the employee or agent of the Michigan Gaming Control Board properly identifies himself or herself as an agent or employee of the Michigan Gaming Control Board.

This authorization supersedes and countermands any prior authorization and request to the contrary.

A photocopy of this authorization will be considered as effective and valid as the

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

Applicant's Signature

Printed Name

Before me, the undersigned, a Notary Public in and for said County and State, the above individual personally appeared and acknowledged the execution of the foregoing instrument as his/her voluntary act and deed.

WITNESS, my hand and Notary Seal, this _____ day of _____, of 20____.

Notary Public, (Written

Notary Public, (Printed Name)

My commission expires: _____

County of Residence: _____