



# MESCALERO APACHE TRIBAL GAMING COMMISSION

P.O. Box 329

287 Carrizo Canyon Road

Mescalero, NM 88340

Ph (575) 464-7100 Fax (575) 464-7115

## APPLICATION FOR GAMING VENDOR'S LICENSE

### I. GENERAL INFORMATION

#### (A) Name of Enterprise

State the complete names of the business enterprise and list names under which this enterprise has done business within the last ten years. For the purpose of this form "enterprise" shall be defined to include any corporation, association, operation, firm, partnership, trust or other form of business as well as natural person.

Name of Enterprise:
(Include Trade Names and/or DBA's):
Name of Enterprise (past ten years):
Federal Tax ID Number:

#### (B) Address

Contact Person:	Title:	Telephone Number:
Business Mailing Address: (City/State/Zip/County)		
Premises (Street) Address: (City/State/Zip/County)		
Telephone Number:	Fax Number:	E-Mail Address:

#### (C) List the address of each office, warehouse, or outlet where you manufacture, store, or sell your manufactured goods and/or provide services from.

1. Premises Names:	Telephone Number:
Street, City, State/Province, Zip, County:	
2. Premises Names:	Telephone Number:
Street, City, State/Province, Zip, County:	
3. Premises Names:	Telephone Number:
Street, City, State/Province, Zip, County:	
4. Premises Names:	Telephone Number:
Street, City, State/Province, Zip, County:	

**\* Releases of Information Authorization forms are required for  
all identified individuals in sections II and III\***

**II. TYPE OF ENTERPRISE & OWNERSHIP INFORMATION** (Check applicable block and submit the required information):

**Note:** Include a copy of business license, an organization chart, which includes all parent, subsidiary, related entities, including holding companies, and their relationships. (Label as Attachment A1) Provide the following information as applicable for the enterprise and all parent companies.

- Individual/ Sole Proprietor(s)
  - ⇒ Include Spouse (include maiden name)
- Partnership (Limited and General)
  - ⇒ Attach a List of All Partners and Their Spouses (include maiden name)
  - ⇒ Partnership Agreement (If no agreement, list terms and date formed)
- Limited Liability Company
  - ⇒ Attach a list of all members and their spouses (include maiden name)
  - ⇒ Filing with Secretary of State/Province
  - ⇒ Organizational Documents and/ or member agreements
- Corporation
  - ⇒ Attach a list of Corporate Officers, Directors, and Shareholders owning 5% or more of stock, and their spouses (include maiden name)
  - ⇒ Signed and Dated Certification of Corporation and/ or Articles of Incorporation/ Bylaws

**NOTE:** Provide the following information for the above corresponding individuals in the format shown: (Label as Attachment A2)

Names	Title	Street Address, City, State, Zip, County	
SSN	A.K.A.	DOB	% of Ownership

**III. STATE THE NAME, DATE OF BIRTH, RESIDENCE ADDRESS, POSITION WITH OR RELATIONSHIP TO THE ENTERPRISE & ATTACH A RECENT 3"x5" COLOR PHOTO FOR THE FOLLOWING PERSON(S).** (Label as Attachment B):

- (A) All persons of the enterprise who will be directly dealing with any Inn of the Mountain Gods Casino or Casino Apache licensee. To include all sales representatives, field technicians, and remote access technicians dealing with Casino Apache or the Inn of the Mountain Gods Casino.
- (B) All persons associated with the enterprise that will be signing agreements with any Casino Apache or Inn of the Mountain Gods Casino licensees.
- (C) The immediate supervisor(s) of each of the persons with whom casino licensees will be directly dealing.
- (D) The person(s) responsible for or in charge of the offices out of which these supervisor(s) work.

\* Releases of Information Authorization forms are required for all identified individuals in sections II through III\*

**IV. FINANCIAL INTEREST**

Please submit the requested material for any “Yes” answers:

No      Yes

- 1. Does any person or entity listed in Sections II or III have any financial or ownership interest in any other gambling activity or enterprise: Provide full details **(Label as Attachment C1)**
- 2. Does any person or entity, other than those listed in Sections II & III have any financial or ownership interest in this enterprise? Provide a list, including names and details of interest (including assigns, landlords, etc.) or to whom any interest or share of profits has been pledged as a security for the performance of a contract or sale, or whom as an obligation for enterprise liabilities relating to the gambling operation. **(Label as Attachment C2)**
- 3. Does any person or entity have an option to purchase any share of the enterprise (5% or more)? Explain, giving details including names and terms of option. **(Label as Attachment C3)**
- 4. Was the purchase or startup of the enterprise a cash transaction (including cash from loans)? Provide narrative statement as to original source of cash. **(Label as Attachment C4)**
- 5. Does any person or entity other than the enterprise own the land, building(s), equipment, or any other assets (including patents) used by the applicant? Provide full details including owner, item and terms. **(Label as Attachment C5)**

**V. PUBLICLY TRADED**

**(A)** Is the enterprise a publicly traded corporation?       Yes       No

If Yes, please submit the following information on all institutional investors that hold 5% or more interest in the enterprise:

Name and Address of Institutional Investor	% of Ownership	Number of Shares Held

Table continued **(Label as Attachment D)**

**(B)** Ticker Symbol: \_\_\_\_\_ Exchange Traded On: \_\_\_\_\_

**VI. IS THIS ENTERPRISE ENTITLED TO INDIAN PREFERENCE?**

(At least 51% Owned and Controlled by Native Americans)

\_\_\_\_\_ Yes      \_\_\_\_\_ No

If Yes, list Name and Location of Tribal affiliate and attach Tribal Membership documentation. **(Label as Attachment E)**

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**VII. TYPE OF PRODUCT/SERVICE:**

Check all that apply:

- |   |  |
|---|--|
| <input type="checkbox"/> ] Manufacturer   | <input type="checkbox"/> ] Distributor               |
| <input type="checkbox"/> ] Service Supplier   | <input type="checkbox"/> ] Gaming Equipment/Supplies |
| <input type="checkbox"/> ] Gaming Machines  | <input type="checkbox"/> ] Bingo Paper/ Supplies     |
| <input type="checkbox"/> ] Pull ticket/Tab or Punchboard  | <input type="checkbox"/> ] Management Co./ Financier |
| <input type="checkbox"/> ] Consultant   | <input type="checkbox"/> ] Casino Junket             |
| <input type="checkbox"/> ] Other (State primary nature of goods/services to be provided.) _____ |  |
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**VIII. SUBCONTRACTORS/CONSTULTANTS/OTHERS PERFORMING SERVICES FOR ENTERPRISE:**

**Note:** For licensing application purposes, the term “subcontractor” means any corporation, business, organization, or entity, consultant, or person(s) other than the enterprise or enterprise’s employees, that the enterprise contracts or authorizes to do work for Casino Apache or the Inn of the Mountain Gods Casino. The enterprise may not anticipate the use of subcontractors at the time of the initial license application, however all subcontractors will be required to complete a separate licensing application prior to any work being authorized. If the enterprise has not yet selected a subcontractor, the enterprise must provide the requested information as soon as it becomes known. **No subcontracted work may be authorized under the enterprise’s license.** Failure to identify subcontractors or provide the required information on subcontractors could adversely impact the enterprise licensing process or the Enterprise’s license.

Will the Enterprise use a subcontractor to provide all or part of the described services or products listed under Section VII? YES \_\_\_\_\_ NO \_\_\_\_\_

If yes, please provide the name, address, telephone number and designated agent of the subcontractor. (Label as Attachment F)

**IX. RECORD KEEPING**

(A) Who (company or individual) maintains the enterprise’s business records?  
\_\_\_\_\_

(B) Who (company or individual) prepares the tax returns, government forms, audits, and reports for the enterprise (s)?  
\_\_\_\_\_

(C) Where are the financial books and records for the enterprise’s business kept?  
\_\_\_\_\_

(D) For each financial institution in which this enterprise currently maintains its operating and/ or investment account, attach a list of the following information. Include: **(Label as Attachment G1)**

Institution Name	Account #	Contact name	Telephone #
Street Address	City	State/Province	Zip

(E) For each outstanding loan and/or financial obligation (institutional/ personal/ other) obtained for use of operating this enterprise, attach a list of the following information: **(Label as Attachment G2)**

Creditor Name	Street Address	City	State/Province	Zip
Loan Number	Loan Amount	Date Acquired	Date Due.	

(F) Attach a copy of the enterprise’s financial records. The financial records must reflect the business operation for which the application is being submitted. Failure to supply adequate financial information will result in delays or denial of the application. Include the following:  
**(Label as Attachment G3):**

- 1) Certified copies of Tax Returns from previous three (3) years.
- 2) Certified copies of financial statements for previous three (3) years.

**NOTE:** If the enterprise is a prospective or has recently begun operating, submit an estimated beginning balance sheet (proforma) and a statement of the amount(s) and source(s) of funding for the enterprise and specific documentation to support declaration.

**X. DEBT/BANKRUPTCY ACTIONS**

Has the enterprise ever filed, or had filed against it, a proceeding for bankruptcy or ever been involved in any formal process to adjust, defer, suspend or otherwise work out payment of a debt?

No       Yes      If you answered Yes, complete the following:

Date of Filing	Name and Location of Court	Case Number	Disposition

Table continued **(Label as Attachment H)**

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**XI. TAX INFORMATION**

Has there been filed against the enterprise or has the enterprise been served with a complaint, lien, judgement, or other notice filed with any public body regarding the payment of any tax required under Federal, State or Local law?

No

Yes

If you answered Yes, complete the following table:

Taxing Agency	Type of Tax	Date of Taxing Period (MM/YY)	Amount	Status/Disposition

Table continued (Label as Attachment I)

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**XII. LITIGATION**

(A) Is your enterprise currently a party to any civil lawsuits?

No

Yes

If you answered Yes submit a description of all existing civil litigation to which the enterprise or any subsidiary is presently a party whether in this state or another jurisdiction. Include the following information: (Label as Attachment J1)

1. Official title or caption of the case
2. Docket or case number
3. Name and location of the court before which the case is pending
4. Identity of all parties to the litigation
5. General nature of all claims being made
6. Status/disposition

(B) Has your enterprise been a party to any other litigation:

1. in the previous ten years in which the enterprise or any of its officers, executives, or managers were accused of intentional misconduct?

No

Yes

2. in which an ultimate decision adverse to the enterprise or any of its officers, executives or managers would have or could have a current or future effect on the enterprise?

No

Yes

3. in which the *owner, partner, director* has ever been (for any offense): arrested, charged, indicted, tried, court martialled, plead no contest, or had any criminal record expunged in this or any other state or foreign country?

No

Yes

4. in which an ultimate decision adverse to the enterprise or any of its officers, executives or managers could reasonable be expected to reflect upon the current or future financial responsibility or ability of the enterprise or the character, reputation, or integrity of the enterprise or any of its officers, executives or managers?  No  Yes

If you answered Yes to any of the above, submit the following: **(Label as Attachment J2)**

1. Official title or caption of the case
2. Docket or case number
3. Name and location of the court before which the case is pending
4. Identity of all parties to the litigation
5. General nature of all claims being made
6. Status/disposition

(C) Has the enterprise ever had a judgment consent decree or consent order pertaining to a violation or alleged violation of the Federal Antitrust, Trade Regulation or Securities Laws, or similar laws of any state, province or country entered against it/ or has the enterprise been named as an un-indicted co-conspirator in any criminal proceeding in this state or any other jurisdiction?  
 No  Yes

If you answered Yes to Section XII C, submit the following: **(Label as Attachment J3)**

1. Official title or caption of the case
2. Docket or Case number
3. Name & Address of Court or Agency
4. Nature of Judgement
5. Decree or Order
6. Date Entered

### **XIII. REPRESENTATIVES**

Submit the name, business address, and the telephone number of the enterprise's representatives for:  
**(Label as Attachment K)**

(A) Legal Services

(B) Registered or authorized agent upon whom services of process in any proceeding against the filing entity pursuant to applicable rules, regulations and/or Statutes of the State of New Mexico or proceeding in any court of the State including the United States District Court for the District of New Mexico may be made.

### **XIV. REGULATORY AGENCIES**

Does a public or regulatory agency (other than gaming agencies) regulate the enterprise?

No  Yes If Yes, complete the following chart:

Name and Location of Public Agency/Regulatory Agency	Type of Regulation	License No. or Other Identifying No.

**(B)** Has the enterprise (including parent, subsidiaries, directors and/or principals) ever applied in any jurisdiction for a license, permit or other authorization to participate in **Indian gaming** or other lawful gaming operations (including manufacturer or distributor of gaming supplies & equipment, casino gaming, horse racing, dog racing, pari-mutuel operations, lottery, or sports betting)?

No       Yes      If Yes, submit the following information: **(Label as Attachment L1)**

Name & Address of Licensing Agency	License No.	Type of Gaming Activity	Status

**(C)** Has the enterprise ever had a complaint or other notice of pending disciplinary action from any jurisdiction?       No       Yes

**(D)** Has the enterprise ever had any license or certificate issued by any jurisdiction denied, restricted, suspended, revoked or not renewed?       No       Yes

**(E)** Has the enterprise ever withdrawn its application, license or certificate in any jurisdiction?       No       Yes

If you answered Yes to any of the questions above, submit the following information, include a statement describing the facts or circumstances: **(Label as Attachment L2)**

Name of Licensing Authority	Action Taken	Date of Action

**(F)** Provide a copy of the enterprise's registration with the Department of Justice **(label as attachment L3)**

## **XV. AGREEMENTS**

**(A)** Has the enterprise entered into any written agreements with the Inn of the Mountain Gods Casino or Casino Apache?

No       Yes      If Yes, submit a copy of such an agreement. **(Label as Attachment M1)**

**(B)** Has the enterprise entered into any unwritten agreements with the Inn of the Mountain Gods Casino or Casino Apache?

No       Yes      If Yes, submit a description of the terms of each agreement, including in said description the expected duration and terms of compensation of each such agreement. **(Label as Attachment M2)**

**(C)** List the annual volume of business in terms of dollars the enterprise is doing or expects to do with The Inn of the Mountain Gods Casino and/or Casino Apache and the ending fiscal period. \_\_\_\_\_



- (D) For each agreement or expected agreement with the Inn of the Mountain Gods Casino or Casino Apache, explain:
1. How and when the terms of compensation are to be determined. If different responses are required for different agreements, identify each response with the particular agreement to which it relates.
  2. How and when orders, if any, are to be placed under each agreement.
- (Label the above responses as Attachment M3)
- (E) Are, or were, any agreements between this enterprise and the Inn of the Mountain Gods Casino or Casino Apache, in any way subject to or conditioned upon any other agreement between the Inn of the Mountain Gods Casino or Casino Apache, its employees or either this enterprise or any other enterprise whatsoever?
- No                       Yes
- If Yes, submit a list of each such agreement, explain the relationship and name the enterprise. (Label as Attachment M4)
- (F) Are any of the suppliers, vendors or subcontractors of the enterprise, directly or indirectly, either holders of any securities or creditors as to any long or short term secured or unsecured debt of the enterprise?
- No                       Yes
- If yes, identify the said suppliers, vendor or subcontractors, the nature of the interest or debt, and the amount thereof. (Label as attachment M5)

## XVI. CERTIFICATION

**I CERTIFY THAT THE FOREGOING INFORMATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF.**

*I further understand that any false statements or misrepresentation of any information, as well as a failure to consent to the disclosures on any part of this application may be grounds for the denial and/or revocation of the enterprise's gaming license.*

Name of Enterprise: \_\_\_\_\_

By: \_\_\_\_\_ (Print Name)                      \_\_\_\_\_ (Title)

\_\_\_\_\_ (Signature)                      \_\_\_\_\_ (Date)

Subscribed and Sworn before me on this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

(Seal)

\_\_\_\_\_ Notary

My Commission Expires: \_\_\_\_\_



