

NEVADA GAMING COMMISSION
NONRESTRICTED LICENSEES ONLY
HOLIDAY OR SPECIAL EVENT APPLICATION

Period Covered: _____

Filing Deadline: _____

For Office Use Only

Account Number:		Check Number	
Legal Name:		Batch Number	
Trade Name:		Entry Date	
Address:			
City, State, Zip:			
Please correct if in error			

Instructions

- A. The maximum additional games allowed by this application cannot exceed 50 percent of the number of games operated by the licensee at the time this application is filed. Any fractional game must be counted as one full game.
- B. If any such additional games are not removed at the time the Holiday or special Event permit expires, the licensee shall immediately be subject to the fees provided by Chapter 463.
- C. Enter in the space provided the number and type or types of additional games applied for. Each additional game is subject to a license fee of \$14 per game per day. For purposes of computation, one day is equal to a 24-hour period.
- D. Gross revenue earned from each additional game must be included on the Monthly Gross Revenue Report (NGC-01) for the applicable month.
- E. Indicate on line 4 the time and date the additional games will commence and be removed from operation.
- F. **Games will be operated in established casino area:** _____ Yes/No. If not, in casino area, attach supplement identifying location of additional games and proposed surveillance.

If you have any questions, please contact the Nevada Gaming Control Board, Tax and License Division.

<p>Additional Games Applied For:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 70%;">Type of Game</th> <th style="width: 30%;">Number</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr> <td>1. Total (enter on line 2)</td> <td> </td> </tr> </tbody> </table>	Type of Game	Number									1. Total (enter on line 2)		<p>Computation of License Fee:</p> <p>2. Enter total number of games as appears on line 1 _____</p> <p>3. License fees due on games (excluding poker/pan) above (\$14 per game per day) \$ _____</p> <p>4. Application is hereby made to operate the above games</p> <p>Commencing on _____, at _____ a.m./p.m.</p> <p>removed on _____, at _____ a.m./p.m.</p>
Type of Game	Number												
1. Total (enter on line 2)													

Please make remittance payable to: **NEVADA GAMING COMMISSION**
Return to the Nevada Gaming Control Board, PO Box 8004, Carson City, NV 89702-8004.
Pursuant to NRS 353.1467, payments made to the State, in the aggregate, that amount to \$10,000 or more must be sent electronically.

I, _____ certify and declare under the penalties of perjury that I am the _____ of the business named above; that this is a true, correct and complete report (Owner, Partner, President, Treasurer, Other-describe) to the best of my knowledge, information, and belief; and that this application and report is made with the knowledge and consent of all other individuals licensed.

Dated _____ Signed _____

Person to contact regarding this report: Name: _____ Phone: _____

RETURN ORIGINAL AND MAKE DUPLICATE FOR YOUR RECORDS