

**STATE OF NEVADA
GAMING CONTROL BOARD**

**MANUFACTURER'S REQUEST FOR
ASSOCIATED EQUIPMENT REVIEW**

PERSONAL HISTORY RECORD

For Unlicensed Developers of Associated Equipment

General Instructions

Type or print an answer to every question. If a question does not apply to you, so state with N/A. If space available is insufficient, use a separate sheet and precede each answer with the appropriate title. Do not misstate or omit any material fact(s) as each statement made herein is subject to verification. Developer must initial each page, as provided in upper right hand corner. By placing initials on each page, the developer is attesting to the accuracy and completeness of the information contained on that page.

All developers are advised that this personal history record is an official document and misrepresentation or failure to reveal information requested may be deemed to be sufficient cause for the manufacturer/distributor to be called forward for a finding of suitability by the Nevada Gaming Commission.

A Personal History Record must be completed by each Executive, Director and/or Key Employee of the developing company.

Federal and State laws make it unlawful to discriminate on the basis of race, color, religion, sex, national origin, handicap or age.

- ◆ Application for _____
(Type of Associated Equipment)
- ◆ Corporation (If applicable) _____
- ◆ Company Name _____
- ◆ Address _____
- ◆ City _____ State _____ Zip Code _____

A. PERSONAL INFORMATION:

Last Name: _____ First _____ Middle _____

Alias (e.g., nicknames, name changes, maiden name) _____

Present Resident Address _____

Present Business Address _____

Job Position _____

Job Responsibilities _____

Phone: Residence _____ Business _____

Date of Birth _____

Place of Birth (City, County, State) _____

SS# _____ Sex _____ Race _____

Weight _____ Height _____ Color of: Eyes _____ Hair _____

Have you ever been arrested? Yes _____ No _____ If yes, describe circumstances and any resulting convictions.

Do you have any pending lawsuits? Yes _____ No _____ If yes, describe circumstances.

B. RESIDENCES:

List all residences you have had for the last 5 years:

Month/Year From - To	Street and Number City, State, Zip Code
◆ _____	_____ _____
◆ _____	_____ _____
◆ _____	_____ _____
◆ _____	_____ _____
◆ _____	_____ _____

C. EMPLOYMENT:

Beginning with your current employment, list your work history for the last 10 years:

Month/Year From-To	Name/Mailing Address of Employer/Business
Title	Name of Supervisor
Reason for Leaving	Gaming Present?

Month/Year From-To	Name/Mailing Address of Employer/Business
Title	Name of Supervisor
Reason for Leaving	Gaming Present?

Month/Year From-To	Name/Mailing Address of Employer/Business
Title	Name of Supervisor
Reason for Leaving	Gaming Present?

Month/Year From-To	Name/Mailing Address of Employer/Business
Title	Name of Supervisor
Reason for Leaving	Gaming Present?

D. OTHER

Have you ever held a privileged or professional license in any state, including but not limited to the following types of licenses:

- | | | |
|--|--|---|
| <input type="checkbox"/> Liquor | <input type="checkbox"/> Boxing Promoter | <input type="checkbox"/> Real Estate Broker |
| <input type="checkbox"/> Accountant | <input type="checkbox"/> Lawyer | <input type="checkbox"/> or Salesman |
| <input type="checkbox"/> Doctor | <input type="checkbox"/> Jockey | <input type="checkbox"/> Other |
| <input type="checkbox"/> Race Horse/
Race Dog Owner | <input type="checkbox"/> Trainer or
Manager | |

State where, years held, and the nature of any disciplinary actions taken against you:

Have you ever held a financial interest in a gambling venture, including a race track, dog track, race horse or dog, lottery, casino, bookmaking operation, or pari-mutuel operation, OUTSIDE the State of Nevada? Yes _____ No _____

If yes, state when and where and give names and locations of businesses in which you are/were involved and the names and addresses of all partners:

Have you ever appeared before a licensing agency or similar authority in or outside the State of Nevada, for any reason whatsoever? Yes _____ No _____

If yes, indicate details _____

Have you ever been refused a gaming license or related finding of suitability or been a participant in any group which has been denied a gaming license or related finding of suitability? Yes _____ No _____

If yes, state when, where and for what reason _____

Have you ever been granted a gaming license or been a participant in any group which has been issued a gaming license by the State of Nevada? Yes _____ No _____

If yes, state type of license, name of establishment, location and period held:

Have you ever been found suitable by the state of Nevada pursuant to NRS 463.167 or been a participant in any group which has been found suitable pursuant to NRS 463.167 by the state of Nevada? Yes _____ No _____

If yes, state type of license, name of establishment, location and period held:

**Do you have any relatives associated with or employed in the gaming industry?
Yes _____ No _____**

If yes, indicate details _____
