



# SANDIA TRIBAL GAMING COMMISSION

30 Rainbow Road NE, Albuquerque, NM 87113  
 Phone: (505) 796-7501 \* Fax: (505) 796-7515

## VENDOR LICENSE APPLICATION FOR SANDIA CASINO GAMING/NON-GAMING VENDORS

Application Date: \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_

It is the vendor's responsibility to renew their license prior to expiration. The vendor must contact the STGC Licensing Department 90 days prior to license expiration to obtain license renewal packet and the applicable fees. The vendor must keep in contact with the STGC to ensure all applicable information is submitted. In addition, failure to respond in a timely manner may result in late fees.

### 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 (10) 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:	

**Release of Information Authorization forms  
are required for all identified individuals in Sections II through III.**

**II. TYPE OF ENTERPRISE and 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 (including maiden names)  
- Partnership Agreement (If no agreement, list terms and date formed.)
- Limited Liability Company**  
- Attach a list of all members and their spouses (include maiden names)  
- 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 names)  
- 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)**

Name	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, AND 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 Sandia Casino licensee. This will include all sales representatives and technicians dealing with Sandia Casino.
- (B) All persons associated with the enterprise that will be signing agreements with Sandia 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.

**Release 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:

- | <u>No</u>                | <u>Yes</u>               |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | 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)   |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. Does any person or entity, other than those listed in Sections II and 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 who has an obligation for enterprise liabilities relating to the gambling operation. (Label as Attachment C2) |
| <input type="checkbox"/> | <input type="checkbox"/> | 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)  |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. Was the purchase or start-up of the enterprise a cash transaction (including cash from loans)? Provide a narrative statement as to original source of cash. (Label as Attachment C4)   |
| <input type="checkbox"/> | <input type="checkbox"/> | 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: \_\_\_\_\_

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**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*)

Name of Tribal Affiliate: \_\_\_\_\_

Location of Tribal Affiliate: \_\_\_\_\_

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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: <i>(State primary nature of goods/services to be provided.)</i> _____ |   |

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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 the Sandia 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?

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

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

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(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 No.	Contact Name	Telephone No.
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 (*Performa*), 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)**

## 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/YYYY)	Amount	Status/Disposition
		/	\$	
		/	\$	
		/	\$	

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

## 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 JI**)

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 reasonably 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 and address of Court or Agency
4. Nature of Judgement
5. Decree or Order
6. Date entered

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### 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.

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### XIV. REGULATORY AGENCIES

(A) 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 and 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 and 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 Sandia Casino?  
 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 Sandia Casino?  
 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 Sandia Casino and the ending fiscal period.
- Volume of Business:      \$ \_\_\_\_\_
- Ending Fiscal Period:      \_\_\_\_\_
- (D) For each agreement or expected agreement with Sandia Casino, 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 Sandia Casino in any way subject to or conditioned upon any other agreement between Sandia Casino, 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, vendors 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: \_\_\_\_\_

**PAYMENT OF LICENSING FEE  
AGREEMENT**

1. I understand that it is necessary for me to have a permit/license issued by the Pueblo of Sandia Tribal Gaming Commission (referred to as the Commission) in order to conduct business with Sandia Casino. I also understand that the license fee, payable to the Commission, is **non-refundable**.
2. **All payments made directly to The Pueblo of Sandia must be made by certified check or money order, made out to "The Pueblo of Sandia". Cash or personal checks will not be accepted.**
3. I understand that if I fail to pay the licensing fee as agreed, my temporary vendor permit or license shall be revoked, and my application for a regular license shall be deemed incomplete and will be withdrawn. No vendor will do any business without either a temporary vendor permit or a license.
4. **I understand that this licensing fee is non-refundable, under any circumstance.**

Initials \_\_\_\_\_

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Name <i>(Must be printed legibly)</i>	Social Security No.	Date of Birth	Job Title
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Signature	Date
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**ATTENTION: NOTARY**  
**Ensure document is signed in your presence and information is verified with a valid I.D.**

Notary Public in the county of \_\_\_\_\_ in the State of \_\_\_\_\_

SUBSCRIBED AND SWORN TO BEFORE ME THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC

MY COMMISSION EXPIRES: \_\_\_\_\_