

STATE OF FLORIDA FLORIDA GAMING CONTROL COMMISSION

www.flgaming.gov

Instructions: Follow the directions below and submit all required items to ensure faster processing. Print clearly in black or blue ink. Do not write in the space labeled "For Division Use Only."

TO BE COMPLETED BY CURRENT LICENSEES ONLY								
Applicant's Name:				Applicant's New Job Title(s):				
License Number:			Expiration Date of Current License:					
All Applicants Must:								
Check one box below (page left) to identify the current license you hold and are requesting to upgrade.								
2) Check one box below (center page) to identify the new license you are requesting. 3) Submit all additional requirements listed below (page right) with this application for the license type you are requesting.								
Please note: This form may only be used by individuals holding a current slot machine, pari-mutuel, or cardroom occupational license (not including a Temporary License) issued by the Division. If your license has expired or is open for renewal, you must								
complete a new license application and submit the full license fee.								
	UPGRA	DE A P	ARI-MUTUEL G	ENERA		LICENSE		
Upgrade from a Pari		оа 🛚	Pari-Mutuel Profes	ssional	Additional Requirements:	☐ \$65.00 License Fee		
	neral ividual		Individual License					
	ense							
Upgrade from a Pari		to a Slot Machine/Ca		Poquiromonte:	Additional	☐ \$85.00 License Fee		
. •	neral	Pari-Mutuel Comb	Requirements:		☐ Fingerprint Resubmission Fee			
Individual License		License				☐ Form FGCC PMW-3410*		
						*Licensing Fee notated on Form FGCC PMW-3410		
						is <u>not</u> required for this application.		
UPGRADE A PARI-MUTUEL PROFESSIONAL INDIVIDUAL LICENSE								
Upgrade from a Pa	arı-Mutuel to ofessional	to a 🚨	Slot Machine/Card Pari-Mutuel Comb License		Requirements:	\$20.00 License Fee		
	dividual					☐ Fingerprint Resubmission Fee		
	cense		2.001.00			☐ Form FGCC PMW-3410* *Licensing Fee notated on Form FGCC PMW-3410		
						is <u>not</u> required for this application.		
UPGRADE A PARI-MUTUEL BUSINESS LICENSE								
Upgrade from a 🚨 Pa	ari-Mutuel to	to a 🚨	Slot Machine Com Business License		Additional Requirements:	☐ \$1,880.00 License Fee		
-	usiness					☐ Form FGCC PMW-3420* including		
Lic	cense					requirements for related individuals.		
						*Licensing Fee notated on Form FGCC PMW-3420 is not required for this application.		
FOR DIVISION USE ONLY								
License Code License # File # App #								
Association Code Date Received								
License Fee FP Date FP F						Total Fee		
LICETISE I CE								
□ ARCI Checked □ Enforcement Checked								

	UPGRADE A CARDRO	OM EMPLOYEE LICEN	SE					
Upgrade from a	to a Slot Machine/Car Pari-Mutuel Comb License	droom/ Additional	☐ Fingerprint Resubmission Fee ☐ Form FGCC PMW-3410* *Licensing Fee notated on Form FGCC PMW-3410 is not required for this application.					
UPGRADE A CARDROOM BUSINESS LICENSE								
Upgrade from a	to a Slot Machine Con Business License	Additional Requirements:	\$1,500.00 License Fee Form FGCC PMW-3420* including requirements for related individuals. *Licensing Fee notated on Form FGCC PMW-3420 is not required for this application.					
UPGRADE A SLOT MACHINE GENERAL INDIVIDUAL LICENSE								
Upgrade from a Slot Machine General Individual License	to a Slot Machine Prof	Requirements:	☐ No Fee					
Upgrade from a General Individual License	to a Slot Machine/Care Pari-Mutuel Comb	Requirements:	☐ Fingerprint Resubmission Fee					
UPGRAI	DE A SLOT MACHINE PR	OFESSIONAL INDIVIDU	JAL LICENSE					
Upgrade from a ☐ Slot Machine Professional License	to a Slot Machine/Care Pari-Mutuel Comb License	Requirements:	☐ Fingerprint Resubmission Fee					
	ALL APPLICANTS PLEAS	SE READ AND SIGN BE	LOW					
Under the Federal Privacy Act, disclosure of Social Security numbers is voluntary unless specifically required by Federal Statute. In this instance, disclosure of Social Security numbers is mandatory pursuant to Title 42, United States Code, Sections 653, 654; and Sections 409.2577, 409.2598, and 559.79, Florida Statutes. Social Security numbers are used to allow efficient screening of applicants and licensees by a Title IV-D child support agency to assure compliance with child support obligations. Social Security numbers must also be recorded on all occupational license applications and are used for licensee identification purposes pursuant to the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (Welfare Reform Act), 104 Pub.L. 193, Sec. 317.								
I hereby authorize the Florida Gaming Control Commission, Division of Pari-Mutuel Wagering, to submit a set of my fingerprints to the Florida Department of Law Enforcement (FDLE) for the purpose of accessing and reviewing Florida and national criminal history records that may pertain to me. I understand that I am able to obtain a national criminal history record that may pertain to me directly from the Federal Bureau of Investigation (FBI) pursuant to Title 28, Code of Federal Regulations (CFR), Sections 16.30-16.34. I understand that my fingerprints may be retained at FDLE and the FBI for the purpose of providing any subsequent arrest notifications <u>and</u> that I am entitled to challenge the accuracy and completeness of any information contained in any such report. I am aware that procedures for challenging FDLE or FBI criminal history records are set forth in F.S. 943.056 and Title 28, CFR, Section 16.34. I may obtain a prompt determination as to the validity of my challenge before the Division makes a final determination about my status as a licensee. A copy of the Noncriminal Justice Applicant's Privacy Rights is available on the Division's website.								
Each application for a license or renewal of a license issued by the Florida Gaming Control Commission shall be signed under oath or affirmation by the applicant, or owner or chief executive of the applicant without the need for witnesses unless otherwise required by law.								
I certify that I am empowered to execute this application as required by Section 559.79, Florida Statutes. I understand that my signature on this application has the same legal effect as an oath or affirmation. I declare that I have read the foregoing application and to the best of my knowledge, all information contained on this application is true and complete. I understand that falsification of any information on this application may result in administrative action, including fines up to \$1,000, denial, suspension or revocation of the license. I agree to abide by and obey all rules and regulations of the Division of Pari-Mutuel Wagering and the laws of the State of Florida. Under penalty of perjury, I agree to inform the Division within 48 hours of being convicted of or entering a plea of guilty or nolo contendere to any disqualifying offense, regardless of adjudication.								
Signature of Applicant, O	wner, or Chief Executive:	Date (MM/DD/YYYY):						
Print Name of Applicant, Ow	ner, or Chief Executive:	Print Title:						