### NEW JERSEY RACING COMMISSION APPLICATION FOR SPORTS WAGERING LICENSE BY OWNER OR LESSEE OF A FORMER RACETRACK

### ACKNOWLEDGEMENT AND INSTRUCTIONS

Pursuant to the Sports Wagering Act, P.L. 2018 c. 33 ("Act"), as amended and supplemented, the undersigned owner or lessee of the property encompassing a portion of a former racetrack, as defined by the Act, hereby applies for a sports wagering license to operate a sports pool on the applicable former racetrack property. Attached hereto please find a certified check in the amount of \$100,000 which comprises the nonrefundable filing fee.

In making this application, the applicant acknowledges that it is required to provide full and complete answers and disclosures to all questions asked, and that any license granted by the Commission is predicated upon the accuracy and completeness of the information provided in this application including all attachments. The undersigned certifies to the truth and correctness of the following information.

If the space allotted within this application is not sufficient to provide an accurate and complete answer, or where the submission of an attachment is specifically required, the applicant shall attach such additional pages as are necessary and complete the response thereupon. Where the applicant elects to furnish an attachment to this application in response to any question, the applicant shall insert the phrase "see attached" in the answer space on this application form. In all cases, the applicant shall label the attachment page with the corresponding question number within this application.

# QUESTIONS 1 - 2 AND 5 - 26 MUST BE ANSWERED BY ALL APPLICANTS

1.	Application of(Print n	ame of owner or lessee of former	r racetrack property)
2.	Applicant is: an individual corporation	☐ general partnership ☐ limited liability company	□ limited partnership □ other
If ot	her, please specify:		
QUI	ESTION 3 MUST BE ANSW	VERED BY APPLICANTS OTHE	R THAN CORPORATION
3.	If an individual, state a	pplicant's name, residence and j	place and date of birth:

NAME	RESIDENCE	PLACE OF BIRTH	DATE OF BIRTH
	3		12 12
		and and a second se	

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If a partnership, state the same information for each partner, describe whether the partnership interest for each is general or limited. Also, state the percentage of each person's interest and attach the current partnership agreement. If a limited liability company or other, state the same information for the principal owners, members of any control group and key management.

List partnership, ownership, control and management interests below:

Trade name, if any, under which business is to be conducted:

## QUESTION 4 MUST BE ANSWERED BY CORPORATIONS ONLY

(a)	Corporate name of applicant:					
(b)	Address of principal office:					
(c)	Date incorporated: Under laws of what State?					
(d)	If not incorporated under the laws of the State of New Jersey, is corporation authorized to do business in New Jersey?					
(e)	Name and residence of registered or authorized agent upon whom service of process may be made:					
(f)	Address of registered office in New Jersey:					
(g)	Name, residence and office of each board appointed officer and each director:					
	NAME RESIDENCE OFFICE					
	(b) (c) (d) (e) (f)					

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h)	Name, resid or controllin	ence and interest of ea ng interest of 5% or mo	ach person who di ore of the securiti	rectly holds any v es issued by appli
	NAME	RESIDENCE	NO. OF SHARES	% OF INTERST
	Name, residence and interest of each person who directly holds non-voting or passive ownership interest of 25% or more of the secu issued by applicant:			
(i)	non-voting	or passive ownership	interest of 25% of	r more of the secu
(1)	non-voting	or passive ownership	interest of 25% of NO. OF SHARES	r more of the secu % OF INTERE:

- (a) the identity of the applicant and its constituency (e.g., in the case of a corporation, the Board of Directors, Officers, etc.);
- (b) the identity and constituency of each entity (including but not limited to the applicant), affiliate or agent of the applicant which will have any management, administrative and/or oversight responsibility with respect to any aspect of sports wagering; and the identity of each employee or person who will have any managerial, administrative or oversight responsibility on behalf of each identified entity, affiliate or agent.

Is such a "Table of Organization" attached?

Yes \_\_\_\_

No\_\_\_\_\_

(c) For the applicant and each entity, affiliate or agent identified in the "Table of Organization" attached to this application in response to questions 5 (a) or (b), attach a "Table (or Tables) Of Ownership" identifying any parent corporation(s), parent entities (partnerships, etc.), or person(s) which holds any ownership interest in said applicant, entity or agent. This Page 4 of 11

question should be answered so that the Racing Commission is fully apprised of all direct and indirect owners of the applicant, as well as with respect to any entity, affiliate or agent of the applicant which will have any management, administrative or oversight responsibility with regard to the sports wagering that is the subject of this application.

Is such a table (or tables) attached?

Yes \_\_\_\_\_, a table for each entity, affiliate or agent is attached. Yes \_\_\_\_\_, a table for one or more (but not all) entities, affiliates or agents is attached.

No \_\_\_\_\_, no tables are attached.

If the answer to question 5 (c) is "yes, a table for one or more (but not all) entities, affiliates or agents is attached," or "no, no tables are attached," list each entity below for which such table is not attached and provide an explanation why the requested table is not attached:

6. Attach complete financial statements showing the assets and liabilities of the applicant. In the case of a partnership, attach a complete financial statement showing the assets and liabilities of the partnership and of each partner, general or limited. In the case of a limited liability company, corporation or other, attach financial statements of same.

7. Location of premises where sports wagering lounge will be located:

Municipality\_\_\_\_\_ County\_\_\_\_\_ Post Office Address\_\_\_\_\_ Exact legal description by metes and bounds:

Attach a physical survey of the property showing the proposed premises of the sports wagering lounge and a plot plan of the interior of the sports wagering lounge showing the location of any self-service wagering machines to be used for sports wagering.

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8.	Does applicant own premises involved?	Yes	No
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- (a) If so, attach hereto a certification as to the title and/or deed of transfer of said premises, either by a title insurance company of the State of New Jersey or a counselor-at-law of the State of New Jersey.
- (b) If not, does applicant have an agreement to purchase or an option to purchase the premises involved? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, attach the agreement.

- (c) If not, and applicant is leasing the premises involved:
  - i. State the name and address of the person or entity from whom premises are leased and attach a copy of such lease;

- ii. Name the owner of the property, explain the owner's right to the property and attach the title and/or deed of transfer of said premises, either by a title insurance company of the State of New Jersey or a counselor-at-law of the State of New Jersey;
- iii. Attach a copy of the lease; and
- iv. If the lease does not expressly permit the applicant's intended use of the property as a sports wagering parlor, attach a certification of the lessor stating the lessor's knowledge of the proposed use of the property and the lessor's assent thereto.

9. State amount of encumbrance against premises involved, if any, and the names of the holders of the same, together with the date of the maturity thereof:

10. Does any individual or entity, other than the applicant, have any direct or indirect interest in the license applied for or in the business to be conducted under said license? Yes \_\_\_\_\_ No \_\_\_\_\_

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If so, state names, addresses and interests of such individual or entity:

NAME	ADDRESS	INTEREST
Does the applica entity to conduc	nt intend to enter into a cont t or operate sports wagering o	ract or agreement with a person o on its behalf?
Yes	No	
If so, attach a co	ppy of the contract or agreeme	ent.
Has the person Enforcement?	n or entity sought licensur	re from the Division of Gamin
Yes	No	
		the set of
Provide the follo applicant in con	owing information concerning nection with sports wagering	g the primary bank utilized by th :
NAME	ADDRESS	TELEPHONE
		94 1

Has the applicant entered into any financing arrangement with any bank, 13. financial institution, individual or third party to provide funding to be used in connection with the sports wagering that is the subject of this application?

> No Yes

11.

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If yes, identify the parties subject of the financing arrangement and state the details concerning the financing:

14. Have you or has any person mentioned in this application ever been convicted of any crime? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, state the details as to each conviction, giving the name of the person convicted, date thereof, nature of the crime, court in which the conviction was entered and sentence imposed:

15. To the applicant's knowledge, is any entity or person disclosed in completing this application presently the subject of any pending criminal investigation, criminal complaint, criminal charges or criminal indictment?

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, state the details of the investigation, complaint, charges or indictment:

16. Has any person or entity interested in this application in any manner ever had any interest, directly or indirectly, in any application for a horse racing permit or sports wagering license in the State of New Jersey which was denied or which, if granted, was surrendered, suspended or revoked?

Yes \_\_\_\_\_ No \_\_\_\_

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If so, state the details of the denial, surrender, suspension or revocation: Has any person or entity interested in this application in any manner ever had 17. any interest, directly or indirectly, in any application for a horse racing permit or sports wagering license in any other state of the United States or any other country which was denied or which, if granted, was surrendered, suspended or revoked? Yes \_\_\_\_\_ No \_\_\_\_ If so, state the details of the denial, surrender, suspension or revocation: Has any person or entity mentioned in this application ever been a party to any 18. litigation with regard to horse racing or sports wagering? If so, state the details: Is the applicant delinquent in the payment of any financial obligations related to 19. horse racing or sports wagering in an amount exceeding \$10,000? \_\_\_\_\_ No Yes If so, state the details: 

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20. To the applicant's knowledge, is any entity or person disclosed in completing this application presently subject of any civil proceeding where the potential liability may exceed \$10,000?

Yes No \_\_\_\_\_

If yes, state the details:

If applicant receives a sports wagering license, will the licensee carry workers' 21. compensation insurance, public liability and all other insurance to protect employees and all other persons on the premises?

Yes \_\_\_\_\_ No \_\_\_\_\_

22. Has the applicant put a procedure in place to ensure that the operator of the sports wagering lounge will not accept a wager from any person whose name appears on the self-exclusion list maintained by the Racing Commission and the self-exclusion lists maintained by the Division of Gaming Enforcement?

Yes \_\_\_\_\_ No \_\_\_\_\_

23. The applicant acknowledges that if a sports wagering license is granted, it shall be the duty of the applicant to comply with the Sports Wagering Act, P.L. 2018, c.
33, the rules of the Racing Commission and the rules of the Division of Gaming Enforcement that are applicable to sports wagering.

Yes \_\_\_\_\_ No \_\_\_\_\_

24. Applicant understands that any license which may hereafter be granted is predicated upon the statements and answers herein contained and that the license may be revoked for any false or misleading statement.

Yes \_\_\_\_\_ No \_\_\_\_

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25. Identify below the name and employment position of the individual who had the primary responsibility on behalf of the applicant to complete this application:

26. Identify below the name and employment position of the high managerial agent who, on behalf of the applicant and in the signature space immediately below, is attesting that the disclosures within this application are to the best of his or her knowledge, true, accurate and complete:

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I, being duly authorized to execute this application on behalf of the applicant, certify that the answers and disclosures within this application and its attachments are, to the best of my knowledge, true, accurate and complete.

[Signature]

Sworn and subscribed to before me this \_\_\_\_\_ day of \_\_\_\_\_.

A Notary Public of New Jersey

My Commission expires \_\_\_\_\_