

Maine State Harness Racing Commission

28 State House Station Augusta, Maine 04333-0028

Phone: 207-287-3221 Fax: 207-287-5576



STABLE LICENSE APPLICATION

Applications must be printed or typed in blue or black ink. All questions must be answered.

In making this application for license or to otherwise participate in racing in the State of Maine, it is understood that an investigative report may be made whereby information is obtained through personal interviews with third parties such as family members, business associates, financial source, friends and neighbors or others with whom you are acquainted. This inquiry includes information as to your character, general reputation, personal characteristics and mode of living, which may be applicable. You have the right to make a written request, within a reasonable period of time, for a complete and accurate disclosure of additional information concerning the nature and scope of the investigation.

Check the TYPE of Request:					N	New License			License Renewal				
Section	n 1. Applicant	Infor	mat	tion				<u> </u>	, ,				
USTAI	Membership No.:							Е	xpira	tion Date:			
	Trainer Type:	G		L									
Nature o	f entity applying:	(Corp	orate		Partne	ership		Ltd.	Partner	Syndicate		Other
Horses a	are to be raced in t	he na	me:										
Ар	plicant Name:												
Prin	cipal Address:									1			
	City:								tate:		Z	Zip:	
	lome Phone:								Fax:				
	Work Phone:								mail:				
Answer	Y (Yes) or N (No)	and p	rovi	de corres	spond	ing deta	ail where	appr	ropria	te:			
Are	you registered in an	other s	state'	?									
v	Where (State)?									Date:			
Hav	ve you previously bee	en den	ied a	registrati	on?								
<u> </u>	Where (State)?									Date:			
Hav	e any of the applicat	nts (or	pers	ons involv	ed wit	h applica	ation) eve	er bee	n sus	oended, deni	ed a license or rule	ed off by	y this or any
othe	er harness racing co	mmissi	ion o	r governir	ng bod	y?							
V	Where (State)?									Date:			
	Detail:												
Hav	e any of the applicat	nts (or	pers	ons involv	ed wit	h applica	ation) eve	er bee	n con	victed of a cri	me?		
the disp	h conviction descr position must be at not be processed.	tached								•			
Are	you a defendant in a	a civil a	actior	n pending	in the	State of	Maine re	gardir	ng nor	npayment of I	oills?		
Are	there any unpaid civ	/il judg	ment	ts against	you?								
If YES,	provide detail:												
Who is y	our trainer?												
(P) in a	orses to be raced opropriate space. I greement(s) with a	f lease	ed, y	∕ou must									
	Horse's Name	!		Nar	ne (Le	essor/S	eller)			Addre	ess (Lessor /Selle	er)	P/L
1.					('					- 200	,		
2.													
3.													
محانيد ال	ings to be credited	l to:	•				Lico	nco N	ua :		TINI/QQ	2NI:	•

	ALL	COR	PORATE	APPLICANTS	must complete	the follow	ing section	١.				
Corp	orate Name:											
Date of I	ncorporation:				Place of Inc	corporation:						
Stock	Description:											
Bank Conducti	ng Business:											
В	ank Address:											
Ban	k Telephone:											
A copy of the	certificate c	f inc	orporatio	n for any co	rporate applica	nt or own	ership agre	eement f	or any multiple			
licensed in concase of a corpo	nection with the orate applicant st be disclose	is app , all o d and	olication by corporate	y the Rules an officers, mem	d Regulations of per of the Board	the Maine of Director	State Harnes, managers	ss Racing s and sto	als required to be Commission. In ckholders having rs and managers			
Name:				Addr	ess:							
USTA Lic. No.:	SS ₇	# :		DOB:	Ti	tle:		% of Owne	ership:			
Name:				Addr	ess:							
USTA Lic. No.:	SSŧ	# :		DOB:	Ti	tle:		% of Owne	ership:			
Name:				Addr	ess:							
USTA Lic. No.:	SSŧ	# :		DOB:	Ti	tle:		% of Owne	ership:			
Name:				 Addr	ess:							
USTA Lic.	SSŧ			DOB:		tle:		% of Owne	ership:			
No.:	_			<u> </u>					-			
ownership situal Any person nor in a writter for in the rule	Racing Secreta tion wherein a naking any f n or oral exa es and regula	ry sha pplica alse, mina ation	all refuse e ation for su untrue o tion in co s of the I	uch a stable na or misleadin onnection w Maine State	ntity required to lume has not been statement or ith such an apharness Racin	n made prion n an applio pplication ng Commi	r to entry. cation for l may be dis ssion.	icense c sciplinec	or registration			
	e, Title of Corr	•	ū			•	ding Officer S	•				
The above nam knowledge, true		appea	ared befor	e me and swo	re that the inforn	nation conta	ined herein	is, to the I	pest of his/her			
	Date					Notary	Public Signa	ature				
Section 2: Fe	ees					•						
\$30 One-Ye	ear Registratio	n										
License	fees must ac	com	pany appl	lication. Chec	ks must be ma	de payable	to: Treasu	er, State	of Maine			
NOTICE: Any servant in the liabilities und	he performa	nce	of his	or her offic	the undersigial duties, m	ned, with ay expos	the inter e the und	nt to ded dersigne	ceive a public d to criminal			
				OFFIC	E USE ONLY							
Date Received:						Me	thod of Payr	nent				
Application:	Approved		Rejected	Returned	Check#:		-					
Current License #:					Cash Receipt	<i>‡</i> :						
Comments					Credit Card #:							
					Credit Type:		МС					
					Orcait Type.		IVIO		VISA			