

Instructions
MGCB-2200 Universal Shipping Application
MGCB-2201 Gaming Equipment Shipment Record
MGCB-2202 Waiver Request for Slot Machines

MGCB-2200:

1. Select the type of equipment being shipped.
2. Check yes or no if a waiver request MGCB-2202 is attached.
3. Seller/Shipper Information:
 - a. Name of person or business entity selling the equipment
 - b. Purchase Order (P.O.) number or Manufacturer/Distributor designated number (invoice?)
 - c. Address, City, state and zip code of seller.
 - d. Phone number of person filling out the form
 - e. Ship from is filled in if the equipment is being shipped from an address other than the seller address.
4. Purchaser/Delivery Information:
 - a. Name of facility purchasing the equipment
 - b. Name of person making the purchase on behalf of the facility
 - c. City, State and zip code of purchaser
 - d. Phone number of person making the purchase
 - e. Attn to: is the person at the facility who will receive the equipment
 - f. Receiving address, city, state and zip code would be the destination address, if different from the purchaser address
5. Shipper Information:
 - a. Requested shipment date and Receiving dates are as requested.
 - b. Method is the method of shipment i.e. Sealed Transport, Next Day Air, Hand Delivery) or add one not listed.
 - c. Carrier name, pick one listed or add one.
 - d. Phone number.
 - e. Contact person name or Tracking number.
 - f. Address, City, State and zip code of carrier.
 - g. Driver contact name and phone number
 - h. Seal number on Trailer or any other packaging used.
 - i. Total number of units or pieces being shipped by item.
 - j. See note of additional carriers, if used
6. Once filled out completely, "Save as" an electronic copy.
7. Fill in **MGCB-2201** Gaming Equipment Shipment Record and attach it to the application.
8. Send via email to Director Milton Champion at Milton.f.champion@maine.gov 14 days in advance of shipment date.
9. Waiver request need Board approval which will be set up at the next meeting date following submission.

MGCB-2201

1. Select Manufacture or Distributor listed or add yours
2. Enter Purchase Order (P.O.) Number or Manufacturer/Distributor designated number (invoice?) which is the same number on form MGCB-2200
3. Enter quantity of items
4. Item number associated with item
5. Description of item

6. Model or Game Theme
7. Independent Lab Certification number
8. Maine Certification number (From list on website by manufacturer) NOTE: without it there will be a delay until certification is made with use of our central monitoring system
9. Once filled out completely, "Save as" an electronic copy
10. Send with application MGCB-2200 via email to Executive Director Milton Champion at Milton.f.champion@maine.gov

Any alterations to the requested shipment and receiving dates will be communicated directly with the Seller and noted on the approved application. It is the seller's responsibility to coordinate any changes with the purchaser.

If you have any questions, please contact the Gambling Control Board at (207) 626-3900