

Casino / Sports Wagering Combo Application

MGCU - 8300

An individual who is actively licensed under section 1015 as an employee of a casino that has a facility sports wagering license may obtain or renew a license under this section without paying an initial license fee or a renewal license fee under this section.

The expiration date of the gaming employee license will be the same date for the expiration of a combo license. A licensed sports wagering employee may not apply for a casino employee license without paying the license fee associated with the casino employee license.

Maine Gambling Control Unit

Department of Public Safety Gambling Control Unit Central Maine Commerce Center 87 State House Station 45 Commerce Drive, Suite 3 Augusta, Maine 04333-0087 (207) 626-3900 - Office (207) 287-4356 - Fax

PLEASE PRINT OR TYPE THE ANSWERS TO THE FOLLOWING QUESTIONS IN THE SPACES PROVIDED

PERSONAL DATA

NAME:			
NAME:LAST (INCLUDE SR., JR., E	ETC., IF APPLICABLE)	FIRST	MIDDLE
PLACE OF EMPLOYMENT:			
CURRENT GAMING LICENSE NUI	MBER:		
HOME ADDRESS:STREET			
STREET.			
CITY/TOW	N STA	TE	ZIP CODE
TELEPHONE NUMBER: ()			
E-MAIL ADDRESS:			
DATE OF BIRTH: (MO) (DAY) (YE			
Social Security Number:	*		

*The following statement is made pursuant to the Privacy Act of 1974, §7(b): Disclosure of your Social Security number is mandatory. Solicitation of your Social Security number is solely for tax administration purposes pursuant to 36 M.R.S.A. §175 as authorized by the Tax Reform Act of 1976 (42 U.S.C. §405 (c)(2)(C)(i)) and for child support enforcement purposes pursuant to 42 U.S.C. §666 (a)(13)(A) and 19-A M.R.S.A. §2104, 2201. Your Social Security number may be disclosed to the State Tax Assessor or an authorized agent for use in determining filing obligations and tax liability pursuant to Title 36 of the Maine Revised Statutes and / or to the Department of Health and Human Services, Division of Support Enforcement and Recovery for use in child support enforcement procedures. No further use will be made of your Social Security number without your consent. It shall be treated as confidential tax information pursuant to 36 M.R.S.A. § 191 and confidential support enforcement information pursuant to 19-A M.R.S.A. §2152.

Initials _____ MGCU-8300 Date ____

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