# VIRGINIA LOTTERY GAMING LICENSING and INVESTIGATIONS DIVISION



## PROCEDURES MANUAL for SPORTS BETTING PRINCIPAL LICENSE APPLICANTS

#### **GENERAL INFORMATION**

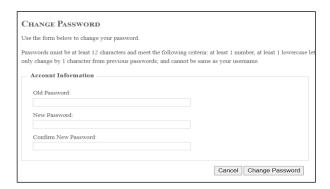
This procedures manual is a reference tool for principal employees of a prospective sports betting permit holder or supplier. The Virginia Lottery's intention is to provide applicants with guidance when using the automated licensing system to complete your online application prior to submitting it to the Virginia Lottery's Gaming Licensing and Investigations Division for the appropriate due diligence.

Your application must be submitted online through this automated system beginning October 15, 2020. A sample of this application can be found at <a href="https://www.vagamingregulations.com">www.vagamingregulations.com</a>. You will be required to contact your sports betting employer's account representatives in order to obtain access to the system prior to initiating the application process. Once an application and all required supporting documents have been submitted, these items will become the property of the Virginia Lottery and will not be returned to you. Applicants will not be able to make any changes to their applications within the automated system once your application has been submitted.

Your employer's account representative will provide you with the following documents that are required to be notarized and returned to your account representative for upload into the automated system: Authorization for Release of Information, Affidavit of Individual Applicant and Certification of Business Relationship. These documents can also be found on pages 5 to 7 of this manual. You will also be required to give your account representative several other documents to be uploaded into the automated system. These documents can be found in the sample application at <a href="https://www.vagamingregulations.com">www.vagamingregulations.com</a>. The account representative will also provide you with the URL to access the Licensing website as well as a temporary password and username that you will use to sign into the automated system and begin the application process.

#### THE APPLICATION PROCESS

- 1. After accessing the Licensing website, sign into the system using the username and temporary password provided by your employer's account representative.
- 2. You will be prompted to change your password. Your new password must be 12 or more characters containing all the following: special character(s), alphabetical character(s), numerical character(s), upper case letter(s), and lowercase letter(s):

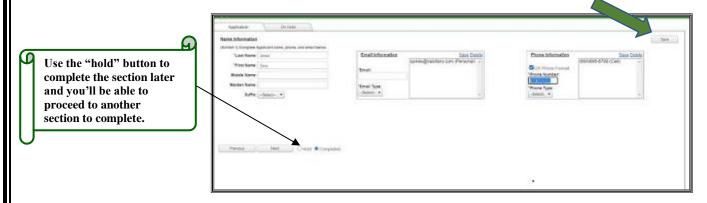


3. Read the "Acknowledgement and Disclosure" and click the button to "acknowledge" that you understand agree to the terms within. If you aren't clear on these terms, contact your account representative. You will not be able to proceed without acknowledging that you understand.

4. You will then be able to start entering information into your application. You must complete *every* section of the application prior to being able to submit it:

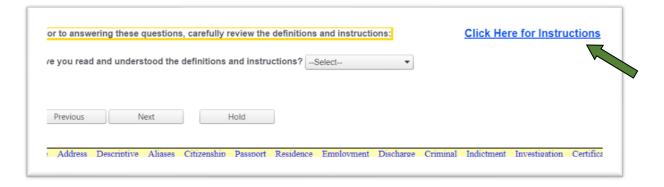


5. Simply follow the instructions when entering your information for each section. Make sure you click "Save" before moving forward to the next section:

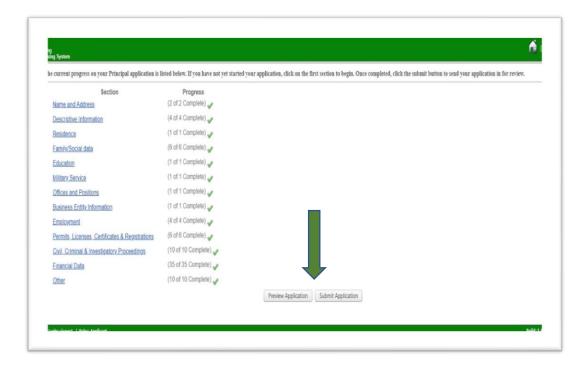




6. When you get to the "criminal" section of the application, click the instructions link and read the "Civil, Criminal, and Investigatory Proceedings" document prior to answering the questions in this section. You must acknowledge that you've read and understand the definitions in these instructions. If you do not understand, contact your account representative before proceeding:



7. Once you've completed each section you will be able to preview your application prior to submitting it. Be sure your information is accurate and complete as you will not be able to make changes within the automated system once you submit it. You will be able to print a copy of your application for your records.



8. Your account representative will obtain all required supporting documents from you to submit to Virginia Lottery as part of the application process. Your account representative will also provide you with instructions to get Live Scan fingerprinting completed for a criminal background check to be done.

#### **AUTHORIZATION FOR RELEASE OF INFORMATION**

TO:(To be com	npleted by the Department)
(10 00 001)	apreced by the Department)
ROM:	
(P	Printed Name of Applicant)
nployee license in the Commonwealth of Virginia	(printed name), am an applicant for a Principal Gaming a.
e Virginia Lottery, and its employees, agents, and investigation of an applicant for a sports betting	d vendors (collectively, "the Department"), is required by law to condulicense.
thorization, I irrevocably give consent and authorizations enterprise, including a consumer reporting	ct and evaluate information about me. By executing this prize any: local, State or federal government unit; commercial or agency; non-profit entity; individual or any other public or private rmation about me that the Department requests. The requested extronic, or any other form.
ive, release, discharge and forever hold harmless ormation to the Department under the authority of	
photo, facsimile, or electronic copy of this signed  Signature	and dated Authorization shall be equally effective as an original.  Date
Printed Name	
	NOTARY RURUS
	NOTARY PUBLIC
	for the County of, in the State of re-named individual appeared in person, and before me, either known to me name subscribed to the within instrument and signed the Authorization and
Notification.	, 20, and to which witness my hand and seal.
	Notary Public
Stamp or Seal	Printed Name

### AFFIDAVIT OF INDIVIDUAL

I, (printed name) Commonwealth of Virginia. I have read, and understand, every	am an applicant for a Principal Gaming Employee license in the
Commonwealth of Virginia. I have read, and understand, every j	page of this Application.
To the best of my knowledge, information, and belief, the inform complete, and not misleading. I understand that any misrepre application for a Principal Gaming Employee license and may providing the Department with false or misleading information suspend or revoke a license. I also understand that if I am issu- licensing requirements and to promptly notify the Department if	sentation or omission may lead to the delay or denial of my subject me to civil or criminal liability. I also understand that a is grounds for the Department to reject the application, or to need a license, I have an ongoing obligation to comply with all
By a separate Authorization for Release of Information, I am au to release that information to the Department, its employees, ago of its investigation of the application for a sports betting license.	ents, and vendors (collectively, "the Department"), for purposes
I expressly waive, release, discharge, and forever hold harmless Virginia, and their employees, agents, and representatives, from actions that the Department or the Commonwealth Virginia mindividual or person and the use of that information in connection Gaming Employee license.	liability for any and all claims or legal action arising from any may take related to the collection of information from the any
Signature of Individual Completing Form	Date
Printed Name	Title
NOTARY F	
NOTART	OBLIC
The undersigned, a Notary Public in and for the Co, certifies that the above-named ind or satisfactorily proven to be the individual whose name subscriving Notification.	ividual appeared in person, and before me, either known to me
	, and to which witness my hand and seal.
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Stamp or Seal	

#### ACKNOWLEDGEMENT AND DISCLOSURE

I understand and acknowledge with my initials and signature the following: The Department, through its employees, agents and vendors, is required by law to conduct a background investigation of each applicant for a license. Each applicant must prove by clear and convincing evidence that he/she is suitable and qualified for the license. Initials I am applying for a Virginia Principal Employee license. I cannot be employed in a job that requires this license unless the Department finds that I meet the legal requirements for licensure. I am required to submit correct and accurate information, and I am prohibited from submitting false or misleading information, to the Department. Failure to disclose any required information will be considered when assessing my character, honesty and integrity, and may disqualify me. Initials During the investigation, the Department is required to collect and evaluate various kinds of information or reports to determine if an applicant meets the eligibility requirements for licensure. The background investigation will include, but not be limited to, information or reports about my: character; general reputation; personal characteristics, including my honesty and integrity; credit worthiness; criminal record, record of involvement with law enforcement agencies, as specified in the application, or record of involvement with civil litigation. I have the right to request a complete and accurate disclosure of the nature and scope of the investigation and a copy of a summary of my rights under federal credit reporting law. I have a continuing obligation for the entire period I am licensed to inform the Department if any information I submit on my application changes, to include, but not limited to, contact information (physical/email addresses and phone numbers); name changes; arrests, charges, or convictions for any offense; or the inability to maintain my credit stability. I am requesting that the Department, through its employees, agents or vendors, obtain this information about me to evaluate my eligibility for a Principal Employee license. I acknowledge that this disclosure and authorization remains in effect during the time my application is pending and during the time of any license that I may be granted. Initials Signature of Individual Completing Form Date Printed Name Title **NOTARY PUBLIC** The undersigned, a Notary Public in and for the County of\_\_\_ \_\_\_\_\_, certifies that the above-named individual appeared in person, and before me, either known to me or satisfactorily proven to be the individual whose name subscribed to the within instrument and signed the Authorization and Notification. This day of , 20 , and to which witness my hand and seal. Notary Public Stamp or Seal Printed Name

