

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 www.vagamingregulations.com. 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 www.vagamingregulations.com. 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):

CHANGE PASSWORD

Use the form below to change your password.

Passwords must be at least 12 characters and meet the following criteria: at least 1 number, at least 1 lowercase letter, at least 1 uppercase letter, and only change by 1 character from previous passwords; and cannot be same as your username.

Account Information

Old Password:

New Password:

Confirm New Password:

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:

The screenshot shows the 'Virginia Lottery Gaming Licensing System' interface. It displays a progress table for a 'Principal application' with the following sections and completion status:

Section	Progress
Name and Address	(2 of 2 Complete) ✓
Descriptive Information	(4 of 4 Complete) ✓
Residence	(0 of 1 Complete)
Family/Social data	(2 of 6 Complete)
Education	(0 of 1 Complete)
Military Service	(1 of 1 Complete) ✓
Offices and Positions	(1 of 1 Complete) ✓
Business Entity Information	(1 of 1 Complete) ✓
Employment	(3 of 4 Complete)
Permits, Licenses, Certificates & Registrations	(6 of 6 Complete) ✓
Civil, Criminal & Investigatory Proceedings	(10 of 10 Complete) ✓
Financial Data	(20 of 35 Complete)
Other	(2 of 10 Complete)

Buttons at the bottom include 'Preview Application' and 'Submit Application'. A footer shows 'Login: spsm01 / Roles: Applicant'.

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

The screenshot shows a form with three main sections: 'Name Information', 'Email Information', and 'Phone Information'. Each section has a 'Save' button. A callout box on the left points to the 'Hold' button at the bottom of the form, which is labeled 'Hold' and 'Completed'. A green arrow points to the 'Save' button in the top right corner of the form.

Each required section to complete is listed in the yellow field at the bottom of the page.

Previous Next Hold Completed

[Name](#) [Address](#) [Aliases](#) [Residence](#) [Descriptive](#) [Citizenship](#) [Passport](#) [Curren](#)
[Employment](#) [Discharge](#) [Employment Partner](#) [Trustee](#) [Certificates](#) [License Acti](#)
[Testify](#) [Investigation](#) [Pardon](#) [Lawsuit Individual](#) [Lawsuit](#) [Violation](#) [Exclusion](#)
Exchange Currency Brokerage Account Insurance Claim Gift Safe Deposit Box
Tax Payable Mortgages Loan Against Insurance Other Indebtedness Contingent
Tax Return Tax Return Foreign

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:

or to answering these questions, carefully review the definitions and instructions: [Click Here for Instructions](#)

Have you read and understood the definitions and instructions?

Previous Next Hold

[Address](#) [Descriptive](#) [Aliases](#) [Citizenship](#) [Passport](#) [Residence](#) [Emolvment](#) [Discharge](#) [Criminal](#) [Indictment](#) [Investigation](#) [Certific](#)

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.

The screenshot displays a web application interface for tracking progress. At the top, there is a green header bar with the text 'ing System' and a home icon. Below the header, a message states: 'The current progress on your Principal application is listed below. If you have not yet started your application, click on the first section to begin. Once completed, click the submit button to send your application in for review.'

Section	Progress
Name and Address	(2 of 2 Complete) ✓
Descriptive Information	(4 of 4 Complete) ✓
Residence	(1 of 1 Complete) ✓
Family/Social data	(6 of 6 Complete) ✓
Education	(1 of 1 Complete) ✓
Military Service	(1 of 1 Complete) ✓
Offices and Positions	(1 of 1 Complete) ✓
Business Entity Information	(1 of 1 Complete) ✓
Employment	(4 of 4 Complete) ✓
Permits, Licenses, Certificates & Registrations	(6 of 6 Complete) ✓
Civil, Criminal & Investigatory Proceedings	(10 of 10 Complete) ✓
Financial Data	(35 of 35 Complete) ✓
Other	(10 of 10 Complete) ✓

Below the table, a large green arrow points downwards towards two buttons: 'Preview Application' and 'Submit Application'.

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 completed by the Department)

FROM: _____
(Printed Name of Applicant)

I, _____ (printed name), am an applicant for a Principal Gaming Employee license in the Commonwealth of Virginia.

The Virginia Lottery, and its employees, agents, and vendors (collectively, "the Department"), is required by law to conduct an investigation of an applicant for a sports betting license.

That investigation requires the Department to collect and evaluate information about me. By executing this Authorization, I irrevocably give consent and authorize any: local, State or federal government unit; commercial or business enterprise, including a consumer reporting agency; non-profit entity; individual or any other public or private entity to release to the Department any and all information about me that the Department requests. The requested information may be released in written, verbal, electronic, or any other form.

With respect to any claims or liability arising from the release of the requested information to the Department, I expressly waive, release, discharge and forever hold harmless and agree to indemnify, the unit, entity, or individual that releases information to the Department under the authority of this Authorization.

A photo, facsimile, or electronic copy of this signed and dated Authorization shall be equally effective as an original.

Signature Date

Printed Name Title

NOTARY PUBLIC

The undersigned, a Notary Public in and for the County of _____, in the State 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

Printed Name

Stamp or Seal

My commission expires _____, 20____



AFFIDAVIT OF INDIVIDUAL

I, _____ (printed name) am an applicant for a Principal Gaming Employee license in the Commonwealth of Virginia. I have read, and understand, every page of this Application.

To the best of my knowledge, information, and belief, the information that I have provided as part of this application is accurate, complete, and not misleading. I understand that any misrepresentation or omission may lead to the delay or denial of my application for a Principal Gaming Employee license and may subject me to civil or criminal liability. I also understand that providing the Department with false or misleading information is grounds for the Department to reject the application, or to suspend or revoke a license. I also understand that if I am issued a license, I have an ongoing obligation to comply with all licensing requirements and to promptly notify the Department if any information that I provided to the Department changes.

By a separate Authorization for Release of Information, I am authorizing any entity or individual that has information about me to release that information to the Department, its employees, agents, and vendors (collectively, "the Department"), for purposes of its investigation of the application for a sports betting license.

I expressly waive, release, discharge, and forever hold harmless and agree to indemnify, the Department, the Commonwealth of Virginia, and their employees, agents, and representatives, from liability for any and all claims or legal action arising from any actions that the Department or the Commonwealth Virginia may take related to the collection of information from the any individual or person and the use of that information in connection with investigating and processing the application for a Principal Gaming Employee license.

_____	_____
Signature of Individual Completing Form	Date
_____	_____
Printed Name	Title

NOTARY PUBLIC

The undersigned, a Notary Public in and for the County of _____, in the State 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

Printed Name

Stamp or Seal

My commission expires _____, 20____



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. Initials_____

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. Initials_____

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

Printed Name

Date

Title

NOTARY PUBLIC

The undersigned, a Notary Public in and for the County of _____, in the State 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

Printed Name

Stamp or Seal

My commission expires _____, 20____

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