

Iowa Racing and Gaming Commission (IRGC)

AUTHORIZED AGENT LICENSE APPLICATION

LICENSE FEE: \$10.00 Revised: 05/19/16

APPOINTEE (AGENT) MUST COMPLETE THIS SIDE OF FORM.
Please print legibly and use blue or black ink only.

Commission Use Only

Reviewing Official: _____

Category	Type	Occurred
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Date Licensed: _____

License Number: _____

License Fee: _____ CA _____

Fingerprint Fee: _____ CK _____

Total: _____ LA _____

FP Date: _____ State: _____

ID: _____ and _____

1. Name: Last _____ First _____ Middle (full name) _____	
Maiden Name (if applicable) _____	Aliases (if used) _____
2. Social Security No. * _____ -- _____ -- _____	

3. Date of Birth: DD/MM/YYYY _____	4. Place of Birth (City and State; List country if other than U.S.) _____	5. U.S. Citizen? Yes / No _____
6. Physical Description: Height _____ Weight _____ Gender _____ Eye Color _____ Hair Color _____ Racial/Ethnic Group _____		

7. Marital Status Married / Single _____	8. Spouse's name: Last _____ First _____ Middle Initial _____ Maiden Name (if applicable) _____
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9. Home Phone: () - _____	10. Bus. Phone: () - _____	11. Other: () - _____
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12. Permanent Mailing Address at which service of all papers may be made upon you. Number and Street or Rural Route _____ City _____ State _____ Zip Code _____	13. Current Local Address: Number and Street or Rural Route _____ City _____ State _____ Zip Code _____
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14. Questions:

A Have you ever been convicted, pled "guilty" or "no contest" to any criminal offense other than a traffic violation? (This includes adjudications of delinquency & military convictions, including summary court-martials.)		Yes	No
B Have you ever had your driver's license suspended or revoked?		Yes	No
C Have you ever been convicted of a gambling related offense?		Yes	No
D Have you ever been convicted or pled "guilty" or "no contest" to any alcohol or drug related offense?		Yes	No
E Have you ever received any type of a deferred judgment?		Yes	No
F Do you have any charges pending against you on any criminal offense (felony or misdemeanor)?		Yes	No
G Have you or your spouse ever been fined, suspended, or denied a license by a gaming or racing authority? (Racing industry participants only need to list suspensions of 10 days or more and fines of \$500 or more. These violations only need to be listed if violation occurred within the last five years or since last licensed in Iowa.)		Yes	No
H Have you ever been expelled, ejected, or denied privileges at any racetrack or gaming facility?		Yes	No
I Do you have any overdue income taxes, fines, court ordered legal obligations or judgments?		Yes	No
J Do you have any history of mental illness or repeated acts of violence?		Yes	No
K Do you have an addiction to alcohol or a controlled substance?		Yes	No
L Have you ever used a name other than your current legal name or maiden name?		Yes	No

15. Provide an explanation for each question in item 14 that was marked "Yes" (continue on a blank sheet of paper if needed).

Date (Mo/Yr)	County (if known)	State	Type of Offense (i.e., OWI, theft, etc.)	Category (i.e. simple, serious, or aggravated misdemeanor; or felony.)	Disposition (fine paid, jail, community service, etc.)
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Certification Statement: I hereby certify that the information provided on both sides of this application form is true and correct to the best of my knowledge and I agree to inform the Iowa Racing and Gaming Commission (Commission) of changes or updates to the information I have provided on this form, to include any criminal convictions.

I hereby make application for a license to be issued in accordance with the terms and provisions of the rules and regulations of the Commission. In making this application for a license to participate in racing and/or gaming, I understand that an investigative report may be made whereby information is obtained through personal interviews with third parties such as family members, business associates, financial sources (including requesting a credit report from a credit bureau), friends, neighbors, or others with whom I am acquainted. I further understand that this report will include information pertaining to my criminal history, credit history, character, general reputation and personal characteristics which may be applicable. **§99D.8A(4) and 99F.6(6) of the Code of Iowa: "A person who knowingly makes a false statement on the application is guilty of an aggravated misdemeanor." Penalty for such may result in a fine up to \$5,000, imprisonment up to 2 years, or both.** My signature verifies that I understand that failure to provide true and complete information, or failure to comply with Commission rules may result in a fine, suspension, denial, or revocation of this license.

Applicant's signature _____	Date _____
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* Disclosure of your social security number on this license application is required by 42 U.S.C. §666(a)(13) and Iowa Code Sections 252J.8(1) and 99D.8A.

PERSON MAKING THE APPOINTMENT OF AUTHORIZED AGENT:

Name: (please print)

(If applicable, state partnership, corporation or stable name.)

***Social Security Number:**

License Number:

APPOINTED AGENT INFORMATION:

NAME: _____ IRGC LICENSE #: _____

ADDRESS: _____

YEARS APPOINTED: _____

Action(s) Authorized, under the rules of the Iowa Racing and Gaming Commission in accordance with IAC 491 Chapter 10.	Check appropriate circle:	
To claim horses on my behalf	<input type="radio"/> YES	<input type="radio"/> NO
Authorization to collect purses & other money on my behalf, under the rules adopted by the Iowa Racing and Gaming Commission.	<input type="radio"/> YES	<input type="radio"/> NO
To enter or scratch horses on my behalf	<input type="radio"/> YES	<input type="radio"/> NO

PUBLIC NOTARY INFORMATION

State of _____

County of _____

Signed or attested before me on

_____ by _____
(Date) (Signature of person making the appointment)

Notary name (printed)

Notary Signature

My commission expires

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