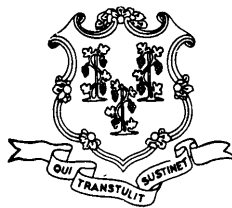


STATE OF CONNECTICUT
 DEPARTMENT OF CONSUMER PROTECTION
 @WbgYGFj Wg/ Charitable Games
 %) 7Ud]k`5j Ybi Y
 < UHcfX, CT 061S*
 Email: DCP.GamingCharitable@CT.gov
 Web site: www.ct.gov/dcp



**APPLICATION FOR REGISTRATION
 SEALED TICKET DISPENSING
 MACHINE EQUIPMENT DEALER**

CGE-10 REV 7/11

INSTRUCTIONS:

1. Owners/Officers of Manufacturer or Equipment Dealer must complete this form and, if necessary, use additional sheets. Have application notarized.
2. Fingerprint cards must be taken to the nearest law enforcement agency for fingerprinting. Ensure the agency does NOT use a fingerprint pad, as this device is unacceptable. Fingerprints must be CAREFULLY taken through use of ink and roller. Fingerprint cards may also be taken to the Department of Consumer Protection for automated fingerprinting, at no charge, by appointment only.
3. The registration fee for Equipment Dealers is \$625.00, and the registration fee for Equipment Manufacturers is \$1,250.00. The completed form must be mailed, along with a check payable to the **Treasurer of the State of Connecticut**, to the Department of Consumer Protection, **165 Capitol Ave., Hartford, CT 06106.**

NAME OF MANUFACTURER OR EQUIPMENT DEALER		REGISTRATION NUMBER (To be assigned by D.C.P.)	
ADDRESS OF MANUFACTURER OR EQUIPMENT DEALER (No. and Street)		(City or Town)	(State) (Zip Code)
MAILING ADDRESS (No. and Street)		(City or Town)	(State) (Zip Code)
TELEPHONE NUMBER ()	FEDERAL ID NUMBER	CT SALES TAX NUMBER	

OWNERS OR OFFICERS OF DISPENSING MACHINE MANUFACTURER OR EQUIPMENT DEALER

Complete the following information for each owner or officer of the applicant entity. For the purposes of this section, officers shall be deemed to be all persons serving as President, Vice-President, Secretary, Treasurer, Chairman of the Board or any such other officers as may be prescribed by the corporation-by-laws, partnership agreement or any other pertinent documents relative to the applicant entity. In cases where the applicant entity is other than a corporation, the term "officer" shall also include all partners and/or owners of the applicant entity. **(Note: Fingerprint cards (CT and FBI) are required for each owner or officer of the applicant entity, and must be filed with this application.)**

TITLE	NAME <small>(Last, First, Middle)</small>	RESIDENCE ADDRESS <small>(No. and Street, Town, State, Zip)</small>	DATE OF BIRTH <small>(Month, Day, Year)</small>

Be sure to inquire to all individuals listed above before answering the following question.

Have any of the above-named individuals been convicted of any crime, felony, misdemeanor, or other offense, including motor vehicle crimes (other than a traffic violation)? NO YES

A positive response requires attachment of an explanation, which must include the details of any conviction, such as the date of the conviction, the offense of which convicted, the Court location of conviction and the disposition made by the Court in the case – i.e. 30 days, \$50.00 fine, probation, etc. Failure to provide all details of any conviction may be cause for denial of the registration.

LIST OF SEALED TICKET DISPENSING MACHINE EQUIPMENT

Provide an inventory of all sealed ticket dispensing machine equipment available for purchase or rental in Connecticut. Include the name and model number of each dispensing machine listed, along with a brief description of its functions.

SIGNATURE OF OFFICER OF MANUFACTURER OR EQUIPMENT DEALER		TITLE OF OFFICER		DATE (Mo., Day, Yr.)
Subscribed and sworn to before me	SIGNED (Notary Public/JP/Comm. Superior Court)	TITLE	MY COMMISSION EXPIRES:	DATE (Mo., Day, Yr.)
APPLICATION FOR REGISTRATION IS APPROVED		DATE (Mo., Day, Yr.)		