



Retailer Application Packet Checklist

Before sealing your package to send back to the Lottery, make sure you have done the following:

1. ____ **Included** a check for **\$25**, payable to Idaho State Lottery Commission
[Application Fee, IDAPA 52.01.03 - 201.02(a)]
2. For Lottery terminals ONLY - **Included** a check for **\$200 one time fee (per Legal Entity and Idaho Lottery Retailer Certificate Location)** payable to Idaho State Lottery Commission.
[Lottery Certificate Fee - \$100, IDAPA 52.01.03 – 201.02(a), \$100, IDAPA 52.01.03 – 204.09(a)]
 - 2a. ____ *For Single accounts ONLY - Single Locations - \$200.00 per Legal Entity.*
 - OR**
 - 2b. ____ *For Chain accounts ONLY - Multiple Retailer Locations under a Single Legal Entity - \$200.00 per Idaho Lottery Retailer Certificate Location.*
3. ____ **Included** a copy of your original or temporary Idaho **State Police Alcohol Beverage License and/or Wine & Beer License** for all locations selling Alcohol.

Filled out each section of each form

4. ____ **BUSINESS APPLICATION (Legal Entity) - Signed & Dated**
5. ____ **W-9 (Request for Taxpayer Identification # & Certifications) - Signed & Dated**
6. ____ **RETAILER LOCATION FORM (Location selling Lottery Products) - Completed**
7. ____ **NEW RETAILER ACKNOWLEDGEMENT FORM (ADA) - Signed & Dated**
8. ____ **ELECTRONIC FUNDS TRANSFER AUTHORIZATION - Signed & Dated**
9. ____ **LOTTERY RETAILER CONTRACT SIGNATURE FORM – Signed & Dated**

Background Checks

10. ALL owners, members, managers, officers, directors, stockholders, partners, joint ventures, trustees **who own and/or controls 5% or more of such**; Securities, Corporations, Publicly Trade Corporations, Trusts, Partnerships, Joint Ventures, All General Partners, Limited Partners, Subsidiaries, Associations, Non-Profit, Fraternal, Governmental, Civic & Sole Proprietorships.

Each individual (for which the above applies) must complete separate background checks.

- 10a. ____ **INVESTIGATION AUTHORIZATION (credit check) - Signed & Dated**
- 10b. ____ **IDAHO STATE POLICE BUREAU of CRIMINAL IDENTIFICATION (Criminal check) - Signed & Dated**
11. ____ **Inserted** – All requested documents of the application packet & fees inside the return envelope.