



## **Retailer Application Packet Checklist**

**Before sealing up 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*).
2. For Lotto terminals **ONLY** - **Included** a check for **\$200 one time fee (per Legal Entity) - (per Idaho Lottery Retailer Certificate Location)** payable to Idaho State Lottery Commission (*Lottery Certificate Fee*).
  - 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** on 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 owns 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 to which the above applies must complete "2" different 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 application packet documents and fees are mailed back to the Lottery in the return envelope



# BUSINESS APPLICATION

**Application Fee: \$25.00**  
(non-refundable). Make check payable to: **Idaho State Lottery Commission**

PLEASE DO NOT WRITE IN THIS BLOCK (Office use only)

Application/Retailer # \_\_\_\_\_ Date Rec'd: \_\_\_\_\_

Chain# \_\_\_\_\_ Check #: \_\_\_\_\_

IS THIS BUSINESS CURRENTLY A LOTTERY RETAILER?

YES  NO Retailer # \_\_\_\_\_

1. INDICATE TYPE OF APPLICATION  Single Location  Multiple Locations  Ownership Change  
List main company address below, and attach a Retail Location Form for each retail location that will be selling Lottery products.

2. **BUSINESS/ ORGANIZATION NAME (LLC, INC....)** (as shown on your income tax return)

3. BUSINESS STREET ADDRESS (DELIVERY ADDRESS)

4. MAILING ADDRESS (IF DIFFERENT FROM ABOVE)  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

5. LOSS PREVENTION PERSON: \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

6. CONTACT PERSON: \_\_\_\_\_  
First Last  
TITLE: \_\_\_\_\_ PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_  
EMAIL: \_\_\_\_\_

7. CONTACT PERSON: \_\_\_\_\_  
First Last  
TITLE: \_\_\_\_\_ PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_  
EMAIL: \_\_\_\_\_

7. INDICATE TYPE OF BUSINESS/ORGANIZATION

- a.  Sole Proprietorship  Partnership  Governmental  L.L.C
- Corporation  Association, Fraternal or Civic (including Non-Profit)  Lease or Lease option

**NOTE:** A control person is anyone who **owns 5%** or more of the business. (must be listed)

b.	First Name ( Last Name )	Social Security Number	Percentage Of Ownership
1.			
2.			
3.			

c. **FOR EACH NAME LISTED ABOVE ATTACH AN INVESTIGATION AUTHORIZATION AND THE IDAHO STATE BUREAU OF CRIMINAL IDENTIFICATION**  
If there are more names than the spaces above, please list them on a separate sheet and also attach an Investigation Authorization and the Idaho State Police Bureau

8. If alcohol will be sold at the location selling lottery products, **please include a copy of the original or temporary ALCOHOL LICENSE with your application for each lottery location.**

A. Selling Alcohol?  Yes  No If Yes:  Copy of State Alcohol Beverage Control Agency License.

**INCOME TAX**

9. IDAHO WITHHOLDING #: \_\_\_\_\_ 10. IDAHO SELLERS PERMIT #: \_\_\_\_\_

11. **TAXPAYER IDENTIFICATION NUMBER (TIN)**

A. Social Security Number (SSN): \_\_\_\_\_ **OR** B. Employer Identification Number: \_\_\_\_\_

Name Registered to SSN: \_\_\_\_\_  
(If you use a your own Social Security Number, enter your name in the space marked **Business Name**)

Name Registered to EIN: \_\_\_\_\_  
(If you use a Federal Tax ID#, enter the name associated with that number as the **Business Name**)

**NOTE:** If you are a **Sole Owner** who uses your Social Security Number to file business taxes using DBA for your business, check **SOLE OWNERSHIP (Using SSN)**.  
**NOTE:** If you are a **Sole Owner** who uses a **Federal Tax ID Number** to file business taxes using DBA for your business, check **SOLE OWNERSHIP (Using EIN)**.

DISCLOSURE INFORMATION: I understand that a false answer to any of the foregoing can subject the applicant to denial or suspension or revocation of a certificate. I certify that all the information on this Business Application is complete and correct to the best of my knowledge and belief. I also understand that the person(s) shown in 7b must also complete the Investigation Authorization and the Idaho State Police Bureau of Criminal Identification required by the Idaho Lottery.

**APPLICANT/AUTHORIZED AGENT OF BUSINESS/ORGANIZATION: (Proprietor, Partner, Corporate Officer)**

Signature

Type or Print Name

Date

PLEASE NOTE: The information obtained will remain confidential.

# BUSINESS APPLICATION INSTRUCTIONS

1. Indicate type of application, whether a single or multiple location, or ownership change.
2. Legal Entity Business Name/Organization (as shown on your income tax return)
3. Business street address (actual physical location of business or corporate headquarters).
4. Mailing address of business or corporate headquarters.
5. Name of Loss Prevention person to contact regarding loss or theft within the business. This includes the person's title, work phone number, e-mail, and fax.
6. Name of person to contact regarding the application process. This includes the person's title, work phone number, e-mail, and fax.
- 7.a. Type of business/organization.
- 7.b. For disclosure purposes, please provide a listing of names, Social Security Numbers plus percentage of ownership for control persons in your organization. Please refer to the information below for guidance on control persons. Please attach a separate sheet for additional control persons.
- 7.c. Each person on 7b must also sign, have notarized and return the Control Person Investigation Authorization and Idaho State Bureau of Criminal Identification.
8. If you have answered yes to this question, please include a copy of your Alcohol Beverage License.
9. If you have an employee earning income while in Idaho, you must have an **Idaho Withholding Account**. This applies to all employees including agricultural, household help, and family members.
10. **Buying for Resale:** The buyer must have an **Idaho Seller's Permit Number** unless he is a wholesaler who makes no retail sales or an out-of-state retailer with no **Idaho** business presence (e.g. physical location, representatives or employees, etc.). An **Idaho Seller's Permit Number** has up to nine digits followed by an "S". **Example: 123456-S**
11. Federal Employer Identification (EIN): Corporations and partnerships enter **Federal Tax Reporting Number**. Sole proprietor enter Social Security Number (SSN).
12. Signature of person (owner, proprietor, partner, corporate officer, president).

## DISCLOSURE REQUIREMENTS FOR RETAILERS

1. If the prospective lottery game retailer is a corporation, the officers, directors, and each stock holder in such corporation; except that, in the case of stockholders of publicly held equity securities of a publicly traded corporation, only the names and addresses of those known to the Corporation to own five percent (5%) or more of such securities need to be disclosed;
2. If the prospective lottery game retailer is a trust, the trustee and all persons entitled to receive income or benefit from the trust needs to be disclosed;
3. If the prospective lottery game retailer is an association, the names of the members, officers and directors needs to be disclosed;
4. If the prospective lottery game retailer is a subsidiary, the officers, directors and each stockholder of the parent corporation thereof; except that, in the case of stockholders of a publicly traded corporation, only the names and addresses of those known to the corporation to own five percent (5%) or more of such securities need to be disclosed;
5. If the prospective lottery game retailer is a partnership or joint venture , all of the general partners, limited partners, or joint venturers need to be disclosed;
6. If the parent company, general partner, limited partner, or joint venturer of any prospective lottery game retailer is itself a corporation, trust, association, subsidiary, partnership, or joint venture, then all of the information required herein shall be disclosed for such other entity as if it were itself a prospective lottery game retailer to the end that full disclosure of ultimate ownership by achieved;
7. If any member of the immediate family of prospective lottery game retailer is involved in the lottery game retailer's business in any capacity then all of the information required herein shall be disclosed for such immediate family member as if such immediate family member were a prospective lottery game retailer;
8. The details of any felony conviction of a criminal offense, state or federal, of the retailer or any person whose names and addresses are required by the disclosure requirements of this section.

# Request for Taxpayer Identification Number and Certification

**Give Form to the  
 requester. Do not  
 send to the IRS.**

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type. See Specific instructions on page 3.	<p>1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.</p>	
	<p>2 Business name/disregarded entity name, if different from above</p>	
	<p>3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.</p> <p> <input type="checkbox"/> Individual/sole proprietor or single-member LLC                      <input type="checkbox"/> C Corporation                      <input type="checkbox"/> S Corporation                      <input type="checkbox"/> Partnership                      <input type="checkbox"/> Trust/estate             </p> <p> <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____             </p> <p><b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</p> <p> <input type="checkbox"/> Other (see instructions) ▶ _____             </p>	<p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p style="font-size: small;">(Applies to accounts maintained outside the U.S.)</p>
	<p>5 Address (number, street, and apt. or suite no.) See instructions.</p>	<p>Requester's name and address (optional)</p>
	<p>6 City, state, and ZIP code</p>	
	<p>7 List account number(s) here (optional)</p>	

### Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

<b>Social security number</b>														
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**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

or

<b>Employer identification number</b>																	
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### Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Signature of U.S. person ▶

### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-DIV (dividends, including those from stocks or mutual funds)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting*, later, for further information.

**Note:** If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States.

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

**Foreign person.** If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Pub. 515, *Withholding of Tax on Nonresident Aliens and Foreign Entities*).

**Nonresident alien who becomes a resident alien.** Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items.

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

**Example.** Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

## Backup Withholding

**What is backup withholding?** Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

**Payments you receive will be subject to backup withholding if:**

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the instructions for Part II for details),
3. The IRS tells the requester that you furnished an incorrect TIN,
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code*, later, and the separate Instructions for the Requester of Form W-9 for more information.

Also see *Special rules for partnerships*, earlier.

## What is FATCA Reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code*, later, and the Instructions for the Requester of Form W-9 for more information.

## Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

## Penalties

**Failure to furnish TIN.** If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

**Civil penalty for false information with respect to withholding.** If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

**Criminal penalty for falsifying information.** Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

**Misuse of TINs.** If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

## Specific Instructions

### Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account (other than an account maintained by a foreign financial institution (FFI)), list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9. If you are providing Form W-9 to an FFI to document a joint account, each holder of the account that is a U.S. person must provide a Form W-9.

a. **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

**Note: ITIN applicant:** Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.

c. **Partnership, LLC that is not a single-member LLC, C corporation, or S corporation.** Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.

d. **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.

e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

### Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

### Line 3

Check the appropriate box on line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box on line 3.

IF the entity/person on line 1 is a(n) . . .	THEN check the box for . . .
<ul style="list-style-type: none"> <li>Corporation</li> </ul>	Corporation
<ul style="list-style-type: none"> <li>Individual</li> <li>Sole proprietorship, or</li> <li>Single-member limited liability company (LLC) owned by an individual and disregarded for U.S. federal tax purposes.</li> </ul>	Individual/sole proprietor or single-member LLC
<ul style="list-style-type: none"> <li>LLC treated as a partnership for U.S. federal tax purposes,</li> <li>LLC that has filed Form 8832 or 2553 to be taxed as a corporation, or</li> <li>LLC that is disregarded as an entity separate from its owner but the owner is another LLC that is not disregarded for U.S. federal tax purposes.</li> </ul>	Limited liability company and enter the appropriate tax classification. (P= Partnership; C= C corporation; or S= S corporation)
<ul style="list-style-type: none"> <li>Partnership</li> </ul>	Partnership
<ul style="list-style-type: none"> <li>Trust/estate</li> </ul>	Trust/estate

### Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space on line 4 any code(s) that may apply to you.

#### Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

- 1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
- 2—The United States or any of its agencies or instrumentalities
- 3—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities
- 5—A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession
- 7—A futures commission merchant registered with the Commodity Futures Trading Commission
- 8—A real estate investment trust
- 9—An entity registered at all times during the tax year under the Investment Company Act of 1940
- 10—A common trust fund operated by a bank under section 584(a)
- 11—A financial institution
- 12—A middleman known in the investment community as a nominee or custodian
- 13—A trust exempt from tax under section 664 or described in section 4947



The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 <sup>1</sup>	Generally, exempt payees 1 through 5 <sup>2</sup>
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

<sup>1</sup> See Form 1099-MISC, Miscellaneous Income, and its instructions.

<sup>2</sup> However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

**Exemption from FATCA reporting code.** The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)

B—The United States or any of its agencies or instrumentalities

C—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)

E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state

G—A real estate investment trust

H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940

I—A common trust fund as defined in section 584(a)

J—A bank as defined in section 581

K—A broker

L—A trust exempt from tax under section 664 or described in section 4947(a)(1)

M—A tax exempt trust under a section 403(b) plan or section 457(g) plan

**Note:** You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

## Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns. If this address differs from the one the requester already has on file, write NEW at the top. If a new address is provided, there is still a chance the old address will be used until the payor changes your address in their records.

## Line 6

Enter your city, state, and ZIP code.

## Part I. Taxpayer Identification Number (TIN)

**Enter your TIN in the appropriate box.** If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN.

If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

**Note:** See *What Name and Number To Give the Requester*, later, for further clarification of name and TIN combinations.

**How to get a TIN.** If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at [www.SSA.gov](http://www.SSA.gov). You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at [www.irs.gov/Businesses](http://www.irs.gov/Businesses) and clicking on Employer Identification Number (EIN) under Starting a Business. Go to [www.irs.gov/Forms](http://www.irs.gov/Forms) to view, download, or print Form W-7 and/or Form SS-4. Or, you can go to [www.irs.gov/OrderForms](http://www.irs.gov/OrderForms) to place an order and have Form W-7 and/or SS-4 mailed to you within 10 business days.

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

**Note:** Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

**Caution:** A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

## Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, 4, or 5 below indicates otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code*, earlier.

**Signature requirements.** Complete the certification as indicated in items 1 through 5 below.

**1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983.**

You must give your correct TIN, but you do not have to sign the certification.

**2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983.**

You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

**3. Real estate transactions.** You must sign the certification. You may cross out item 2 of the certification.

**4. Other payments.** You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

**5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), ABLE accounts (under section 529A), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions.** You must give your correct TIN, but you do not have to sign the certification.

**What Name and Number To Give the Requester**

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account) other than an account maintained by an FFI	The actual owner of the account or, if combined funds, the first individual on the account <sup>1</sup>
3. Two or more U.S. persons (joint account maintained by an FFI)	Each holder of the account
4. Custodial account of a minor (Uniform Gift to Minors Act)	The minor <sup>2</sup>
5. a. The usual revocable savings trust (grantor is also trustee) b. So-called trust account that is not a legal or valid trust under state law	The grantor-trustee <sup>1</sup> The actual owner <sup>1</sup>
6. Sole proprietorship or disregarded entity owned by an individual	The owner <sup>3</sup>
7. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))	The grantor <sup>4</sup>

For this type of account:	Give name and EIN of:
8. Disregarded entity not owned by an individual	The owner
9. A valid trust, estate, or pension trust	Legal entity <sup>4</sup>
10. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
11. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
12. Partnership or multi-member LLC	The partnership
13. A broker or registered nominee	The broker or nominee

For this type of account:	Give name and EIN of:
14. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
15. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i)(B))	The trust

<sup>1</sup> List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

<sup>2</sup> Circle the minor's name and furnish the minor's SSN.

<sup>3</sup> You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

<sup>4</sup> List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships*, earlier.

**\*Note:** The grantor also must provide a Form W-9 to trustee of trust.

**Note:** If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

**Secure Your Tax Records From Identity Theft**

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Pub. 5027, Identity Theft Information for Taxpayers.

Victims of identity theft who are experiencing economic harm or a systemic problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

**Protect yourself from suspicious emails or phishing schemes.** Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.



The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to [phishing@irs.gov](mailto:phishing@irs.gov). You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at [spam@uce.gov](mailto:spam@uce.gov) or report them at [www.ftc.gov/complaint](http://www.ftc.gov/complaint). You can contact the FTC at [www.ftc.gov/idtheft](http://www.ftc.gov/idtheft) or 877-IDTHEFT (877-438-4338). If you have been the victim of identity theft, see [www.IdentityTheft.gov](http://www.IdentityTheft.gov) and Pub. 5027.

Visit [www.irs.gov/IdentityTheft](http://www.irs.gov/IdentityTheft) to learn more about identity theft and how to reduce your risk.

## Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.



# RETAILER LOCATION FORM

Lottery Certificate Fee: \$200 for each location  
(instructions on reverse)

PLEASE DO NOT WRITE IN THIS BLOCK

Application/Retailer # \_\_\_\_\_ (Office use only)

Was # \_\_\_\_\_  
 C  PT

Please include this form when returning the BUSINESS APPLICATION.

NOTE: This form must be filled out for **EACH LOCATION** selling Lottery Products.

**STORE INFORMATION:** ALL LOTTERY PRODUCTS  PULL-TABS ONLY

1. STORE NAME **This is the name on the front of the retail outlet (The name visible to the public).**

2. STORE STREET ADDRESS **(actual physical store location)**

City State Zip Code County Name

3. MAILING ADDRESS **(If different from above)**

City State Zip Code

4. EMAIL ADDRESS 5. FAX NUMBER

## AUTHORIZED CONTACT PERSON(S):

6. PRIMARY STORE CONTACT PERSON: \_\_\_\_\_  
**(Store Manager, Bookkeeper)** First Last

DAILY WORK SCHEDULE: \_\_\_\_\_ 'TIL \_\_\_\_\_ WORK DAYS \_\_\_\_\_

7. **STORE PHONE (MUST HAVE STORE PHONE)** ( ) -

**TYPE OF BUSINESS:** Number of cash registers/check stands \_\_\_\_\_

- 8.  Grocery/Supermarket  Restaurant/Bar  Variety/Drug Store  Bowling  Convenience/Market/No Fuel
- Convenience/W/Fuel  Fraternal  Truck Stop  Smokeshop  Governmental

## BUSINESS HOURS:

9. Day of Week	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Opening Time							
Closing Time							

10. Year round/seasonal describe: \_\_\_\_\_  
(Instructions on Reverse)

How long have you been in operation at this location?  
Years \_\_\_\_\_ Months \_\_\_\_\_

**STREET MAP**


**11. INDICATE RETAILER LOCATION ON STREET MAP  
DRAW & IDENTIFY CLOSEST INTERSECTION.**

N ↗

12. Please check if the business location or property is: \_\_\_\_\_ owned \_\_\_\_\_ leased  
If business is leased please list expiration date of lease: \_\_\_\_\_

13. If alcohol will be sold at the location selling lottery products, **please include a copy of the original or temporary ALCOHOL LICENSE with your application for each lottery location.**

Selling Alcohol?  Yes  No If Yes:  Copy of State Alcohol Beverage Control Agency License.

# RETAILER LOCATION FORM INSTRUCTIONS

**NOTE:** A copy of this form must be filled out for EACH LOCATION to be certified as a Lottery Retailer and a one-time \$200 fee (per location) for a Lottery Certificate will be charged to retailers who will have a validating/selling terminal. Please make check payable to: Idaho State Lottery Commission.

- 1-3. Please list Store Name, Store Street Address, and Mailing Address.
4. Please list e-mail address if you have one.
5. Please list fax number if you have one.
6. Please list the names of the primary person (store manager, bookkeeper) to contact at the retail location, his or her title, hours and days this person is at the retail location.
7. **MUST HAVE STORE PHONE NUMBER**
8. Type of business at this location. Be sure to note number of cash registers/check stands.
9. Hours of operation for this location,
10. (CIRCLE) year round or seasonal, if retailer location is a seasonal location. Please list closest dates and closed periods.
11. For our shipping and routing purposes, would you please make a brief sketch showing where this outlet is located. The map doesn't need to be detailed, please just indicate major roads or streets that will help us locate the outlet.
12. Please indicate if the building that houses the business is leased or owned.
13. **If the location will be selling alcohol, please include a copy of the original or temporary ALCOHOL LICENSE for each lottery location.**



Dear Lottery Retailer:

Thank you for applying to become an Idaho Lottery retail partner. Our valued retail partners are a vital part of our success in bringing fun and entertaining games to hundreds of thousands of Idaho Lottery players.

One prerequisite to approving Idaho Lottery retail applicants is acceptance of our plan to ensure their businesses are accessible to the public and serve the public convenience. Federal requirements dictate that we take a further step to determine that the sales of lottery tickets are accessible to all persons who wish to buy them, including those with disabilities.

The Idaho Lottery has implemented a plan aimed at assuring that all Lottery retailers are in compliance with the American with Disabilities Act (ADA) with regard to lottery ticket access and purchase. We cannot issue a permanent license to sell lottery tickets if you are not in compliance with the ADA as it applies to access to lottery products. However, in certain circumstances a provisional license may be issued.

If you meet other retail application requirements and receive a provisional license, we'll schedule a visit by one of our ADA Site Surveyors to your establishment. The survey will provide direction on what actions, if any, are needed to achieve ADA compliance.

Our goal is to help you achieve ADA compliance with minimum disruption and cost to your operation. The cost of achieving compliance with ADA regulations for lottery sales will never exceed 10% of your lottery gross profit in any single year.

If you have questions regarding your establishment's ability to achieve compliance, please contact Angela Vitek at 208-334-2277 or 1-800-432-5688.

Sincerely,

Jeffrey R. Anderson  
Director

### NEW RETAILER ACKNOWLEDGEMENT

By signing below you acknowledge receiving notification concerning the Idaho Lottery's Americans with Disabilities Requirements as it applies to access to lottery products. This acknowledgement must be signed and returned with your New Retailer application packet.

Retailer Name: \_\_\_\_\_

Retail Address: \_\_\_\_\_

Printed Name: \_\_\_\_\_

City: \_\_\_\_\_

Zip: \_\_\_\_\_

Signature: \_\_\_\_\_



# ELECTRONIC FUNDS TRANSFER AUTHORIZATION

PLEASE DO NOT WRITE IN THIS BLOCK

Application/Retailer # \_\_\_\_\_  
(Office use only)

**INSTRUCTIONS:**

1. Please complete the identifying information to allow the Idaho Lottery to make funds transfers electronically to or from the business' or organization's bank account.
2. Please attach a voided check or specification sheet to ensure proper account set-up.

BUSINESS/ ORGANIZATION NAME (LLC, INC....)

I (we) hereby authorize the Idaho State Lottery, hereinafter called LOTTERY, to initiate debit and/or credit entries to the \_\_\_\_\_ **CHECKING ACCOUNT** OR \_\_\_\_\_ **SAVINGS ACCOUNT** maintained at the bank shown below:

Bank Name: \_\_\_\_\_

Bank Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Account No.: \_\_\_\_\_ Date: \_\_\_\_\_ Branch Phone Number: \_\_\_\_\_

The person signing this Authorization warrants and represents that he/she has the full right, power and authority to execute this authorization on behalf of Retailer.

This authority is to remain in full force and effect until LOTTERY and our bank have received written notification from me (or either of us) of its termination in such time and in such manner as to afford LOTTERY and the bank a reasonable time to act on it.

3. **Name** (Proprietor, Partner, Corporate Officer) **Signature** **Date**

4. **Name** (Manager, Treasurer, Bookkeeper) **Signature** **Date**

**THIS FORM WILL NOT BE PROCESSED WITHOUT A VOID CHECK OR SPEC SHEET FROM BANK**

REQUIRED

**PLEASE ATTACH A VOID CHECK OR SPECIFICATION SHEET FROM BANK BRANCH**

PLEASE NOTE: The information obtained will remain confidential.



# INVESTIGATION AUTHORIZATION

PLEASE DO NOT WRITE IN THIS BLOCK

Application/Retailer # \_\_\_\_\_  
(Office use only)

**NOTE:** This form must be completed by each person listed in the "control person(s)" portion of the Business Application. Please sign, date and return with each application.

## IDENTIFYING INFORMATION (See reverse for Disclosure Requirements)

LEGAL ENTITY NAME (AS SHOWN ON YOUR TAX RETURN):				
STORE NAME (NAME VISIBLE TO THE PUBLIC):		BUSINESS PHONE:		
INDIVIDUAL'S FULL NAME:		AKA (Also known as, i.e. maiden name/nickname, etc.):		
DATE OF BIRTH:	PLACE OF BIRTH:	SOCIAL SECURITY NUMBER:	DRIVER LICENSE # AND STATE ISSUED:	
HOME ADDRESS:		CITY/STATE:	ZIP:	HOW LONG?
HOME PHONE:	CELL PHONE:	EMAIL:		

(Must have home number)

Is applicant a United States citizen?  Yes  No

### INVESTIGATION AUTHORIZATION AUTHORIZATION TO RELEASE INFORMATION WAIVER OF CLAIM FOR INACCURATE INFORMATION

I, \_\_\_\_\_, hereby authorize the Idaho State Lottery to conduct an investigation into my personal background using whatever legal means it deems appropriate. Persons requested to provide information which the Idaho State Lottery or its authorized representative determines is necessary, are hereby authorized to provide such information.

I understand that by signing this authorization, a criminal record check and a credit check will be performed.

I understand that the Idaho State Lottery may conduct a complete and comprehensive investigation to determine the accuracy of all information gathered. Further, the Idaho State Lottery Director, employees, agents, authorized representatives and other employees of the State of Idaho will not be held liable for inaccurate information, and I hereby waive any claim against the Idaho State Lottery Director, etc., for any matter that may arise in connection with the investigation into my personal background.

The Idaho State Lottery reserves the right to investigate all relevant information and facts to its satisfaction.

**ALL INFORMATION GATHERED AS A RESULT OF THIS INVESTIGATION WILL BE KEPT CONFIDENTIAL.**

Signature \_\_\_\_\_

Date \_\_\_\_\_

**PLEASE NOTE: The information obtained will remain confidential.**



# INVESTIGATION AUTHORIZATION INSTRUCTIONS

1. Please indicate business name and complete all the identifying information for each control person shown on 7b (and any attached listings) of Business Application.
2. Control person must read, notarize and sign the Investigation Authorization portion.
3. EACH INVESTIGATION AUTHORIZATION MUST BE NOTARIZED.

## DISCLOSURE REQUIREMENTS FOR RETAILERS

1. If the prospective lottery game retailer is a corporation, the officers, directors, and each stock holder in such corporation; except that, in the case of stockholders of publicly held equity securities of a publicly traded corporation, only the names and addresses of those known to the Corporation to own five percent (5%) or more of such securities need to be disclosed;
2. If the prospective lottery game retailer is a trust, the trustee and all persons entitled to receive income or benefit from the trust needs to be disclosed;
3. If the prospective lottery game retailer is an association, the names of the members, officers and directors needs to be disclosed;
4. If the prospective lottery game retailer is a subsidiary, the officers, directors and each stockholder of the parent corporation thereof; except that, in the case of stockholders of a publicly traded corporation, only the names and addresses of those known to the corporation to own five percent (5%) or more of such securities need to be disclosed;
5. If the prospective lottery game retailer is a partnership or joint venture , all of the general partners, limited partners, or joint venturers need to be disclosed;
6. If the parent company, general partner, limited partner, or joint venturer of any prospective lottery game retailer is itself a corporation, trust, association, subsidiary, partnership, or joint venture, then all of the information required herein shall be disclosed for such other entity as if it were itself a prospective lottery game retailer to the end that full disclosure of ultimate ownership be achieved;
7. If any member of the immediate family of prospective lottery game retailer is involved in the lottery game retailer's business in any capacity then all of the information required herein shall be disclosed for such immediate family member as if such immediate family member were a prospective lottery game retailer;
8. The details of any felony conviction of a criminal offense, state or federal, of the retailer or any person whose names and addresses are required by the disclosure requirements of this section.



**IDAHO STATE POLICE  
BUREAU OF CRIMINAL IDENTIFICATION  
NAME BASED CRIMINAL BACKGROUND CHECK FORM  
of the Idaho Central Repository of Criminal History Records  
Conducted for the Idaho Lottery**




*Please print clearly in blue or black ink only. **Illegible forms will be returned for clarification.***

***Incomplete forms will be returned unprocessed.***

<b>REQUEST</b>			
Please provide an Idaho Criminal History on the individual named below.			
Last Name	First Name	Middle Name	
Alias Names (Include Maiden/prior Married Names) <b>Please provide both first and last name.</b>			
Date of Birth (mm/dd/yyyy)	Social Security Number (optional)	Sex	Race
Address	City	State	Zip
<b>WAIVER</b>			
Idaho law does <b>not</b> require a waiver. However, without a signed waiver from the subject of the record, any arrest more than 12 months old, <b>without</b> a disposition, cannot be given to a non-criminal justice agency. Any waiver other than this waiver will not be accepted.			
I hereby give permission for the requester, named below, to receive any information maintained by the Idaho Bureau of Criminal Identification concerning myself.			
_____ Signature		_____ Date	
<i>This signature on the waiver must be within 180 days of the name check submission.</i>			

**TO BE COMPLETED BY IDAHO LOTTERY**  
***Incomplete forms will be returned unprocessed***

Requesting Person or Company  IDAHO LOTTERY PLEASE BILL BCI0059	Address of Requester (Results will be mailed to this address) Street <u>1199 SHORELINE LANE, SUITE 100</u> City, State & Zip Code <u>BOISE, ID 83702</u>
Printed Name of Requester (Print Legibly)  Tony Pittz	Signature of Requester  Phone Number of Requester  208-334-2277

**General Information:**

Idaho law does not require a person to give consent. However, without a signed release from the subject of record, any arrest more than 12 months old, without a disposition, cannot be given to a non-criminal justice agency. **Results of a Name Based Criminal Background check cannot be notarized.**

Criminal history record information furnished as a result of a non-fingerprint based computerized search is based solely on a search of identifiers provided in the request. Be aware it is not uncommon for criminal offenders to use alias names and false dates of birth, which would adversely affect the completeness and accuracy of a non-fingerprint based search of the Idaho Central Repository of Criminal History Records. No other state or federal agency records can be searched under current law. The bureau does not telephone or fax responses. Please allow ample time for processing this request. Requests are processed on a first come basis.

The records maintained by the Idaho Bureau of Criminal Identification (BCI) are based upon the felony and serious misdemeanor arrests reported to BCI from other Idaho criminal justice agencies. If a person disputes the accuracy of information obtained, that person may challenge the information by writing to the address on this form.

Idaho code 67-3008 (6) states, "A person or private agency or public agency, other than the department, shall not disseminate criminal history record information obtained from the department to a person or agency that is not a criminal justice agency or court without a signed release of the subject of record unless otherwise provided by law.

Return Completed form to:  
Idaho Lottery Enforcement Division  
PO Box 6537  
Boise, ID 83707

Checks conducted for the Idaho Lottery by:  
Bureau of Criminal Identification  
Idaho State Police  
Meridian, ID

Rev. 7/10/2017

# LOTTERY RETAILER CONTRACT SIGNATURE FORM



IDAHO LOTTERY  
P.O. BOX 6537  
BOISE, ID 83707

FILL OUT THIS FORM AND RETURN TO THE LOTTERY OFFICE.

**PLEASE DO NOT WRITE IN THIS BLOCK**

Application/Retailer #: \_\_\_\_\_  
(Office Use ONLY)

This contract is made by and between the Director, Idaho State Lottery, herein after (Lottery) and the Lottery Retailer (Retailer) named below who sells Idaho Lottery products. This contract supersedes any prior representation, understanding, or agreement with regard to the subject matter hereof.

1. **LEGAL ENTITY NAME (AS SHOWN ON YOUR TAX RETURN):**

\_\_\_\_\_

**STORE NAME (NAME VISIBLE TO THE PUBLIC):**

\_\_\_\_\_

**ADDRESS (actual physical store location)**

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

2. This contract represents the entire agreement between the parties who agree to be bound by its terms and conditions. (A copy of the Retailer's contract has been provided.)

The person signing this contract, warrants and represents that he/she has the full right, power and authority to execute this contract on behalf of the Retailer.

**SIGNATURE**

\_\_\_\_\_

(Proprietor, Partner, Corporate Officer)

**PRINT NAME** \_\_\_\_\_

**TITLE** \_\_\_\_\_

**DATE** \_\_\_\_\_

**INDICATE HERE** the Lottery product(s) you would like to be licensed to sell.

ALL Lottery Products: Scratch Games, Draw Games and PullTabs

PullTabs Only

RETAILER SECTION



# IDAHO LOTTERY RETAILER CONTRACT

## **SECTION I- DEFINITIONS**

**Central Gaming System** – The computer system, both hardware and software necessary to implement, conduct and provide draw game related products and services for Lottery games. This system enables all draw and scratch games to be sold, validated, redeemed and accounted for by Retailers.

**Commission** – The Idaho State Lottery Commission.

**Director** – The Director of the Lottery, appointed by the Governor.

**Draw Ticket** – A Lottery Terminal generated ticket issued to a player as a receipt for the play(s) and combination(s) and number of draws a player selected.

**DreamTouch Vending Machine** – A dispensing device that can sell/vend/burst twenty five (25) Scratch games and accommodate up to ten (10) Draw Games.

**DreamTouch SMART Vending Machine** - A low profile dispensing device that can sell/vend/burst twenty five (25) Scratch games and accommodate up to ten (10) Draw Games.

**Electronic Funds Transfer (EFT)** – The electronic bank sweep initiated by the Lottery to pay Retailers for credit due to them, and to collect money owed to the Lottery.

**Equipment** – All machines, Terminals, devices and hardware used to transport, process and display Lottery products and information.

**Genion/Check-a-Ticket** – A small 7 inch monitor and scanner which is connected to the Photon and serves as both a Check-a-Ticket (CAT) for scanning tickets for winners and also serves as a Customer Display Unit (CDU) which displays purchases for customers view and approval along with validation results for the player. The CDU is required by Lottery Contract to accompany all Photon installations to ensure customers are able to view purchases as well as validations.

**InstaPlay Ticket** - Pool-based instant Tickets generated by the Terminal with pre-determined odds and outcomes where there is no drawing and prizes are won instantly.

**Inventory** – Lottery Scratch Tickets in Retailer possession.

**Lottery** – Idaho State Lottery

**Lottery Terminal or Terminal** – On counter gaming device used to sell and validate Tickets as well as produce financial statements. The “terminal” can also be called the Photon.

**Non-Sufficient Funds (NSF)** – NSF is the status of a bank account that does not have enough money to cover transactions. Retailers will be debited NSF fees as assessed by the bank.

**Photon** – Lottery Terminal with a 15 inch full color touch screen display, printer, hand-held scanner, Ticket scanning tray and fully modular design and construction. The Photon kit includes the Terminal printer and Genion/Check-a-Ticket checker, which also functions as a Customer Display Unit (CDU). The CDU is required by Lottery Contract to accompany all Photon installations to ensure customers are able to view purchases as well as validations. The Photon Terminal sells Tickets, checks Tickets, validates Tickets, shows training videos and produces accounting/financial reports.

**Playslip** – Paper form containing sets of numbers which give players the ability to select individual numbers or a quick pick for a game that can be scanned to produce a Ticket for a current draw or multiple draws.

**Point-of-Sale (POS)** – Signage, stickers, banners, posters, buttons, etc., all provided by the Lottery and used to enhance sales at checkout and other places within a retail location.

**Premises** – Location where Retailer is authorized by the Lottery to sell Lottery products.

**Proton** – A smaller footprint, full selling Lottery terminal. The small footprint terminal has the same selling capabilities as the standard size Lottery Terminal and may be used for In Lane solutions.

**PullTab** – Also known as break-open tickets, have one or more perforated tabs that can be opened to reveal whether the player has winning numbers or symbols. This includes the electronic version dispensed through TouchTab machines.

**Retailer** – A business entity that is authorized by the Lottery to sell Lottery products.

**Retailer Certificate** – The signed document issued by the Director authorizing a retailer to sell Lottery products.

**Scratch Ticket** – Instant paper game with a concealed play area covered by latex (or another material) that is scratched off in accordance with the game instructions to reveal immediate results of the ticket.

**Ticket or Lottery Tickets** – Any tangible evidence issued by the Lottery to provide participation in a game conducted by the State Lottery. Includes Scratch Tickets, Draw Tickets, InstaPlay Tickets, and PullTabs.

## **SECTION II - GENERAL GUIDELINES FOR RETAILER CONTRACT**

### **2.1 TERMS**

#### **2.1.1 Incorporated Documents**

The Idaho Lottery's Administrative Rules ("Rules" or "Lottery Rules") are hereby incorporated by reference and made a part of this Contract. Detailed Lottery Rules, IDAPA 52.01.03, can be found at <https://adminrules.idaho.gov/rules/current/52/0103.pdf>.

#### **2.1.2 Agreement Period**

This Contract shall begin when the Contract is signed and when the Retailer Certificate is issued by the Director. The Retailer Certificate shall remain in effect as long as the Retailer complies with the provisions herein. The Agreement may be terminated by either party in accordance with the terms of this agreement.

#### **2.1.3 Non-Assignability of Contract**

The authority to act as a Retailer is not assignable or transferable. Furthermore, the Retailer may not transfer or assign any claim arising under this Contract.

#### **2.1.4 Indemnification**

The Retailer shall defend, protect, and hold harmless the State of Idaho, the Lottery, and its officers, agents, and employees thereof, from and against all claims, suits, or actions arising from any willful or negligent act or omission of the Retailer or its employees and agents while performing under the terms of this Contract.

#### **2.1.5 Attorney's Fees**

In the event a lawsuit of any kind is instituted on behalf of the State to collect monies due under this Contract, the Retailer agrees to pay such additional sums for reasonable attorney fees and court costs, plus all costs and disbursements incurred therein at trial or on appeal.

### **2.2 BUSINESS CONDUCT FOR LOTTERY RETAILERS**

#### **2.2.1 Sales Hours**

The Retailer agrees to sell and validate Lottery Tickets during the Retailer's



normal business hours or up to 23 ½ hours per day.

### **2.2.2 Sales Promotions**

The Retailer agrees to actively promote the sale of Lottery Tickets, and to utilize Point-of-Sale materials and displays.

### **2.2.3 Sale of Tickets**

The Retailer agrees to sell Tickets in accordance with the terms of the Idaho Lottery Act, (Idaho Code §§ 67-7401 et. Seq.), Idaho Rules, (IDAPA 52.01.03) and the terms of this Contract.

### **2.2.4 Sale of Lottery Tickets to Minors Prohibited**

In accordance with applicable state law, the sale of Lottery Tickets to persons under the age of eighteen (18) years is strictly prohibited. Violation of this section shall subject this Contract to termination and is also subject to criminal prosecution. See Idaho Code §§ 67-7413, 67-7415, and 67-7448(1).

### **2.2.5 Notification of Criminal Record**

If, at any time during the term of this Contract, a Retailer becomes aware that a Retailer employee or agent is convicted through court or administrative action, of a gambling-related offense or any other crime, or have a withheld judgment for the same, the Retailer shall, within 14 days, notify the Director, in writing, of such offense or crime. Failure to notify the Director may be grounds for termination. Crime, as used herein, means the violation of any gaming law, state, federal or local, or any other crime other than traffic infractions.

### **2.2.6 Access to Records**

The Lottery, the Idaho State Controller, or the Idaho State Legislative Auditor, and their duly authorized representatives or agents, shall have access to the books, documents, papers, and records of the Retailer which are directly pertinent to this contract for the purpose of making audits, examinations, excerpts, and transcripts.

### **2.2.7 Administrative Rules**

The Retailer agrees to comply with all the Administrative Rules of the Idaho Lottery. Further, by submitting an application and having been granted a Retailer Certificate from the Lottery Director, the Retailer agrees to be bound by all terms and conditions of this agreement.

### **2.2.8 Report of Change of Ownership or Location**

The Retailer will notify the Director, in writing, **at least 30 days** prior to

any change in ownership or location of the Retailer's business or organization. The Retailer is financially responsible for all Lottery charges until the Retailer properly reports a change of ownership or status. The Lottery or its agent may remove the Lottery Terminal, Inventory and Equipment from the premises. Change of ownership or location will not be released to the public by the Lottery except by request.

### **2.2.9 Transfer of Ownership**

Under no circumstances shall the Retailer Certificate be included in the description of property offered for sale by the Retailer. The right to possess any property, Equipment or Inventory and/or operate the Lottery Terminal, rests solely with the approved Retailer and shall not be transferable nor capable of being pledged, sold, mortgaged, encumbered or passed in any manner to subsequent business owner(s). All new owners must reapply to the Lottery for certification.

### **2.2.10 Weekly Communication Charges**

The Retailer agrees to pay a weekly communication fee of \$12.50. This fee shall be paid weekly via Electronic Funds Transfer and will appear on the Retailer's weekly statement.

### **2.2.11 Installation Charge**

The Retailer agrees to pay a one-time \$200 fee for installation charge.

### **2.2.12 Game Rules**

The Retailer shall comply with the specific rules of each Lottery game offered by the Lottery and/or the MUSL (Multi-State Lottery Association).

### **2.2.13 Retailer Employee Training**

The Retailer shall insure that all sales personnel with operational access are properly trained in the sales of all Lottery games sold by the Retailer.

### **2.2.14 Deceptive Advertising**

The Retailer shall not promote the sale of Tickets in a manner contrary to the principle that every Lottery Ticket has an equal and random chance of winning a prize.

### **2.2.15 Lottery Ticket Purchase Price**

The purchase price for a Lottery ticket sold by the Retailer shall be set by the Director. No Retailer or person can directly or indirectly charge more than the price set by the Lottery Director.

## **2.2.16 Treatment of Assets**

- a. Retailer shall have no ownership interest in any Lottery property, Terminals, Equipment, or Inventory. Retailer financial responsibility for Inventory in its possession is detailed in Section III of the contract.
- b. Any Lottery property furnished to the Retailer shall, unless otherwise provided herein or approved by the Director in writing, be used only for the performance of the Contract.
- c. The Retailer shall take any and all steps necessary to ensure that all Lottery products, Equipment and Inventory are: (1) operated only by authorized personnel; (2) protected from hazard or physical damage; (3) maintained properly; (4) safeguarded from tampering, abuse, or unauthorized use; and (5) that the Lottery will be promptly notified of damage, mechanical defects or problems. The Customer Display Unit (CDU) is required by Lottery Contract to accompany every Photon installation.
- d. The Retailer shall be responsible for any loss or damage to property of the Lottery which results from a negligent or willful act or omission of the Retailer or which results from the failure on the part of the Retailer to maintain and administer that property in accordance with sound management practices. The Retailer shall maintain insurance coverage as set forth in Section 3.5 of this Contract.

## **2.3 PAYMENT TO THE LOTTERY**

### **2.3.1 Form of Payment**

The Retailer shall make payments to the Lottery by an EFT or other method approved in advance, in writing, by the Director. All accounts shall be kept current. It is the sole responsibility of the Retailer to provide the correct bank account information. The Lottery shall specify the form(s) and frequency by which the Retailer shall make each payment. The Lottery will not accept any cash payments.

### **2.3.2 Non-Sufficient Funds (NSF) Notices**

All NSF fees will be posted to a Retailer's account upon receipt of a NSF notice from the Retailer's bank. An outstanding amount due must be paid by cashier's check and posted to account. Retailer will be subject to a service charge for each NSF.

### **2.3.3 Withholding of Funds**

In accordance with Idaho Code § 67-7448(1), willfully withholding of funds is a violation of Idaho law and the violating Retailer may be fined up

to \$5,000 or imprisoned up to six (6) months or be both fined and imprisoned.

#### **2.3.4 NSF Payment Plan**

Upon the discretion of the Lottery, if a Retailer has a past-due account balance, the Retailer may only be allowed to sell Lottery Tickets upon establishment of an approved payment plan. A payment plan must be arranged in advance and approved by the Director.

#### **2.3.5 Disconnection of Lottery Terminal Due to NSF**

If past due accounts are not paid, the Lottery may disconnect the Lottery Terminal(s) from the Central Gaming System permanently or, at the discretion of the Director, until the NSF amount is paid to the Lottery.

#### **2.3.6 Removal of All Lottery Inventory Due to NSF**

At the discretion of the Lottery, the Retailer License may be revoked for an NSF or rejection of payment due to incorrect bank account information. The Lottery may immediately retrieve all Lottery product and Inventory.

### **2.4 RETAILER WITHDRAWAL / TERMINATION**

#### **2.4.1 Advance Notice**

Voluntary withdrawal may be made by the Retailer at any time, but must be requested in writing to the Director **at least 14 days** in advance of the effective set date of the withdrawal.

#### **2.4.2 Contract Life**

Upon withdrawal, the Retailer shall surrender the Retailer Certificate, at which time the Contract shall terminate and all Lottery products, Equipment and Inventory shall be returned to the Lottery.

#### **2.4.3 The Lottery may suspend or revoke a Retailer Certificate for any reason, including, but not limited to:**

- a. Failure to meet or maintain the eligibility criteria for Retailer Certificate application and issuance established by Chapter 74, Title 67, Idaho Code or Idaho Lottery Administrative Rules;
- b. Violation of any of the provisions of Chapter 74, Title 67, Idaho Code, Idaho Lottery Administrative Rules, this contract, or the Retailer Certificate terms and conditions;
- c. Failure to file any return or report or to keep records required by the Lottery;

- d. Failure to maintain an acceptable level of financial responsibility as evidenced by the financial condition of the business, incidents of failure to pay taxes or other debts, or by the tendering of financial instruments which are dishonored;
- e. Payment to the Lottery is returned due to Non-Sufficient Funds in the account or due to incorrect bank account information.
- f. Fraud, deceit, misrepresentation, or other conduct prejudicial to the public confidence in the Lottery, as determined in the sole and reasonable discretion of the Lottery;
- g. The Lottery expects each Retailer to reach and maintain a weekly sales minimum of \$500 for combined sales of Scratch, Draw and PullTab Tickets. Failure to reach and maintain this minimum sales volume may be grounds for replacing the Lottery Terminal or any other Equipment with an alternative Terminal or Equipment (if available) or suspend or revoke the Retailer Certificate, at the Lottery's discretion. These minimum sales amounts may be modified throughout the life of the contract, at the Lottery's discretion;
- h. A history of thefts or other forms of losses of Lottery Tickets or revenue from the business;
- i. Violation any federal, state or local criminal law other than traffic infractions by Retailer, Retailer employee, agent, or by any person over whom the Retailer has substantial control;
- j. Selling Lottery Tickets for more than face value;
- k. Offering sale of Lottery Tickets or actually selling or otherwise transporting Lottery Tickets vial mail to out-of-state locations in violation of applicable federal law. See 18 U.S.C.A. § 1301.
- l. Obtaining a Retailer Certificate by fraud, misrepresentation, concealment or through inadvertence or mistake;
- m. Making a misrepresentation of fact to the Commission or the Lottery on any report, record, application form, or questionnaire required to be submitted to the Commission or the Lottery;
- n. Denying the Lottery or its authorized representative, including authorized local law enforcement agencies, access to any place where a Retailer Certificate activity is conducted;
- o. Failure to promptly produce for inspection or audit any book, record, document, or other item required to be produced by law, Lottery Rules, this contract, or the terms of the Retailer Certificate;

- p. Systematically pursuing economic gain in a manner or context which is in violation of the criminal or civil public policy of the state if such pursuit creates cause to believe that the participation of such person in these activities is contrary to the proper operation of the authorized Lottery, as determined by the sole and reasonable discretion of the Lottery;
- q. Failure to follow the instructions from the Lottery for the conduct of any particular game or special event;
- r. Failure to follow security procedures of the Lottery for the management of personnel, handling of Tickets, or for the conduct or any particular game or special event;
- s. Making a misrepresentation of fact to a purchaser, or prospective purchaser, regarding a Lottery Ticket, or to the general public with respect to the conduct of a particular Lottery game or special event;
- t. Allowing activities on the licensed premises which could compromise the dignity of the Lottery or State of Idaho, as determined in the sole and reasonable discretion of the Lottery.
- u. Failure to keep equipment required by Lottery Contract installed and functional at all times.

#### **2.4.4 Surrender of Certificate upon Revocation**

Upon revocation or suspension of a Retailer's Certificate, the Retailer shall return to the Lottery, by a date designated by the Lottery, the Retailer Certificate, all Equipment, Inventory, supplies, and any other property owned or leased by the Lottery.

#### **2.5 APPLICABILITY, GOVERNING LAW AND VENUE:**

This Contract shall be binding on the Retailer and Retailer's commencement of operation or continued operation as a Retailer represents Retailer's acknowledgment and agreement to the terms of this contract notwithstanding any lack of Retailer's execution and return of the contract to the Lottery. This contract shall supersede any and all prior agreements. This contract shall be interpreted pursuant to the law of the State of Idaho. Venue for all legal actions brought relating to this Contract shall be exclusively in the District Court of the Fourth Judicial District of the State of Idaho, in and for the County of Ada.

#### **FOR TRIBAL RETAILERS OPERATING WITHIN TRIBAL RESERVATION:**

Tribal Retailers hereby agree to waive tribal sovereign immunity from suit in Idaho State Courts for the sole and limited purpose of enforcement of the terms of this Contract, provided, however, that liability is limited to the recovery of no more



than the amount of money owed under this Contract.

### **FEDERAL AMERICANS WITH DISABILITIES ACT:**

"Under Title II of the Federal Americans with Disabilities Act, the Lottery must ensure that all Lottery products be accessible to individuals with disabilities.

With this in mind, the Lottery has developed a plan, which partners it with our Retailers to accomplish the goal of ADA Compliance with respect to offering and sale of all Lottery products. By signing this contract, you understand and agree Retailer locations must be ADA compliant, at Retailer expense, with respect to access to Lottery products and will allow the Lottery ADA Surveyor to perform a survey, including but not limited to, photographic documentation at Retailer location for verification. Failure to establish and maintain ADA compliant premises with respect to sale of Lottery products may result in termination of the contract.

## **SECTION III. RULES AND GUIDELINES**

### **3.1 SCRATCH TICKETS**

#### **3.1.1 Ticket Storage**

The Retailer shall store its unsold Scratch Tickets in a safe and secure place so as to minimize the risk of theft, loss, damage, or destruction.

#### **3.1.2 Tickets as Assets**

Financial responsibility to the Lottery for Scratch Tickets shall pass to the Retailer from the Lottery upon activation or settlement of said Tickets.

#### **3.1.3 Tickets Billed**

Scratch Ticket packs shall be billed to the Retailer account upon any of the following:

- 1). Upon settlement of a pack of Tickets,
- 2). Within sixty (60) days of activation,
- 3). When 75% of the low tier winning Tickets in the pack have been validated,
- 4). Other specific settlement terms per agreement between the Retailer and the Lottery.

#### **3.1.4 Credit for Unsold Tickets**

Upon withdrawal or termination, the Lottery will credit the Retailer's account for unsold Scratch Tickets.

#### **3.1.5 Credit for Defective, Damaged or Destroyed Scratch Tickets May Be Given under the Following Conditions, at the sole and reasonable discretion of the Lottery:**

- a. The defect is a result of a manufacturing error.
- b. The damage is due to circumstances beyond the control of the Retailer, such as a structural fire, flood, or other natural disaster
- c. The Scratch Ticket damage or destruction is accidentally caused by a Retailer or his/her employee or agent, but is not due to a continued pattern of neglect in the handling of Scratch Tickets.
- d. Scratch Tickets are destroyed by Lottery Equipment, with no negligence of Retailer or Retailer employee or agent in operation of such Equipment.
- e. All such damaged or defective Scratch Tickets are returned to the Lottery. Where Scratch Tickets are completely destroyed or a substantial portion of the Scratch Tickets are destroyed, an investigation will be conducted by the Lottery Security Director to verify that the circumstances surrounding the incident are consistent with the reported manner of destruction.
- f. Credit for accidentally destroyed, damaged or defective Scratch Tickets will be made upon receipt and accounting of such Scratch Tickets upon approval of the Director.

### **3.1.6 Credit Amount**

If given, credit for destroyed, damaged or defective Scratch Tickets will be based on the purchase price per Ticket, less commission.

## **3.2 DRAW TICKETS**

### **3.2.1 Voids and Cancellations**

The Retailer understands and agrees that no Draw Tickets may be voided or canceled, including Tickets printed in error. All Draw Tickets created are the financial responsibility of the Retailer.

### **3.2.2 No Credit for Retailer on Customer Errors**

The Retailer understands and agrees that under the Rules of the Lottery, there will be no credit given for Draw Tickets mistakenly dispensed, containing incorrect or mis-picked numbers, sold in error, or otherwise valid, but issued incorrectly.

### **3.2.3 Malfunction Error Credits**

Malfunction error credits due to printer errors, Terminal errors, Playslip reader problems, or jammed printers will be approved only by the Director and issued on a case by case basis, at the sole and reasonable discretion of the Director.

### **3.3 STOLEN LOTTERY TICKETS**

#### **3.3.1 Theft of Lottery Tickets**

Retailers who are victims of criminal acts which result in the theft or loss of Lottery Tickets may be credited with such loss under the following conditions:

- a. The loss is due to the criminal conduct of a person(s) other than the Retailer or Retailer, employee, agent, or representative.
- b. The crime is immediately reported to the appropriate law enforcement agency and to the Lottery Security Division.
- c. The Retailer cooperates in the investigation with the appropriate law enforcement agency and the Lottery Security Division.
- d. The investigating law enforcement agency and the Lottery Security Division conclude that the loss is due to the criminal conduct of a person(s) not connected in any way with the Retailer and the Lottery Ticket loss is not due to a continued pattern of neglect in handling Lottery Tickets. A continued pattern of neglect may occur when the Retailer has had more than one prior theft, loss, or incident of Lottery Ticket damage or destruction, which has resulted in an investigation by the Lottery Security Division and a recommendation to the Director and the Retailer as to what measures should be taken to correct the defects noted.
- e. It shall be within the discretion of the Director to determine how many such events shall constitute a continued pattern.
- f. Credit for stolen Lottery Tickets may be given upon approval of the Director after a report is filed by the Lottery Security Division.
- g. Lottery PullTab inventory is not transferable, assignable or sellable in the instance of any change of ownership of a Retailer's business, including any sale of the business. All PullTab Tickets must be destroyed. Credit will not be provided for those Tickets.

### **3.4 PAYMENT OF LOTTERY TICKET PRIZES BY RETAILER**

#### **3.4.1 Retailer Prize Payout Obligation**

The Retailer agrees to pay all Lottery Ticket prizes less than \$600, regardless of where they were sold, by validating the prize and, if determined to be a winning Lottery Ticket, making payment of the amount due the claimant. Prizes \$600 and over must be redeemed through the Idaho Lottery Office.

### **3.4.2 Prize Redemption Hours**

When presented, all validated winning Lottery Ticket(s) up to \$100, must be paid during selling hours. All prizes over \$100 and less than \$600 must be paid during selling hours, unless Retailer has specified payment hours. Payment hours must be at least six (6) hours per operating day.

### **3.4.3 Refusal to Pay Prizes**

If Retailer refuses to pay any prize less than \$600 during selling hours or specified and publically-posted payment hours, it may be grounds for termination or suspension of the Lottery contract and Retailer Certificate.

### **3.4.4 Prize Payment Method**

All prizes may be paid in cash, business check, certified check, or money order, or any combination thereof. If a Retailer check is dishonored, the Retailer may be subject to suspension and this Contract subject to termination, at Lottery discretion.

### **3.4.5 Obligation to Pay Prize after Validation**

If the Retailer validates a winning Lottery Ticket(s) according to the prize payout procedure, and a validation receipt is issued, the Retailer **must immediately** pay the prize. The validated Lottery Ticket(s) cannot be paid by the Lottery or any other Retailer. Failure to immediately pay a prize for which a validation receipt has been issued may be grounds for suspension or termination of the Lottery Contract.

### **3.4.6 Marking Winning Lottery Tickets**

After validating and redeeming a winning Lottery Ticket less than \$600, the Retailer shall mutilate, punch, mark, or destroy the Lottery Ticket to prevent the winning Ticket from being redeemed more than once.

### **3.4.7 Failure to Mark Winning Lottery Tickets**

A Retailer who pays a winning Lottery Ticket and fails to mutilate, punch, mark, or destroy the Lottery Ticket will be charged the prize amount paid out by a second Retailer for the Lottery Ticket if the Lottery Ticket is later redeemed and paid at another Retailer location.

### **3.4.8 Lottery Liability for Retailer Error in Prize Payout**

The Lottery shall have no liability for altered or counterfeit Lottery Tickets paid by the Retailer, or for Retailer error concerning what prize should be paid for a given Lottery Ticket.

### **3.5 LOTTERY PRODUCT(S), EQUIPMENT and STAFF**

#### **3.5.1 Removal or Replacement of Lottery Equipment**

If the Lottery Director determines the Lottery Equipment is not meeting the sales necessary to meet revenue requirements, he/she may remove or replace the Lottery Equipment at the Retailer location.

#### **3.5.2 Protection and Use**

The Retailer shall take any and all steps necessary to ensure that Lottery Product(s) and Equipment are operated only by authorized personnel, is protected from hazard or physical damage, is maintained properly, is safeguarded from tampering, abuse or unauthorized use and that the Lottery will be promptly notified of mechanical defects, problems or unauthorized movement or disconnecting of Lottery equipment. Proper notification and approval from the Lottery is required to remove, relocate, disconnect or relocate Lottery equipment.

The Retailer shall be responsible for any loss or damage to property of the Lottery which results from a negligent or willful act or omission of the Retailer or which results from the failure on the part of the Retailer to maintain and administer that property in accordance with sound management practices. The Retailer shall maintain insurance coverage as set forth in Section 3.5 of this Contract.

#### **3.5.3 Required Insurance**

Retailer shall obtain and maintain insurance at its own expense as required herein for the duration of the contract, and comply with all limits, terms and conditions stipulated. Policies shall be endorsed to provide all required coverage and Retailer shall provide certified endorsements from its insurer naming the Lottery and the State of Idaho as named additional insureds for the insurance required below.

All insurance shall be with insurers rated A-VII or better in the latest Bests Rating Guide and in good standing and authorized to transact business in Idaho. The coverage provided by such policies shall be primary. Policies may contain deductibles, but such deductibles shall not be deducted from any damages due the Lottery and State of Idaho. If any of the liability insurance required for this contract is arranged on a "claims-made" basis, "tail coverage" will be required at the completion or termination of this contract for a duration of twelve (12) months thereafter. Continuous "claims made" coverage will be acceptable in lieu of "tail coverage" provided the retroactive date is on or before the effective date of the contract, or twelve months "prior acts" coverage is provided. Retailer will be responsible for furnishing certification of "tail coverage" or continuous "claims made" coverage.

Retailer shall maintain insurance in amounts not less than the following:

- (1) Commercial General Liability (CGL) and, if necessary, commercial umbrella or excess liability with a limit of not less than \$100,000 each occurrence/\$300,000 annual aggregate.
- (2) Employee Dishonesty/Crime with a liability limit of \$500,000 per occurrence providing coverage for theft of Lottery Tickets in possession of Retailer, whether by Retailer employee, agent, or by someone outside control of Retailer, and coverage for Retailer employee and agent dishonesty, theft and embezzlement related to sale, validation, and redemption of Lottery Tickets presented to Retailer and Retailer employees and agents by lottery players.
- (3) Property Insurance to include coverage for all direct physical loss to Lottery Equipment, Terminals and Inventory.

#### **3.5.4 Lottery Staff**

At all times, Retailers will cooperate, be courteous, and provide business-like treatment to Lottery employees, officers, agents, and vendors, while they are performing duties related to this Contract and will require all of its employees to do the same. At all times, the Retailers will take all reasonable measures to protect Lottery staff who perform work at the Premises from interference by any persons on the Premises and will require all of its employees to do the same.

Lottery employees are expected to conduct themselves in a manner representative of the agency.

Complaints regarding violations of this section will be investigated by the Idaho Lottery. Confirmed and/or repeated violations could result in termination of a Retailer's Lottery license or discipline against the Lottery employee.

### **SECTION IV. RULES AND GUIDELINES FOR PULLTAB TICKETS**

#### **4.1 PULLTAB TICKET HANDLING**

##### **4.1.1 PullTab Ticket Price to Be Posted**

No boxes or packs of PullTab Tickets shall be sold without the cost of each Ticket clearly posted on the flare. The price per PullTab Ticket shall be determined by the Director.

##### **4.1.2 Claiming of Prizes**

Prizes must be redeemed on the same day as purchased, at the location where the winning PullTab Ticket was purchased, and the prize shall be awarded in cash or by check.



#### **4.2.3 PullTab Tickets Billed**

Boxes or issued and activated packs of PullTabs will be billed to the Retailers account within one week of the order date.

#### **4.2.4 Damaged, Marked, or Tampered PullTab Tickets**

No Retailer shall permit the display or sale of any PullTab Ticket which has been marked, defaced, tampered with, or otherwise placed in a condition, or operated in a manner, which may deceive the public or which affects the chances of winning or losing.

#### **4.2.5 Credit for Returned PullTab Tickets**

Once a box or pack of PullTab Tickets has been purchased, there shall be no returns or credit for any opened boxes or activated packs of PullTabs. Full un-opened boxes or non-activated packs of PullTabs may be returned for credit prior to the end of the game.