



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 # _____

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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)

(Instructions on Reverse)

(____) _____ - _____

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

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12. Please check if the business location or properties 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 STATE LIQUOR 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 Lottery.

- 1-3. Self-explanatory.
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. Self-explanatory.
13. **If the location will be selling alcohol, please include a copy of the original or temporary LIQUOR 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 Angie 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.

Retail Location Name: _____	Retail Address: _____
	City: _____ Zip: _____
Signature: _____	Printed Name: _____