



**WASHINGTON STATE GAMBLING COMMISSION**  
 LOCATION: 4565 7th Avenue SE, Lacey WA 98503  
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 TELEPHONE: 360-486-3440 / FAX NUMBER: 360-486-3630  
 TOLL-FREE: 1-800-345-2529 / WEBSITE: www.wsgc.wa.gov

**CARD GAMES (65/67) ADDENDUM**

1. Applicant's Name: \_\_\_\_\_  
 House-banked Card Games       Nonhouse-banked Card Games       Class F

2. Type of business:  
 Restaurant / Lounge    Tavern    Other (See Note below): \_\_\_\_\_

**NOTE:** Please review RCW 9.46.0217, WACs 230-03-170 and 230-03-175; only an established food or drink business may apply for a gambling license.

3. Did you purchase gambling games and / or equipment from the previous owner?  
 Yes     No    If Yes, provide a list of the games or pull-tab machines including;

- the name of the game
- the name of the manufacturer
- the manufacturer's Gambling Commission license number, and
- the Gambling Commission stamp number on the games.

Per WAC 230-06-110, gambling equipment can be transferred as part of the sale of a business as long as a condition of the sale is that the buyer receives a license before the sale is complete. See rule for recordkeeping requirements.

4. Who is your activity manager? The Public Card Room Manager will need to submit a *Personal / Criminal History Statement* (BLS-700-301) and a copy of a valid driver's license. Mandatory Training is required (see attached letter GC5-017).

Please provide full legal name. (Attach additional sheets using same format, as needed.)

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Middle Name: \_\_\_\_\_

**NOTE:** Commercial Stimulant Card Room applicants, with Class F, Nonhouse-banked and House-banked card games: All employees working in connection with the card room must be separately licensed as Public Card Room Employees. To secure an *Individual License Application* (GC4-022), please call or download from our internet site ([www.wsgc.wa.gov](http://www.wsgc.wa.gov)). See Chapter 230-15 WAC.

5. Please review the attached letters:

- *Responsibility to Report* (GC5-001) letter
- *House-Banked Card Room Application Process* (GC5-014) letter

6. FLOOR PLAN REQUIRED: Draw your business floor plan or make a copy of your existing plan. The copy should be no larger than 11" X 17". Be sure to include the property boundaries, service facility locations, exits, and entrances, both present and proposed. **Clearly mark and label all areas where your gambling activity will occur including amusement games, punch board / pull-tab, and card room locations.** Clearly mark the location of each gaming table, count room, surveillance room, and cage.

Is your business location adjacent to another business that provides a licensed gambling activity?  
 Yes     No

If you marked "Yes", please refer to the restrictions in WAC 230-06-046.

7. Estimate, in percentages, the amount of gross sales generated by each business activity listed. Note that gross sales from gambling activities are excluded, whereas other activities, such as vending machine sales or video rental income would be included. See RCW 9.46.070, WACs 230-03-170 and 230-03-175.

Food and drink consumed on the premises:      |\_\_|\_\_| %

Food / drinks "to go"                                        |\_\_|\_\_| %

Other Activities (Pool Table, Dart Boards, etc., - list all)

|\_\_\_\_\_|  
|\_\_\_\_\_| %

**TOTAL**    |\_1\_0\_0\_| %

**\*\* NOTE \*\***

In order to be licensed for gaming activities, your business must be primarily engaged in the selling of food and / or drink for on-premises consumption.

If the sale of food and drink for on-premises consumption does not exceed 50% of the **ALL** business activities listed, you probably do not qualify for a gambling license.

### **YOUR APPLICATION AND THE PUBLIC RECORDS ACT**

From the moment we receive your application, it becomes a public document subject to disclosure under the Public Records Act (RCW 42.56) and other Washington laws. The Commission may disclose to the public, other state or federal agencies, or discuss at a public meeting all information set forth in this application and all supplemental information submitted.

### **OATH OF APPLICATION**

I declare under penalty of perjury, under the laws of the State of Washington, that all information provided on this application is true and complete to the best of my knowledge. **I understand that untruthful, misleading, or incomplete answers whether through misrepresentation, concealment, inadvertence, or mistake, are cause for suspension or revocation of any gambling license(s) currently held, or denial of any future applications for a new license.**

I understand that I am responsible to know and comply with all rules and laws, RCW 9.46 and WAC 230, which can be found on the Internet websites of the Washington State Gambling Commission (<https://www.wsgc.wa.gov/regulation-enforcement>) or the Washington State Legislature (<http://leg.wa.gov/>). In the event I am the Designee, I also acknowledge that the Highest-Ranking Individual is also responsible to know and comply with all previously referenced rules and laws.

Signature: \_\_\_\_\_  
Sole Proprietor / Chief Executive Officer / LLC Manager / Partner / Designee

Date: |\_\_|/|\_\_|/|\_\_|\_\_|\_\_|  
MM / DD / YYYY