



THE MOHEGAN TRIBAL GAMING COMMISSION
NOTICE TO APPLICANTS AND RENEWALS

Authority:

Indian Gaming Regulatory Act, 25 U.S.C. § 2701 et seq.; Mohegan Tribal Ordinance 94-1 and Mohegan Tribal Resolution 2005-40.

Purpose:

To protect the Mohegan Tribe, its employees, patrons and the public by ensuring that gaming and non-gaming activities are free from criminal activities and corruptive elements. The required information is used to determine the suitability of the applicant to be licensed or associated with the Mohegan Sun Casino.

Disclosure of Information:

An applicant may be subject to denial for failing to provide all information on the documents, for failing to reveal any material facts, or for providing misleading or untrue information. The Mohegan Tribal Gaming Commission reserves the right to request additional information at any time. In signing the application, the applicant represents that it understands that false or misleading statements on any part of the application may be grounds for denial or revocation of the Mohegan Tribal Gaming Commission non-gaming business license.

Use of Application:

The information is requested to determine the eligibility of the vendor to do business with the Mohegan Sun Casino. The information will be used by the Mohegan Tribal Gaming Commission staff that has a need for the information in performing their official duties. The information may be disclosed to appropriate federal, tribal, state, local, or foreign law enforcement and regulatory agencies when relevant to civil, criminal, or regulatory investigations or actions, when required by The Mohegan Tribe in connection with the issuance or revocation of a non-gaming license or pursuant to an investigation of activities while associated with the Mohegan Sun Casino. Failure to provide the information requested in the application may result in the denial or revocation of a license. Licensing information submitted to the Mohegan Tribal Gaming Commission becomes the property of the Commission.

License Fees:

The fee for the initial issuance of a license is \$350.00. All checks shall be made payable to the Mohegan Tribe. Payment of such fee shall be in accordance with the regulations of The Mohegan Tribe. Please refer to the attached schedule for renewal fees.

Special Instructions:

Complete each question in full. If a question is not applicable, respond using "does not apply" or "none". Please print or type your responses. Handwritten responses must be printed **legibly**, and the application must be signed. If necessary, attach additional documents or explanation sheets. If you have any questions, contact Senior Investigator Leo Holowczak at (860) 862-7568. Applications and related fees should be mailed together to the Mohegan Tribal Gaming Commission, One Mohegan Sun Blvd., Uncasville, CT 06382, Attention: Non-Gaming License Applications.

*If you suspect that fraud, waste, or abuse is occurring at Mohegan Sun, please contact the **Confidential Fraud Hotline** at 860-862-6370.*

COMPLETED APPLICATIONS, TO INCLUDE ANY REQUIRED LICENSE FEE, MUST BE RETURNED TO THE MOHEGAN TRIBAL GAMING COMMISSION PRIOR TO THE EXPIRATION OF YOUR LICENSE. FAILING TO DO SO WILL CAUSE YOUR LICENSE TO DEACTIVATE AND YOU WILL NOT BE ALLOWED TO CONDUCT BUSINESS WITH THE MOHEGAN SUN.

Category Code: MTGC Use Only	
Vendor ID: MTGC Use Only	



THE MOHEGAN TRIBAL GAMING COMMISSION
NON-GAMING BUSINESS ENTITY NEW AND RENEWAL LICENSE APPLICATION

THIS FORM IS TO BE COMPLETED IN ITS ENTIRETY BY ALL CASINO SERVICE ENTITIES PROVIDING GOODS AND/OR SERVICES TO **MOHEGAN SUN** NOT DIRECTLY RELATED TO GAMING ACTIVITIES. ALL ANSWERS MUST BE COMPLETE AND TRUTHFUL. ***RESPOND BY USING "DOES NOT APPLY" OR "NONE" WHERE APPLICABLE.*** THIS FORM MUST BE SIGNED BY AN APPROPRIATE, AUTHORIZED INDIVIDUAL WITHIN THE BUSINESS ENTITY.

NEW APPLICATION

RENEWAL APPLICATION

NAME OF BUSINESS ENTITY:

HAVE YOU CONDUCTED YOUR BUSINESS UNDER A DIFFERENT BUSINESS NAME?

YES [] NO [] If 'YES', please list names:

PRINCIPAL BUSINESS ADDRESS:

MAILING ADDRESS (if different from principal address):

IS THE COMPANY PUBLICLY TRADED?

YES [] NO [] IF SO, PLEASE INDICATE SYMBOL AND EXCHANGE _____

COMPANY E-MAIL ADDRESS: _____

CONTACT PERSON: _____

TELEPHONE NUMBER: _____ FAX NUMBER: _____

STATE/JURISDICTION OF ORGANIZATION: _____

DUN AND BRADSTREET NUMBER (IF KNOWN): _____

NON-GAMING BUSINESS ENTITY NEW AND RENEWAL LICENSE APPLICATION

(Use the following space for additional information attaching additional sheets if necessary)

OFFICIAL CERTIFICATION BY COMPANY OFFICER:

I hereby certify that during the two year period preceding this license application/renewal and to the best of my knowledge and belief I have not made, nor has any of my key employees or agents made, nor have I/we caused to be made any cash payment, commission, employment or promise of employment, gift, entertainment, free travel, loan, free work, substantially discounted work or any other consideration to any employee of the Mohegan Tribal Gaming Authority (or its affiliates) who participated directly and substantially in the award of any contract to my business or to any employee of the Mohegan Tribal Gaming Authority (or its affiliates) having supervisory authority over the department awarding any such contract to my business.

Exceptions are as detailed below:

I also hereby certify that the above statements are true and correct to the best of my knowledge and belief, and that this statement is executed with the knowledge that any misrepresentations or falsifications may be deemed sufficient cause for the refusal to issue, or the revocation of, a non-gaming vendor license.

SIGNATURE OF COMPANY OFFICER: _____

PRINTED NAME: _____

TITLE: _____

EMAIL ADDRESS: _____

DATE: _____



THE MOHEGAN TRIBAL GAMING COMMISSION

RELEASE AUTHORIZATION

(TO BE COMPLETED BY ALL BUSINESS ENTITIES EXCEPT THOSE PUBLICLY TRADED)

To all Courts, Probation Departments, Selective Service Boards, Employers, Educational Institutions, Banks, Financial and other such Institutions, and all Governmental Agencies – federal, state and local, without exception, both foreign and domestic.

On behalf of _____,
(Business Entity)

I, _____,
*Printed Name and Title of Authorized Officer
(President, Chief Executive Officer, Partner, Sole Proprietor, or equivalent)*

have authorized the MOHEGAN TRIBAL GAMING COMMISSION to conduct a full investigation into the back-ground of the above-named entity.

Therefore, you are hereby authorized to release any and all information pertaining to such entity, documentary or otherwise, as requested by any investigator of the MOHEGAN TRIBAL GAMING COMMISSION, provided that he or she certifies to you that the listed business entity is requesting to do business with, or is currently doing business with, MOHEGAN SUN, or that the business is presently a licensee or registrant required to be qualified under the provisions of the applicable Connecticut Division of Special Revenue regulations.

This authorization shall supersede and countermand any prior request or authorization to the contrary.

A photocopy of this authorization will be considered as effective and valid as the original.

(Printed Name of Authorized Individual)

(Signature)

STATE OF _____)

COUNTY OF _____) ss:

Sworn and subscribed to

Before me on this _____

Day of _____, 20_____

Signature Notary Public

Commission Expiration Date

(SEAL)



**THE MOHEGAN TRIBAL GAMING COMMISSION
LICENSE RENEWAL FEE GUIDELINES
EFFECTIVE JANUARY 1, 2006**

Tier	Estimated Prior Year Sales *	Renewal Fee
1	\$500,000 and greater	\$750
2	\$5,000 to \$499,999	\$350

* This represents the combined sales to all entities owned or controlled by The Mohegan Tribal Gaming Authority.