



# Saginaw Chippewa Indian Tribe Of Michigan

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Department of Licensing    7500 Soaring Eagle Blvd    Tel. 989-775-5700  
And Compliance            Mt. Pleasant, MI 48858       Fax. 800-798-3007

## Non-Gaming Vendor Renewal

A Non-Gaming Vendors license expires on the 30<sup>th</sup> of September every year. A renewal application must be returned 30 days prior to this date. If no information has changed within that year, only a copy of the form, along with the necessary fees need to be returned.

If however, new information (such as a new principle, or the company's involvement in any civil litigation) has occurred that would change from the previous year, a new corporate or personal disclosure will need to be completed and returned.

Renewal fees for Non-Gaming Vendor Licenses are as follows:

1. \$300.00 for the business entity/corporation
2. \$500.00 for each New Subsidiary added after the original license
3. \$200.00 for each principal, partners, or control person and anyone owning more that 30% of the company from the original licensing application.
4. \$250.00 for each new principal, partners, or control persons and anyone owning more than 30% of the company after the original license issue.
5. In the event that significant new information is disclosed, the rate will be adjusted based on the investigative requirements. This rate will be discussed with the vendor prior to initiation of the investigation.

If you have any questions regarding these materials or the licensing process, please feel free to call (989) 775-5700, Monday through Friday 8:00-5:00 p.m. EST.

If you do not wish to renew your license at this time, please notify us in writing. Thank You for your continued cooperation regarding licensing with the Saginaw Chippewa Gaming Commission.



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And Compliance

7500 Soaring Eagle Blvd  
Mt. Pleasant, MI 48858

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## VENDOR LICENSE RENEWAL APPLICATION

1. Company Identity: \*

Company Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

\_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Company Phone: (\_\_\_\_\_)\_\_\_\_\_ Company Fax: (\_\_\_\_\_)\_\_\_\_\_

DUNS Number: \_\_\_\_\_ Website: \_\_\_\_\_

Federal Tax Number: \_\_\_\_\_

Gaming or Non-Gaming: \_\_\_\_\_

Contact: \_\_\_\_\_ Position: \_\_\_\_\_

Phone: (\_\_\_\_\_)\_\_\_\_\_ Email: \_\_\_\_\_

Trade Names Used: \_\_\_\_\_

Other names by which company is known: \_\_\_\_\_

**\*Change or add information as necessary**

2. Licensing Information:

Initial License Issue Date: \_\_\_\_\_ Vendor License Number: \_\_\_\_\_

Since the submission of your most recent application or renewal, has any of the above information changed or been revised?  
\_\_\_\_\_ Yes \_\_\_\_\_ No

Please note changes or revision:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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3. Submit as an exhibit, a summary of all material events or changes that have taken place since submitting your most recent application or renewal.
4. Since the submission of your most recent application or renewal, have any changes or amendments been made to the articles of incorporation, by-laws, partnership agreements, or other business structure?  
 \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, provide a copy of the changes as an exhibit.

5. Principal/Key Persons:

List all principals/key persons (corporate officers, board of directors, partners, key employees, and management contractors); also list all stockholders owning either:

15% or more interest if your company is a required to hold a GAMING VENDOR LICENSE.

**OR**

30% or more interest if your company is required to hold a NON-GAMING VENDOR LICENSE.

List full name, title, residence address, date of birth, and social security number. If the listed person is a key/principal person and a greater than 15% stockholder in a related corporation or business entity, circle "other" and attach a separate page detailing the identity, location, and nature. A "related corporation or business entity" means any corporation or business entity:

1. Which is wholly or partially owned by the applicant;
2. which is wholly or partially owned by a corporation or business entity or
3. Which is wholly or partially owned by a corporation or business entity which is owned in whole or in part by the applicant.

Last Name	First Name	Middle Initial	Other	D.O.B
Address		City/State/Zip		SSN

Last Name	First Name	Middle Initial	Other	D.O.B
Address		City/State/Zip		SSN

Last Name	First Name	Middle Initial	Other	D.O.B
Address		City/State/Zip		SSN

Attach addition page if needed

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6. Personal History Disclosure

Please provide a complete Personal History Disclosure Form (not a renewal) for each new principal/key person who has been added or changed since the submission of your most recent application or renewal.

Each principal/key person who has previously been submitted must supply a completed renewal form.

7. Principals/Key Persons/Subcontractors who are or have been tribal employees.

List all principals/Key persons who are or have been Tribal employees, showing their names, position or title, and state agency employer on a separate page.

8. Principals/Key Persons/Subcontractors who are immediate family members of tribal employees.

If a principal/key person or subcontractor of the business, or an employee of either is assigned to a tribal project, is an immediate family member of any tribal employee, or has a close personal relationship to any tribal employee, indicate each such person and Tribal Employee.

PERSON (VENDOR)	RELATIONSHIP	EMPLOYEE (TRIBE)

9. Gaming/Gambling Licenses, Goods and Services

Since the submission of your most recent application or renewal, has the company applied in any jurisdiction for any gambling or gaming licenses or permits? \_\_\_\_\_ YES \_\_\_\_\_ NO

- (a) If YES, list the license or permit type, license number (if applicable), jurisdiction, regulatory agency, agency address, agency contact person, agency telephone, date of licensing or permit, and license status, on a separate page.
- (b) If any gaming license has been revoked, suspended, denied or not renewed, provide a statement.

10. Criminal Investigations

Since the submission of your most recent application or renewal, has the vendor, a subsidiary, intermediary company, parent company, holding company, related corporation or business entity been the subject of a GRAND JURY or CRIMINAL INVESTIGATION? \_\_\_\_\_ YES \_\_\_\_\_ NO If yes, provide complete details as an exhibit.

11. Indictments and Convictions

Since the submission of your most recent application or renewal, has the vendor, a subsidiary, intermediary company, parent company, holding company, related corporation or business entity, or any principal/key person in any of the preceding ever been INDICTED, ARRESTED, OR CONVICTED for any criminal offense? \_\_\_\_\_ YES \_\_\_\_\_ NO If yes, provide complete details as an exhibit.

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12. Civil Actions

Since the submission of your most recent application or renewal, has the vendor, a subsidiary, intermediary company, parent company, holding company, related corporation or business entity, or any principal/key person in any of the preceding ever been involved in any civil lawsuit which was predicated in whole or in part upon conduct which allegedly constituted a crime or crimes.

\_\_\_\_\_ YES \_\_\_\_\_ NO If yes, provide complete details as an exhibit.

13. Judgments or Decrees

Since the submission of your most recent application or renewal, has the vendor, a subsidiary, intermediary company, parent company, holding company, related corporation or business entity, or control person in any of the preceding ever been the subject of any order, judgment, or decree of any court of competent jurisdiction permanently or temporarily enjoining it from, or otherwise limiting its participation in any type of business, practice, or authority?

\_\_\_\_\_ YES \_\_\_\_\_ NO If yes, provide complete details as an exhibit.

14. Subsidiary and Intermediary Companies

Since the submission of your most recent application or renewal list all **NEW** parent, intermediary companies, subsidiary companies, and related corporations or business entities, including company name, address, business telephone, company head, and description of the business or enterprise.

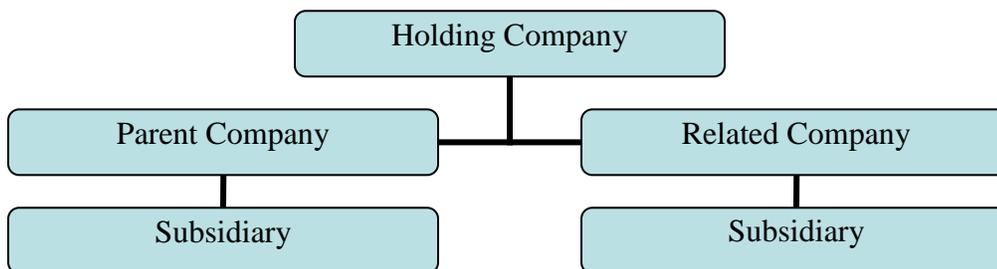
Please provide the above information as an exhibit.

15. Business Organizational Chart

Since the submission of your most recent application or renewal, has the business organizational chart changed? \_\_\_\_\_ YES \_\_\_\_\_ NO

Please attach a diagram of business relationships (refer to example) which depicts any direct and indirect business relationships between the vendor and parent companies, any business interest holder of ten percent (10%) or more, subsidiary companies, and related companies or business entities.

EXAMPLE CHART



Initial Page Here: \_\_\_\_\_

## 16. Holding Companies/Other Interest Holders

List any changes (since your submission of your most recent application or renewal), other entities, or individuals which hold any financial interest in this company. Include companies which have liens or other financial interest caused by company debt.

- (a) **LOANS MADE BY THE BUSINESS:** As an exhibit, list any persons or businesses which have been loaned monies, equipment, or assets by this company since the submission or your most recent application or renewal. List the entity name, address, date of the loan, amount or asset loaned, reason for such loan, and loan status.

## 17. Financial Information

Attach a copy of your most recent certified **FINANCIAL STATEMENT** for the past year as prepared by a certified public accountant. If you do not have your financial statement prepared by a certified public accountant, include copies of your corporate tax returns for the past year.

If applicable, provide a written summary on all mergers or acquisitions since the submission of your most recent applications or renewal.

18. List all persons, employees, consultants, sales agents, or other people involved in aiding the vendor efforts to do business with the **SAGINAW CHIPPEWA INDIAN TRIBE**. Include full names, dates of birth, and social security numbers.

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**REQUEST TO RELEASE INFORMATION**

Read each statement carefully and initial each of the following statements. The committing official's signature on the bottom indicates agreement with statement.

I understand that the information supplied in the Corporate Disclosure Form will be used by the SAGINAW CHIPPEWA GAMING COMMISSION to request any documents or other information required to completely investigate the company's background, including but not limited to, criminal and civil matters, credit history, or any other information the SAGINAW CHIPPEWA GAMING COMMISSION deems necessary. I authorize any information to be released from any originator or holder of such information to the SAGINAW CHIPPEWA GAMING COMMISSION. Further, it is understood and agreed to hereby release remise, and forever discharge the person to whom this request is presented, and his agents and employees from all manner of actions, causes of action, suits, debts, judgments, executions, claims, and demands whatsoever, known or unknown, in law or equity, which I/we ever had, now have, may have, or claim to have against the person to whom this request is presented or his agents or employees arising out of or by reason of complying with this request. \_\_\_\_\_ (INITIAL HERE)

I agree to indemnify and hold harmless the person to whom this request is presented and his agents or employees from and against all claims, damages, losses, and expenses, including reasonable attorney's fees arising out of or by reason of complying with this request. \_\_\_\_\_ (INITIAL HERE)

I understand that a false statement on any part of this application is grounds for not granting a Vendor License (Gaming or Non Gaming) granted by the SAGINAW CHIPPEWA GAMING COMMISSION. I also understand that making a false statement may be punishable by fine or imprisonment under 18 U.S.C. 1001. \_\_\_\_\_ (INITIAL HERE)

I hereby swear that the Company will abide by all applicable laws, regulations and policies of the SAGINAW CHIPPEWA GAMING COMMISSION and the United States. \_\_\_\_\_ (INITIAL HERE)

I hereby swear that all of the information contained herein is true and correct to the best of my knowledge, and that nothing has been withheld. \_\_\_\_\_ (INITIAL HERE)

I understand that a Vendor License (Gaming or Non-Gaming) expires on an annual basis; therefore, I agree to update the Corporate Disclosure Form on an annual basis. \_\_\_\_\_ (INITIAL HERE)

I understand and agree that failure to report any changes regarding the Corporate Disclosure Form may result in the suspension or termination of the Vendor License. (Gaming or Non-Gaming) \_\_\_\_\_ (INITIAL HERE)

A reproduction of this request by Xerox or similar process shall be for all intents and purposes as valid as the original. \_\_\_\_\_ (INITIALHERE)

\_\_\_\_\_  
Committing Official Signature

Date \_\_\_\_\_

\_\_\_\_\_  
Committing Official Printed Name

\_\_\_\_\_  
Committing Official's Position

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Witness Signature

Date \_\_\_\_\_

\_\_\_\_\_  
Witness Printed Name

\_\_\_\_\_  
Witness's Position

**CONSENT TO DISCLOSURE OF TAX INFORMATION**

I authorize the Internal Revenue Service to Disclose any of my returns and return information, as those terms are defined in section 610(b) of the Internal Revenue Code, for the tax year(s) listed below, to any law enforcement officer of the SAGINAW CHIPPEWA GAMING COMMISSION, the Office of the SAGINAW CHIPPEWA GAMING COMMISSION or their authorized agent.

I also authorize the Internal Revenue Service to disclose this information to any person to the extent the Internal Revenue Service deems necessary to clarify any matter pertaining to his information that is published, discussed, or otherwise disseminated in the public record.

I am aware that without this authorization, my returns and return information are confidential and are protected by law under the Internal Revenue Code.

Taxpayer's Name: \_\_\_\_\_  
(please print)

Social Security Number: \_\_\_\_\_

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

Tax Year(s) Waived: \_\_\_\_\_ through \_\_\_\_\_, inclusive  
(5 years ago today) (today's date)

Taxpayer's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

NOTE: Treasury Regulations require that the Internal Revenue Service must receive your consent within 60 days following the date on which you sign and date the consent.

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