CITY OF LAS VEGAS DEPARTMENT OF PLANNING BUSINESS LICENSING DIVISION 333 N. Rancho Dr., 6th Floor Las Vegas, NV 89106

Fax (702) 382-6642 TDD (702) 464-2540 E-mail us at <u>Business Licensing</u>

# **Privilege License Application**

## Part II - Personal History Form - Suitability Application

Approved for use by the City of Las Vegas
Business Licensing Division -- Department of Planning

#### **Application Instructions:**

PLEASE READ ALL INSTRUCTIONS CAREFULLY BEFORE COMPLETING APPLICATION
NOTE: ALL SUBMITTED FORMS BECOME THE PROPERTY OF THE LAS VEGAS METROPOLITIAN POLICE DEPARTMENT

- 1. This is an interactive on-line form. It is designed to be filled out on-line and printed once completed. If you choose to print a blank form and hand write the answers, click the top box on the first page of the application to expand the form. All hand written answers must be in black ink and in block lettering. Illegible applications <u>WILL NOT</u> be accepted.
- 2. Saving this document. The SAVE feature has been activated for this form. You may save the form to your computer at any time using Adobe Reader/Acrobat. Please **DO NOT SUBMIT THIS FORM ELECTRONICALLY**; this document contains sensitive personal information and is not designed to be secure via e-mail transmission.
- 3. You must make accurate statements and include all material facts. Any misrepresentation, or the failure to provide requested information, may result in the denial of your application.
- 4. Read each question carefully prior to answering. Answer every question completely. Do not leave blank spaces. If a question does not apply to you indicate "Does Not Apply." If there is nothing to disclose indicate "None." Failure to provide a response to every question could result in the rejection of your application and/or lengthen the amount of time needed to complete the investigation.
- 5. Signatures and initials must be made in black ink.
- 6. If the space available is insufficient to respond to a question, you are to supply the required information on an attachment page and clearly identify which question you are answering.
- 7. Additional information may be required by the City of Las Vegas Business Licensing or the Metro Police investigator. Failure to provide the requested documents in a timely manner could result in denial of your application.
- 8. Once you application is accepted, it becomes the property of the Las Vegas Metropolitan Police Department. It will not be returned and the LVMPD does not make copies of any documents relating to the application. The applicant is advised to make copies before submitting the application.
- 9. IT IS THE RESPONSIBILITY OF EACH APPLICANT FOR A LICENSE TO THOROUGHLY FAMILIARIZE HIMSELF/HERSELF WITH ALL APPLICABLE ORDINANCS, RULES AND REGULATIONS PERTAINING TO THE PARTICULAR LICENSE APPLIED FOR.

#### BE SURE TO.

- A. Attach a recent (within the past 6 months) passport size color photograph of yourself.
- B. **Sign and notarize** all applicable forms and pages.
- C. Initial each page.
- D. Include all required attachments.
- E. Retain a **copy** of the application for your records.
- F. Read, initial and sign TWO(2) copies of the Authorization to Release Information.
- G. Provide a **copy** of your driver's license or state issued identification card.

# **Personal History Form**

						Date fo	rm completed
If you wish to print this form and fi to open all the hidden tables/text any questions that may apply to yo you can manually add them via the	fields. This will a ou. For addition	allow you to e nal lines in eac	nter answers to h table/text field,		Lic	cense Ty	/pe
Name: Last (includes Sr., Jr., Etc., if applicable)	First				Middle		
Mailing Address (number and street)	Apt.#	City/Town		State/F	Province	Zip/Po	estal Code
Home Address (if different from mailing address)	Apt.#	City/Town		State/F	Province	Zip/Po	ostal Code
Present Business Address (number and street)	Suite#	City/Town		State/F	Province	Zip/Po	stal Code
Home Telephone Number	Present Busi	ness Telepho	ne Number		Cell/Mobile Telepho	one Num	nber
Date of Birth	Social Securi	ity Number			E-Mail Contact		
		•					
Sex Eye Color Hair Color		Height		Weigh	t		
<ol> <li>Have you ever been known by any other nan</li> <li>Place of Birth</li> </ol>	ne or names?(	Yes (	No				
3. Are you a US Citizen? Yes No	If yes, please attac	h a copy of your B	irth Certificate				
4. Have you ever been issued a passport?   Y	es No						
5. What is your <u>current</u> marital status?							
○ Married/Civil Union ○ Single ○ Divo	rced C Enga	aged C Le	gally Separated	$\bigcirc$ M	/idow/Widower		
6. Do you have any previous marriages?   Ye	es O No						
7. Do you have any children?  Yes  No							
8. List names, residence address, dates of birth If deceased, please note.	and most rece	nt occupatio	ns of parents, pa	rents-i	n-law or legal guar	dian.	
+ Name Relation	Living/ Deceased	Date of Birth	Current Ado	lress	Phone Numb	ber	Occupation
9. Do you have any brothers, sisters, and do the	ey have respect	tive spouses?	Yes () I	No			

have		rent residence(s) and worki ars (including residences w						
+	Date - From/To	Address	City/Town	County	State/Pro	vince	Country	Zip/Postal Code
	eginning with seconda uate school you have at	ry school (high school,) pro ttended.	vide the informa	ation below with	respect to eac	ch school, colle	ge, graduate	, or post
+	Dates - From/To	Name and Address of Sch Program, etc		Description o		List any D Certificatio		Graduated
the <u>p</u> Give Socia	nast 10 years. You do No dates of any unemploy I Security Administration of tion 12 either on this form		ion prior to age er sequence. Yo tory. If you choos	<b>18. Include all p</b> au may also attach	art-time and f a copy of your ' nust still provid	ull-time emplo "Work History" fo	yment and m rm that is avai formation refe	nilitary service lable from the renced in
-	Dates - From/To	Employer Name and M	lailing Address	Numb		Supervisor	Reason	for Leaving
	Salary	Job Title/Classi	fication		D	escription of Du	ıties	
12a. ' With 12b.	regard to the previous	yed, suspended, or asked to ly listed employment: with any infraction in relat				○ No		
<b>years</b> grand and s	s and can attest to your dparents, children, grandc	other information requested good character and reputa hildren, siblings, uncles, aunts, whole or half blood, by marriagness associate.	tion. No person nephews, nieces,	can be a referen fathers-in-law, mo	ce who is a me thers-in-law, so	ember of your f ons-in-law, daugi	<b>amily</b> (ie spou hters-in-law, b	ıse, parents, rothers-in-law
	rence One	Tolombono No		0			Vanua kun assa	_
Nam	ne .	Telephone No.		Occupation			Years know	<u>n</u>
Add	ress			Business Addı	ress			
Refe	rence Two							
Nam	ne	Telephone No.		Occupation			Years know	n
Add	ress			Business Addı	ess			

Reference i nree				
Name	Telephone No.	Occup	ation	Years known
Address		Busine	ess Address	
14. Have you ever served in a milita you been an active or inactive mem			'es 🔘 No	
The next question asks about arrest definitions and instructions which f		you may have commit	ted. Prior to answering this questi	on, carefully review the
For purposes of the question:  "ARRESTS" include any detaining, ho performance of any "offense"  "CHARGE" includes any indictment, c "OFFENSE" is all crimes to include: fel impaired motor vehicle offenses and v "CITATION" is an official summons to	omplaint, information, s onies, gross misdemean violations of probations	summons, or other notic nors, disorderly persons	ee of the alleged commission of any "o offenses, petty disorderly offenses, di	offense"
Instructions: Answer "yes" and provice You did not commit the off The charges were dismissed You completed a pretrial in You were not convicted. You did not serve any time The charges or offenses had 15. Have you ever been arrested or such as speeding, in any jurisdiction	fense charged.  Id or subsequently dove the control of the control	wngraded to a lesser chent diversionary progr	narge. ram in other jurisdictions.	
16. Have you ever been called to tes Licensing Agency, Grand Jury, Fede 17. List all current motor vehicle dri jurisdiction below:	ral Board, or Commiss	ion for any reason wha	olanes, boats, recreational vehicles,	, etc) issued to you in any
Date Last Issued	License Number	Type of License	Jurisdiction Issuing License	Expiration Date of License
18. Have you ever made application in any jurisdiction, including, but no Attorney, Medical, Boxing Promote Dog Owner, Securities Dealer, Continclude Alcoholic Beverage or Drive application was granted, denied, return 19. Have you made application for other authorization to participate in manufacturer of gaming/gambling lottery, sports betting, internet gan "Yes" to this question if you ever applied withdrawn, or is currently pending.  20. Have any of the licenses, permit questions ever been denied, susper	ot limited to the follow r, Manager or Matchma ractor, Pilot, Insurance er's License You must ar ed to you by the licensing or held a license, permin any form or type of ca equipment, junket open ning, etc., or alcoholic land your application was	ring: Real Estate Broke aker, Race Horse Owner, or any other type of passer "Yes" to this questicg agency for any reason, which it, registration, finding asino, gaming/gambling eration, horse racing, of beverage operation in as granted, denied, returnation of the second control of the	r or Salesman, Accountant, er, Trainer, Manager, Jockey, Race professional license? Do NOT on if you ever applied and your withdrawn, or is currently pending.  Jof suitability, qualification, or ng related operation, any dog racing, pari-mutual operation, any jurisdiction? You must answered to you by the agency for any reason, as identified in the previous	

21. Have you ever held a financial interest in a gambling venture, including race track, race horse, or race dog, Yes No lottery, casino, bookmaking operation, or pari-mutual outside the State of Nevada?
22. Have you ever been cited or charged with, or formally accused of, any violation of a statute, regulation, or code of any local, state, county, municipal, provincial, federal or national government Yes No other than a criminal, disorderly persons, petty disorderly person, or motor vehicle violation?
23. Have you ever had a warrant for your arrest, failure to appear or summons for anything, including traffic?
24. Have you ever been barred, trespassed, or otherwise excluded, for any reason other than for the denial, suspension or revocation of a license or registration from any form or type of casino or gaming/gambling related operation in any jurisdiction? Check "Yes" even if the disbarment or exclusion is no longer in effect or has been lifted.
25. Have you (as an individual, member of a partnership, or owner, director or officer of a corporation) or your spouse been party to a lawsuit, either as a plaintiff or defendant? This includes matrimonial matters, negligence matters, Yes No auto accident matters, contract matters, collection matters, debt matters, bank matters, bankruptcies, etc.
26. Have you ever owned or do you currently own a business either as a full owner or part-owner? Yes No
27. Have any individual, local, city, county, state, federal or any other governmental liens/debts been filed against you as an individual, sole proprietor, member of a partnership, or owner of a Yes No corporation in any jurisdiction?
28. Have you, as an individual, or any business entity in which you have been involved with filed any type of bankruptcy, insolvency or liquidation under any bankruptcy or insolvency law in any jurisdiction?
29. Will you have any type of slot machines/gaming devices in your establishment that are not owned by you? 🔘 Yes 🧪 No
30. Are you currently indebted to a gaming establishment?  Yes No
31. Do you intend to actively participate in the operation of this business for which this license is desired? Yes No  State position/reason below
32. Is entertainment to be used in this establishment?   Yes   No
33. Did another individual complete this application on your behalf?  Yes  No
DOCUMENT ATTACHMENT - REVIEW SECTION

Below is a listing of all additional documents that need to be attached/included with the submittal of this application. This list is based upon your answers to the previous questions in this document. This list is not all-inclusive as staff may request additional documents for submittal on a case-by-case basis.

**Question #28 - ATTACH COPY OF DISCHARGE** 

#### STATEMENT OF TRUTH AND ACKNOWLEDGMENTS

STATEMENT OF THOTTAND ACTION LEDGMENTS			
I,, being duly sworn, say that I have read the foregoing License Application, Suitability Application and financial representation and know the contents thereof, and that the same are true; that the same contains a full and true account of the information requested; and that I executed the same freely and voluntarily and for the uses and purposes therein mentioned, and with the full knowledge that misrepresentation or failure to reveal information request may be deemed sufficient evidence for refusal to issue, revocation of, the license applied for an should license applied for be granted, will abide by all city, county, state and federal laws, and fully understand that failure to do so may result in revocation proceedings.			
Further, I attest that:			
<ol> <li>I am the applicant who is submitting this application form.</li> <li>I personally supplied the information contained in this form.</li> <li>I understand and read the English language or I have had an interpreter read, explain and record the answer to each and every question on this application form.</li> <li>Any document accompanying this form that is not an original document is a certified copy of the original</li> </ol>			
document.  I swear (or affirm) that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, or misleading they will be documented and could result in denial of suitability for licensing.			
6. I understand that in case this application is withdrawn or denied, there shall be no refund of any investigation			
<ul> <li>fees paid.</li> <li>7. I agree to provide and disclose any information that reasonably relates to this application, the applicants qualifications, acceptability or fitness for an approval for suitability or for the requested license.</li> <li>8. I agree to be fingerprinted and photographed.</li> </ul>			
I do hereby agree that the City of Las Vegas may obtain information from my past and present employers, criminal justice agencies, financial institutions, Federal, State and local government agencies and other persons and entities and agree to release such information to the City of Las Vegas for use in connection with this application.			
I do, for myself, my heirs, executors, administrators, successors and assigns, hereby release, remise and forever discharge the City of Las Vegas, and its agents and employees from any and all manner of actions, claims and demands whatsoever, known or unknown, in all or equity, which I ever had, now have, may have to claim to have against the City of Las Vegas, or its agents or employees, arising out of its use of the information provided in this application or discovered during any investigation thereof.			
I do hereby certify that I have read and understand the			
State of			
County of Signature of Applicant			
Signature of Applicant Signed and Sworn to or Affirmed to before me thisday			

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Signature of Notarial Officer

of\_\_\_\_\_\_, 20\_\_\_**by** \_\_\_\_

### LAS VEGAS METROPOLITAN POLICE DEPARTMENT

# **AUTHORIZATION TO RELEASE INFORMATION**

APPLICA	ANTS NAME:	
FROM: L	AS VEGAS METROPOLITAN POLICE DEPARTMENT	NOTE: All items must be initialed
1	I understand that I am applying for a privileged license, per  Nevada and acknowledge that the burden of proving my q further understand that a full investigation will be made of the Las Vegas Metropolitan Police Department as agent of accept any risk of adverse public notice, embarrassment, cr respect to my application. This authorization and request is protection against unauthorized disclosure of information	ualifications for such a privilege is at all times upon me. I my background, character and financial responsibility by and for use by the city of Las Vegas/Clark County and I ticism or financial loss which may result from action with given freely and without duress, voluntarily waiving any
2	I hereby authorize and request all persons to whom this rec — concerning me, to furnish such information to a duly appoi Department, whether or not such information would other statutory or common law privilege.	nted officer of the Las Vegas Metropolitan Police
3	I hereby authorize and request all persons to whom this reconcerning me, to permit a duly appointed officer of the La copy any such documents, whether or not such documents constitutional, statutory or common law privilege.	s Vegas Metropolitan Police Department to review and
4	If the person to whom this request is presented is a brokera institution, or an officer of the same, I hereby authorize and Metropolitan Police Department be permitted to review an correspondence pertaining to me, including, but not limite checking account records, savings deposit records, safe departments. Such information showing the applicant's finances the application for an approval for suitability, as it relates	request that a duly appointed officer of the Las Vegas d obtain copies of any and all documents, records or d to, past loan information, notes co-signed by me, posit records, passbook records, and general ledger folion, net worth, or revenues which is submitted as a part of
5	If the person to whom this request is presented is a crimina—whether within or without the State of Nevada, I hereby au Vegas Metropolitan Police Department be permitted to revinvestigations, photographs or other information pertaining convictions, dispositions, investigative and intelligence information the gaming control board of the State of Nevada	horize and request that a duly appointed officer of the Las ew and obtain copies of any and all documents, records, g to me, including but not limited to arrests, charges, rmation, records of licensing and work permit agencies
6	I do hereby make, constitute and appoint any duly appoint  my true and lawful attorney in fact for me in my name, plac  (a) to request, review, copy, sign for otherwise act for in information in the possession of the person to whom th personally presented:  (b) to name the person or entity to whom this request i appropriate location on this request; and  (c) to place the name of the Las Vegas Metropolitan Pol appropriate location on this request.	e and stead, and on my behalf and for use and benefit: vestigative purposes with respect to documents and is request is presented as I might or could do if s presented and insert that person's name in the
7	I grant to said attorney in fact full power and authority to do- requisite, proper or necessary to be done in the exercise of intents and purposes as I might or could do if personally pr ratifying and confirming all that said attorney in fact, or his done by virtue of this power of attorney and the rights and	eany of the rights and powers herein granted, as fully to all esent, with full power of substitution or revocation, hereby substitute or substitutes, shall lawfully do or cause to be

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discharge the person to whom this request is presented, and his agents and employees, from any and all manner of actions, claims and demands whatsoever, known or unknown, in all or cequity, which I ever had, now have, may have to 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.  10. Ido, for myself, my heirs, executors, administrators, successors, and assigns, hereby release, remise and forever discharge the Las Vegas Metropolitan Police Department, and its agents and employees, from any and all manner of actions, claims and demands whatsoever, known or unknown, in all or equity, which I ever had, now have, may have to claim to have against the Las Vegas Metropolitan Police Department, or its agents or employees, arising out of or by reason of complying with this request.  11. A reproduction of this request by the xerox or similar process shall be for all intents and purposes as valid as the original.  12. I understand that falsifying my application is a Gross Misdemeanor (NRS 199.210).  13. I acknowledge that I have read the foregoing and understand the content and import thereof.  14. In witness whereof, I have executed this request at Las Vegas, Nevada, on the	8	This power of attorney ends eighteen months from the	e date of execution.
discharge the Las Vegas Metropolitea Police Department, and its agents and employees, from any and all manner of actions, claims and demands whatsoever, known or unknown, in all or equity, which I ever had, now have, may have to claim to have against the Las Vegas Metropolitan Police Department, or its agents or employees, arising out of or by reason of complying with this request.  A reproduction of this request by the xerox or similar process shall be for all intents and purposes as valid as the original.  I understand that falsifying my application is a Gross Misdemeanor (NRS 199.210).  I acknowledge that I have read the foregoing and understand the content and import thereof.  In witness whereof, I have executed this request at Las Vegas, Nevada, on the day of  Print Name Signature  State of  Signature of Notarial Officer  Signature of Notarial Officer  Signature of the Las Vegas Metropolitan Police Department Officer presenting this Request	9	discharge the person to whom this request is presented actions, claims and demands whatsoever, known or ur claim to have against the person to whom this request	ed, and his agents and employees, from any and all manner of nknown, in all or equity, which I ever had, now have, may have to
original.  112.	10	discharge the Las Vegas Metropolitan Police Departme actions, claims and demands whatsoever, known or ur claim to have against the Las Vegas Metropolitan Polic	ent, and its agents and employees, from any and all manner of nknown, in all or equity, which I ever had, now have, may have to
In witness whereof, I have executed this request at Las Vegas, Nevada, on the day of	11		process shall be for all intents and purposes as valid as the
In witness whereof, I have executed this request at Las Vegas, Nevada, on the day of	12	I understand that falsifying my application is a Gross N	1isdemeanor (NRS 199.210).
Print Name  State of  County of  Signed and Sworn to or Affirmed to before me this  day  of  Signature of Notarial Officer  Signature of the Las Vegas Metropolitan Police Department Officer presenting this Request	13	I acknowledge that I have read the foregoing and und	erstand the content and import thereof.
State of  County of  Signed and Sworn to or Affirmed to before me thisday  of, 20by   Signature of Notarial Officer  Signature of the Las Vegas Metropolitan Police Department Officer presenting this Request		In witness whereof, I have executed this request at <b>La</b>	<b>s vegas, Nevada</b> , on the day of
Signed and Sworn to or Affirmed to before me this		Print Name	Signature
Department Officer presenting this Request	<b>Co</b> Sig	gned and Sworn to or Affirmed to fore me thisday	Signature of Notarial Officer
Data:			Department Officer presenting this Request

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# LAS VEGAS METROPOLITAN POLICE DEPARTMENT

# **AUTHORIZATION TO RELEASE INFORMATION**

	ANTS NAME:LAS VEGAS METROPOLITAN POLICE DEPARTMENT	NOTE: All items must be initialed
		NOTE. All Items must be initialed
1	I understand that I am applying for a privileged license, per  Nevada and acknowledge that the burden of proving my q further understand that a full investigation will be made of the Las Vegas Metropolitan Police Department as agent of accept any risk of adverse public notice, embarrassment, cr respect to my application. This authorization and request i protection against unauthorized disclosure of information	ualifications for such a privilege is at all times upon me. I my background, character and financial responsibility by and for use by the city of Las Vegas/Clark County and I ticism or financial loss which may result from action with a given freely and without duress, voluntarily waiving any
2	I hereby authorize and request all persons to whom this reconcerning me, to furnish such information to a duly appoin Department, whether or not such information would other statutory or common law privilege.	nted officer of the Las Vegas Metropolitan Police
3	I hereby authorize and request all persons to whom this reconcerning me, to permit a duly appointed officer of the Lacopy any such documents, whether or not such documents constitutional, statutory or common law privilege.	s Vegas Metropolitan Police Department to review and
4	If the person to whom this request is presented is a brokera institution, or an officer of the same, I hereby authorize and Metropolitan Police Department be permitted to review an correspondence pertaining to me, including, but not limite checking account records, savings deposit records, safe desheets. Such information showing the applicant's finances the application for an approval for suitability, as it relates	request that a duly appointed officer of the Las Vegas d obtain copies of any and all documents, records or d to, past loan information, notes co-signed by me, posit records, passbook records, and general ledger folions, net worth, or revenues which is submitted as a part of
5	If the person to whom this request is presented is a crimina whether within or without the State of Nevada, I hereby au Vegas Metropolitan Police Department be permitted to revinvestigations, photographs or other information pertainin convictions, dispositions, investigative and intelligence information the gaming control board of the State of Nevada	thorize and request that a duly appointed officer of the Las iew and obtain copies of any and all documents, records, g to me, including but not limited to arrests, charges, rmation, records of licensing and work permit agencies
6.	I do hereby make, constitute and appoint any duly appoint my true and lawful attorney in fact for me in my name, place  (a) to request, review, copy, sign for otherwise act for in information in the possession of the person to whom the personally presented:  (b) to name the person or entity to whom this request is appropriate location on this request; and  (c) to place the name of the Las Vegas Metropolitan Posappropriate location on this request.	e and stead, and on my behalf and for use and benefit: vestigative purposes with respect to documents and is request is presented as I might or could do if s presented and insert that person's name in the
7	I grant to said attorney in fact full power and authority to d requisite, proper or necessary to be done in the exercise of intents and purposes as I might or could do if personally pr ratifying and confirming all that said attorney in fact, or his done by virtue of this power of attorney and the rights and	any of the rights and powers herein granted, as fully to all esent, with full power of substitution or revocation, hereby substitute or substitutes, shall lawfully do or cause to be

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8	This power of attorney ends eighteen months from tr	ie date of execution.
9	discharge the person to whom this request is present actions, claims and demands whatsoever, known or u	uccessors, and assigns, hereby release, remise and forever ed, and his agents and employees, from any and all manner of inknown, in all or equity, which I ever had, now have, may have to st is presented, or his agents or employees, arising out of or by
10	discharge the Las Vegas Metropolitan Police Departm actions, claims and demands whatsoever, known or u	uccessors, and assigns, hereby release, remise and forever nent, and its agents and employees, from any and all manner of inknown, in all or equity, which I ever had, now have, may have to ice Department, or its agents or employees, arising out of or by
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13.	I acknowledge that I have read the foregoing and und	derstand the content and import thereof.
	In witness whereof, I have executed this request at <b>La</b>	as Vegas, Nevada, on the day of
	Print Name	Signature
	ounty of	
	gned and Sworn to or Affirmed to efore me thisday	
of_	, 20 <b>by</b>	Signature of Notarial Officer
		Signature of the Las Vegas Metropolitan Police Department Officer presenting this Request
		Dato

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