

CHANGING BUSINESS STRUCTURE

_____ Call the ABCA (1-800-642-8208).

_____ Call the Secretary of State (1-866-767-8683).

WV Lottery will need:

_____ Page 1 & 2 - LVL Application

_____ Page 3 - ADA Compliance

_____ Call the Worker's Compensation office (1-304-558-6879) to obtain a copy of your policy.

_____ Call the Unemployment Compensation office (1-304-558-2677) and apply, with or without employees.

_____ Obtain a copy of your West Virginia Business Registration document.

* -If the purchased/merged location moves the video lottery terminals to a different location, the Lottery will need Location Transfer paperwork to be completed and the fee will need to be paid.

WV Lottery License Division
1-800-982-2274 ext. 245
1-304-558-0500 ext. 245



WEST VIRGINIA LIMITED VIDEO LOTTERY RETAILER
INITIAL APPLICATION

PLEASE PRINT OR TYPE. ATTACH ADDITIONAL SHEETS AS REQUESTED

1. **\$500 Non-refundable Application Fee – Select Method of Payment**

Business/Cashier's/Business Check # _____

Money Order # _____

Online Payment – Transaction ID # _____ (Include copy of receipt with transaction ID#)

2. Business Organization Name: _____

Doing Business as Name: _____

Location Phone No. _____ Fax No. _____

Location Address _____ City _____

County _____ State _____ Zip _____

Mailing Address _____ City _____

State _____ Zip _____

F.E.I.N (No Social Security Numbers, please) _____

Worker's Compensation or Exemption Number _____

3. List all names as required per type of business defined above and any executive employee or agent having power to significantly exercise influence in business operation. Each individual listed will also be required to complete the Individual Release (page 3).

NAME (Last name, First name, M.I.)

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4. Type of Business or Organization:

Sole Proprietorship – List owner

Partnership or Joint Venture– List each general partner, limited partner, or joint venture.

Corp. or Subsidiary, Association – List each officer and director (including those of the parent company if subsidiary.) Also list each stockholder, except of publicly owned. If publicly owned, list each stockholder who owns 5% or more stock and percentage of stock owned by each.

LLC, LLP – List each member, if member-managed; or Manager, if Manager-managed.

Fraternal - See Page 9 for additional information required for fraternal/veteran groups.



West Virginia Lottery Limited Video Lottery ADA Compliance

Upon information or belief, WV Lottery games at this location are accessible to customers with disabilities as required by the Americans with Disabilities Act. ___ Yes ___ No

Name of Location _____

Address: _____

City, State, Zip: _____

ABCA Number: _____

Signed: _____

Date: _____