



SPORTS WAGERING  
INTERIM LICENSE APPLICATION

West Virginia Lottery Commission

900 Pennsylvania Avenue  
Charleston, WV 25302

IN OFFICE USE ONLY

DATE STAMP

**Please Choose One:**  Management Services Provider  Supplier

The applicant is responsible for the license fee required under the Act. All payments must be made by cashier's check, certified check, company check or money order and made payable to the "West Virginia Lottery." You may also opt to pay online at the following link by choosing "Sports Wagering – License" The application fee is \$1000.  
<https://wvlottery.com/customer-service/licensing/online-payment-options/>

<b>Business Name</b>	
<b>DBA Name:</b>	

*(As it appears on the certificate of incorporation, charter, by-laws, partnership agreement, operating agreement or other official document)*

<b>Business Address:</b>			
	<i>(Street)</i>	<i>(City)</i>	<i>(State) (Zip)</i>
<b>Telephone #:</b>		<b>Fax #:</b>	
<b>Website:</b>		<b>FEIN #:</b>	
<b>WV State Tax Department Business Registration #:</b> <a href="https://tax.wv.gov/Documents/TaxForms/busapp.pdf">https://tax.wv.gov/Documents/TaxForms/busapp.pdf</a>			
<b>WV Secretary of State Certificate of Authorization #:</b> <i>Register your business online at <a href="http://www.business4wv.com">www.business4wv.com</a>, and select the option for register new business.</i>			
<b>Publicly Traded:</b>	<input type="radio"/> Yes <input type="radio"/> No		

**Appointed Liaison to provide assistance and cooperation to the Commission.**

*This person will accept official notices from the Commission on behalf of the applicant at the address listed below.*

<b>Last Name:</b>		<b>First Name:</b>	
<b>Address:</b>	<i>(Street) (City) (State) (Zip)</i>		
<b>Telephone #:</b>		<b>Email:</b>	

**(Circle One)** I hereby swear and affirm that I **HAVE** or **HAVE Not** been convicted of any violation of the State Lottery Act, the Sports Wagering Act, the Racetrack Video Lottery Act, the Limited Video Lottery Act, the Table Games Act, the Limited Gaming Facility Act, or of any misdemeanor related to theft, bribery, gambling or involving moral turpitude, or of any felony in this or in any other state or foreign country.

I hereby swear and affirm that I am licensed or hold a transactional license in another jurisdiction as a Sports Wagering Management Services Provider or a Sports Wagering Supplier (attach license certificate) and under the penalties of perjury, that the information set forth in this document is true and complete to the best of my knowledge. I have full authority to execute this affidavit of full disclosure on behalf of the licensee and otherwise bind the licensee to the above.

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

This form is authorized pursuant to W.Va. Code §§29-22D and W.Va. Code of State Rules §179-9. Failure to provide information could result in rejection of, or delay in, the processing of this application.

4/16/2021



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*Continued*

To expedite the interim application review process, please answer the following questions:

1.) Explain the flow of services between the management services provider and/or supplier?

2.) What data is provided to the management services provider and/or supplier?

3.) How is the data provided to the management services provider and/or supplier (through vendor API, custom integration, etc.)?

4.) How is the revenue shared?     CPA/Fixed Fee     Other

\*If other, please explain below:

5.) Is the revenue shared directly with a West Virginia Casino/Operator?     YES     NO

- If yes, please include fully executed contracts.



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*Continued*

6.) Please mark yes or no to each question below:

QUESTION	YES	NO
Do the services touch the platform?	<input type="checkbox"/>	<input type="checkbox"/>
Do the services provided involve gaming?	<input type="checkbox"/>	<input type="checkbox"/>
Is the business <b>advertising</b> odds or statistics?	<input type="checkbox"/>	<input type="checkbox"/>
Is the business <b>setting</b> odds or statistics?	<input type="checkbox"/>	<input type="checkbox"/>
Do the services provided integrate with a mobile application? <i>*If Yes: Please provide screen shots and access to your mobile application</i>	<input type="checkbox"/>	<input type="checkbox"/>

**The following is to be submitted as an attachment with the Interim application and fee. If not applicable or available, please explain on a separate sheet.**

- A list of services to be provided including any links to websites, powerpoint presentations, screen shots or information that will assist in our review process.
- An intent letter to work with a specific West Virginia casino (operator).
- A list of other Suppliers or Management Services Providers you are in contract with for West Virginia Operations.
- A list of jurisdictions where you are licensed, certified, or approved to conduct sports betting management services or supply sports betting equipment, systems or services *including license letters and/or certificates*.
- A list of independent testing laboratories where your product(s) have been tested and approved, if applicable.
- Certificates that your business is registered in West Virginia with the WV Secretary of State and the WV State Tax Department or receipts showing that you are in the process of registering your business. You may complete registration through the West Virginia One Stop Business portal.  
<https://business4.wv.gov/Pages/default.aspx>
- A list of all websites that your business is affiliated with for West Virginia Operations.