



APPLICATION FOR A CASINO SOFTWARE PROVIDER AUTHORIZATION

This is Schedule "N" to the Regulations Concerning Interactive Gaming

All information provided by the Applicant to the Commission will be held in the strictest confidence and will not be used by the Commission for any purpose other than matters pertaining to this application nor will the information be provided, in whole or in part, to any other party without the applicant's express written permission.

THIS APPLICATION FORM CONTAINS THE FOLLOWING DOCUMENTS.

- Instructions for completion
- Applicant information and related matters
- Documents and fees to accompany the application
- Oath or Solemn Affirmation of the Applicant

Instructions for Completion

1. This application must be completed by a duly authorized key person, director or other person duly authorized by the Applicant.
2. Type or print in BLOCK LETTERS an answer to every question.
3. All dates should be completed in the form: Day/Month/Year.
4. This form is to be completed in the English language. Any accompanying documents required to be provided are to have a certified English translation appended.
5. Failure to give complete and accurate information in this form may constitute an offence under the Commission's *Regulations concerning Interactive Gaming* and will be grounds for the Commission to refuse an application or suspend or revoke a Casino Software Provider Authorization that has been granted on the basis of the incomplete or inaccurate information.
6. The completed application including all necessary Schedules, fees and other information, must be forwarded to:

Kahnawake Gaming Commission
P.O. Box 1799
Mohawk Territory of Kahnawake, Quebec, Canada
J0L 1B0
7. This application should be sealed in an envelope, with accompanying documents, and marked "Private and Confidential".
8. Please enclose a money order or bank draft for the prescribed fees in the envelope or contact the Commission for wire instructions to forward the required fees directly to the Commission. An application will not be processed until all required application fees have been received by the Commission.
9. Any further enquiries should be directed to the Commission at info@gamingcommission.ca or +1 450 635 1076.

Applicant Information

Proposed start or "go live" date: _____

Name of Applicant (Name of Applicant company as it will appear on the Casino Software Provider Authorization "CSPA"):

Name of person making the Application on behalf of the Applicant:

Date of Application: _____

Website of Applicant: _____

Mailing address of Applicant:

Contact Information

Name of primary contact person: _____

Time zone in which contact person is located: _____

Business Telephone Number: _____

Alternate Business Telephone Number: _____

Mobile Number: _____

Fax Number: _____

Email address: _____

Alternate email address: _____

Casino Software Solutions to be provided to licensees

Type(s) of solutions(s) that you provide to B2C operators using your software (check as many as are appropriate and provide details)

Complete "Turnkey" Solution – Provide list of services provided in this solution

API/Plug-in Solution – Provide list of services provided in this solution

Other Solution – Describe fully the list of services

Documents and fees to accompany the application

This application is accompanied by:

- (a) A signed and properly attested Oath or Solemn Affirmation, in the form attached to this application;
- (b) A fully completed Business Entity Information Form, in the form attached as Schedule "B" to the Regulations;
- (c) Fully completed Personal Information Forms, in the form attached as Schedule "C" to the Regulations for each director and shareholder with ten (10%) per cent or more ownership of or controlling interest in the Applicant corporation;
- (d) Fully completed Key Person Licence Application Forms, in the form attached as Schedule "E" to the Regulations, for each of the Applicant's key persons;
- (e) Key Person Licence Application fees in the amount of Five Thousand (US\$5,000.00) US Dollars for each Key Person Application;
- (f) Except as otherwise directed by the Commission, a Control System Submission, in the form attached as Schedule "I" to the Regulations;
- (g) An Authorized Casino Software Provider application fee in the amount of Thirty Five Thousand (US\$35,000.00) US Dollars, which includes:
 - (i) the estimated cost of conducting the Commission's due diligence regarding the Applicant and the individuals who have provided Personal Information Forms (US\$15,000.00, non-refundable); and
 - (ii) the first annual licencing fee (US\$20,000.00, refundable if an application is not granted).

but which does not include any costs associated with the Commission's assessment of the Applicant's Control System Submission – which cost will be paid by the Applicant to the Commission upon being presented the appropriate invoice.

Oath or Solemn Affirmation of the Applicant

I, _____ of _____
swear or solemnly affirm that:

1. I am duly authorized to make this application on behalf of the Applicant and the matters to which I attest in this Oath or Solemn Affirmation are binding on the Applicant;
2. The information contained in this application, and the documents accompanying this application, is complete and accurate;
3. I understand that if any of the information in this application, or in the documents that accompany this application, is not complete or accurate, the Commission will not grant this application or, if the application has already been granted, may suspend or revoke the Casino Software Provider Authorization that was granted as the result of this application;
4. I have been read and understand the requirements of the Commission's *Regulations concerning Interactive Gaming* (available at www.gamingcommission.ca) (the "Regulations");
5. The Applicant has agreed to abide by the provisions of the *Kahnawake Gaming Law* (the "Law") and the Regulations;
6. The Law and the Regulations will be the law governing the Applicant's relationship with the Kahnawake Gaming Commission;
7. I understand that the Applicant must immediately notify the Commission in writing of any changes to the information in this application, failing which the Commission will not grant this application or, if the application has already been granted, may suspend or revoke the Casino Software Provider Authorization that was granted as the result of this application.

(Signature)

- Sworn before me, **or**
- Solemnly affirmed before me,

at _____

this _____ day of _____, 20____,

(Signature)

(Given name and name in block letters)

(Affix Seal of Office)

(Specify in which capacity this Oath is taken:
as Commissioner for Oaths, Justice of the Peace,
Lawyer, Notary, Mayor, Clerk or Secretary-Treasurer of
a municipality)