West Virginia Lottery Commission

900 Pennsylvania Avenue, Charleston, WV 25302



LVL Retailer Location Transfer Application

11/23



Contact:

_ The ABCA (1-800-642-8208 or 304-356-5500) and update your location on your liquor/beer license. (**Tell them you are doing a "Location Transfer").** (When moving limited video lottery machines, you will need to change both the current ABCA and limited video lottery licenses to the new location).

____ The Secretary of State (1-866-767-8683) requesting a change to the location address on your business license.

WV Lottery Required Documents:

_\$500 Non-refundable Location Transfer Fee

____LVL Application

Proof of current Workers' Compensation coverage or completed Exemption Form (pg. 5)

Proof of Compliance with Unemployment Compensation

Copy of WV Tax Business Registration Certificate

Lease/Rental Agreement for the location (unless owned by applicant)

If a change in County occurs with respect to the transfer of the location, a new EFT and Voided check is required

Please note: If a retailer with a Certificate of Reservation(s) (CORs) transfers the location of their business, the CORs lose their status and will revert to a BID permit. Location transfers with extenuating circumstances "beyond the control of the permittee" as discussed in 1795CSR 5 - 2.14 may be an exception to this general rule and will be reviewed on a case-by-case basis.

Mail completed application to: West Virginia Lottery Licensing Division

> P.O. Box 2067 Charleston, WV 25327-2067

WV Lottery Licensing Division 1-800-982-2274 ext. 1906 1-304-558-0500 ext. 1906



WEST VIRGINIA LIMITED VIDEO LOTTERY RETAILER LOCATION TRANSFER APPLICATION

PLEASE PRINT OR TYPE. ATTACH ADDITIONAL SHEETS AS NEEDED.

\$500 <i>Non-refundable</i> Application Fee – Sel	ect Method of Payment	
Business/Cashier's Check#:		
Money Order#:		
Online Payment – Transaction ID #:	(Include copy of receipt with transaction	n ID #)
Business Organization Name:		_
Doing Business as Name:		_
Location Phone No.:	Fax No:	
F.E.I.N (No Social Security #):	Workers' Compensation Policy #:	
Previous Licensed Location Address:		
City:County:	State:Zip:	
New Location Address:	County:	_
City:	State:Zip:	_
Mailing Address:		
City:	State:Zip:	_
having power to significantly exercise influen	ice in business operations. Each new individual listed	
NAME (Last name, First Name, M.I.)	POSITION	
	Business/Cashier's Check#: Money Order#: Online Payment – Transaction ID #: Business Organization Name: Doing Business as Name: Location Phone No.: F.E.I.N (No Social Security #): Previous Licensed Location Address: City: City: City: City: City: Location Address: City: Location Address: City: List all names as required per type of busin having power to significantly exercise influen be required to complete the Individual Releas	\$500 Non-refundable Application Fee - Select Method of Payment Business/Cashier's Check#: Money Order #: Online Payment - Transaction ID #: Under Transaction Name: Doing Business Organization Name: Doing Business as Name: Location Phone No.: F.E.I.N (No Social Security #): Workers' Compensation Policy #: City: County: State: Zip: Mailing Address: City: State: Zip: Mailing Address: City: State: Zip: Mailing Address: Oright of the Individual Release. NAME (Last name, First Name, M.I.) POSITION POSITION

5. DISCLOSURE STATEMENT (Read Carefully)

I, the undersigned, upon oath, do hereby declare that the foregoing information is true and complete. I authorize the Director, WEST VIRGINIA LOTTERY, to investigate any matter set forth in the lottery application including, but not limited to, financial records, financial sources, State Tax records, and criminal history, as necessary for entering into an agreement as a limited video lottery retailer. I will, upon request, execute such additional documents as are required to facilitate this process, including a criminal record check agreement form.

Ι (Licensee) hereby acknowledge and agree:

to bear all risks of adverse public notice, embarrassment, criticism, damages or financial loss which may result from any disclosure or publication of any material or information obtained by the Lottery Commission pursuant to action on an application and furthermore, expressly waive any and all claims against the Lottery Commission, the State of West Virginia and the employees of either for damages as a result of any background investigation, disclosure or publication relating to an application for a video lottery license or permit.

APPLICANT/AUTHORIZED AGENT/TRUSTEE OF BUSINESS/ORGANIZATION

		Type or Print Name	Title
		Signature	Date
	N	OTARY	
		nd for said County and State, th ing instrument as his/her volun	
IN WITNESS WHE	REOF, I,	, have e	executed this instrument in th
County of	, State of	, on this	is day of
, 20	·		
		Not	otary Public
My Commission Expire:			
County of Residence:			
	SEAL:		
			2



LIMITED VIDEO LOTTERY RETAILER DATA SHEET

DBA:					_ABCA	#:			
BusinessOrganizationNar	ne:								
Location Address:					_Count	y:			
	(Physic	cal Addres	s)						
City/State/Zip:									
Location Phone:			Lo	ocationN	Ianager	Name: _			
Business Owner Name:			B	susiness	Owner]	Email:			
Business Owner Phone:				Busines	s Owner	Cell:			
Business Hours: MON	TUES	WED	THUR	FRI	SA	SUN			
OPEN:							_		
CLOSED:							-		
Operator: (Operator - Compa					Operato	or Phone	:		
(Operator - Compa	any that suppli	ies your vide	eo lottery ter	minals)					
Dear Retailer:									
Below is a list of basic rec 0500 and ask for Limited				r more i	nformat	ion conta	act the V	WV Lotte	ry, 304-558-
A. Location must be in place of business th Measurement to be d	at sells petro	oleum proo	ducts capal						
B. Location must be in LVL Security.	excess of 30	0 feet fron	n a church,	school o	r day ca	re center.	Measur	ement to b	e determined b
C. ATM machines may area, the ATM must ATM must be located	be located in	n a separat							
For Lottery use only	: Formerly	y ABCA	#:						
Upgrade		narad	a ta	Drive	ato Cl	ub 4	to Ta	Vorn	Other
	DOw	nyraue	<u></u> ان	FIIVC		ub	ιστα	vem_	
Comm Solution Verifie	d/Contract	Amended	by SG		Initial		D	ate	

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BUSINESS ZONING COMPLIANCE

ZONING COMPLIANCE FOR A LIMITED VIDEO LOTTERY RETAILER LICENSE YOU ARE REQUIRED TO TAKE THIS FORM TO YOUR LOCAL CITY OR COUNTY ZONING OFFICE FOR COMPLETION. PLEASE RETURN THE COMPLETED FORM WITH YOUR APPLICATION.

To:

The Building Official of the Municipality of ______ The Building Official of the County of ______ The Clerk or Recorder of the Municipality of ______ The County Clerk/Administrator of the County of

Take Notice:

• West Virginia Limited Video Lottery Act [W.Va. Code §29-22B-1902(b)] says:

The provisions of this article preempt all regulations, rules, ordinances and laws of any county or municipality in conflict herewith: Provided <u>That nothing herein shall invalidate any zoning</u> <u>law</u>, under article 61-10-1, et seq., of this code.

(Complete one of the above)

• The following individual, business, fraternal organization, or veterans organization is applying to the State Lottery Commission for a limited video lottery retailer license within your jurisdiction:

	Business Name:
	Street Address:
	County:
	City:State:
	Zip Code:
• There is not (no) on the premises.	a zoning ordinance(s) that specifically would prohibit limited video lottery gaming
 the premises. Does the limited under West Virg authorized agent 	a zoning ordinance(s) that specifically would prohibit limited video lottery gaming on video lottery gaming on the premises constitute an allowed non-conforming use of the property inia Code Chapter, 8A? Yes No If yes, provide a letter signed by an t of the County Commission indicating the law, regulation, rule, ordinance or code prohibiting the deo lottery machines at this location as well as the reasoning for permitting the establishment to punty.
I <u>.</u>	, do hereby certify this is a true city/county zoning confirmation for this
"Business Zoning Compli	ance Form" for the Applicant applying for a Limited Video Lottery Retailer License which
was served on this the	day of, 20
Authorized signature for ju	risdiction Title

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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.
Name of Location:
Address:
City, State, Zip:
ABCA Number:
Signed:
Date:
For more information or to see where this information originated, visit the U.S. Department of Justice, Civil Rights Division's website at: www.usdoj.gov/crt/ada/adahom1.htm



WEST VIRGINIA LOTTERY WORKERS' COMPENSATION **EXEMPTION FORM**

*This form should only be completed when a business has no employees

If your business has zero employees, it is exempt from obtaining Workers' Compensation Coverage. All businesses must register with Workforce WV/Unemployment Compensation by calling 304.558.2677 to determine if they are exempt from Unemployment Compensation.

If you or your business is exempt from Workers' Compensation, please complete below.

Business Name:	
DBA Name:	
Street Address:	
City, State, Zip:	
Employees:	

If at any time your business acquires employees, you must disclose this information to the West Virginia Lottery by suppling the appropriate documentation.

I attest that all information written on this form is true and correct.

Signature:_____ Date: _____

AND SEMPLE			
1. Lottery ID # (to	be assigned):		
2. Retailer Name:			
3. Address:			
4. City/State/Zip:			
5. Telephone Num	oer:		
1. Name of Financi	FINANCIAL INFO al Institution:	RMATION	
	1		
2. Routing/ABA N	umber:		
 Routing/ABA N Denote Checkin 		Savings	
-	g or Savings: Checking	Savings	
 Denote Checkin Account Numbe 	g or Savings: Checking		noted above.
 3. Denote Checkin 4. Account Numbe <u>Must attach a v</u> I (We) hereby authors into m hereinafter called D to/from STATE. T WRITTEN NOTIF 	g or Savings: Checking	ip (savings) from account r einafter called STATE, to i the Financial Institution n the same any amounts ow e and effect until the STAT ation in such time and in s	nitiate debit and/or amed above, ed by or due me (us) FE has received
 3. Denote Checkin 4. Account Numbe <u>Must attach a v</u> I (We) hereby authors into m hereinafter called D to/from STATE. T WRITTEN NOTIF 	g or Savings: Checking r: <u>bided check (checking) or deposit s</u> prize the State of West Virginia, he by (our) account indicated above and EPOSITORY, to debit and/or cred his authority is to remain in full for CATION from me (us) to its termini	ip (savings) from account r einafter called STATE, to i the Financial Institution n the same any amounts ow e and effect until the STAT ation in such time and in s	nitiate debit and/or amed above, ed by or due me (us) FE has received
 Denote Checkin Account Number <u>Must attach a v</u> I (We) hereby authors into m hereinafter called D to/from STATE. T WRITTEN NOTIFE the STATE and DE 	g or Savings: Checking r: Checking) or deposit s bided check (checking) or deposit s brize the State of West Virginia, he by (our) account indicated above an EPOSITORY, to debit and/or cred his authority is to remain in full for CATION from me (us) to its termin POSITORY a reasonable opportun	ip (savings) from account r einafter called STATE, to i the Financial Institution n the same any amounts ow e and effect until the STAT ation in such time and in s ty to act on it.	nitiate debit and/or amed above, ed by or due me (us) TE has received uch manner as to aff

FREQUENTLY ASKED QUESTIONS ABOUT ADA

- Q: Are there limitations on the ADA's barrier removal requirements for existing facilities?
- A: Yes. Barrier removal need be accomplished only when it is "readily achievable" to do so.
- Q: What does the term "readily achievable" mean?
- A: It means "easily accomplishable and able to be carried out without much difficulty or expense."
- Q: How do I determine what **is** readily achievable?
- A: Determining if barrier removal is readily achievable is a case-by-case judgment. Because removing common barriers can be simple and inexpensive in some cases and difficult and costly in others, the regulations for the ADA provide a flexible approach to compliance. Factors to consider include: (1) the nature and cost of the action; (2) the overall financial resources of the site involved; (3) the number of persons employed at the site; (4) the effect on expenses and resources; (5) legitimate safety requirements necessary for safe operation; and (6) if applicable, the relationship with any parent corporation.
- Q: What are examples of the types of modifications that would be readily achievable in most cases?
 A: Examples include the simple ramping of a few steps, the installation of grab bars where only routine reinforcement of the wall is required, and similar modest adjustments.
- Q: Will businesses need to rearrange furniture and display racks?
- A: Possibly. For example, bars may need to rearrange tables in order to permit access to wheelchair users.
- Q: Does the ADA require existing buildings and newly constructed facilities to meet the same standards?
- A: No. The ADA establishes different requirements for existing facilities and newconstructions.
- Q: If an area of my store is reachable only by a flight of steps, would I be required to add an elevator?
 A: Usually, no. The readily achievable standard does not require barrier removal that requires burdensome expense, and in most cases, installing an elevator would qualify as a burdensome expense.
- Q: I have a portable ramp that we use for deliveries can't I just use that?
- A: Yes, you could, but only if the installation of a permanent ramp is not readily achievable. If you use a portable ramp, it should be properly secured and staff should be trained in its safe use.
- Q: What if I'm not able to remove barriers at this time due to my financial situation? Does that mean I'm relieved of current responsibilities?
- A: No. When you can demonstrate that the removal of barriers is not readily achievable, you must make your goods and services available through alternative methods, if such methods are available and readily achievable. Keep in mind that barrier removal is a continuing obligation that changes as your circumstances change.
- Q: When barrier removal is not readily achievable, must alternative steps be taken without regard to cost?A: No, only readily achievable alternative steps must be undertaken.
- Q: Must my business have handicapped-accessible restroom facilities?
- A: Not as far as your license with the West Virginia Lottery is concerned. <u>The Lottery is only</u> <u>interested in making sure that your lottery games are accessible to disabled persons.</u> That does not mean that as a private citizen you do not have other obligations under the ADA, such as accessibility to your restrooms, but it does means that the Lottery is not required to assure your compliance in regards to those other obligations in order to grant or renew a license.
- Q: I have removed all barriers that are readily achievable, but there are still barriers to my lottery games. Can I honestly say that I am in compliance with the ADA?
- A: <u>Yes. If you have removed all barriers that are readily achievable, then you are ADA-compliant, and may so answer on your license form.</u>



WEST VIRGINIA LOTTERY

LICENSING DIVISION CONTACT INFORMATION

Please mail completed applications to:

West Virginia Lottery Licensing Division P.O. BOX 2067 CHARLESTON WV 25327-2067

For questions, concerns or to check the status of your application for all retail locations contact: Marsha Sheets, Licensing Specialist 304-558-0500 Ext. 1906

For all other licensing questions or concerns you may contact: Elizabeth Webb, Deputy Director 304-558-0500 Ext. 1934

ADDITIONAL CONTACT INFORMATION

United States Department of Justice Civil Rights Division 800-514-0301 http://www.ada.gov

West Virginia Human Rights Commission 1321 Plaza East Room 108A Charleston, WV 25301-1400 Phone: 304-558-2616 Toll Free: 1-888-676-5546 http://www.hrc.wv.gov

> WV Lottery Commission Legal Division 304-558-0500 ext. 1802

Your local zoning or business compliance official may also be able to assist in answering your ADA questions.

PRIVACY NOTICE USAGE OF SOCIAL SECURITY NUMBERS

For persons who are neither Lottery Commissioners, Lottery officers nor Lottery employees, the West Virginia Lottery will only ask you for your social security number in the following circumstances:

- 1. You claim a lottery prize of \$600 or more directly from the Lottery, either by mail or personally at our Charleston or Weirton office. Your social security number is also your tax identification number, and the Internal Revenue Code requires that this prize payment be reported to the IRS along with the winner's tax identification number [Form W-2G]¹:
- 2. You are a sole proprietor of a business, a partner in a business, or the shareholder of an incorporated business that is a lottery retailer or sales agent, and the Lottery must prepare an IRS Form 1099 to report sales commissions received by you, along with a tax identification number if that number is also a social security number [Form 1099]; or
- 3. You are applying for a lottery license or permit and you must allow the Lottery to capture your fingerprint images to be transported to the FBI's National Criminal Information Center [NCIC] for criminal background investigation required by statutory or regulatory authority. This is an FBI requirement.

Disclosure of your social security number should only be made if obtained from you in accordance with Section 7 of the Privacy Act of 1974. Your disclosure is voluntary and failure to provide the number will not subject you to a criminal or civil penalty.

When the West Virginia Lottery obtains your social security number, it will use the number for the purpose(s) cited above. The Lottery will not sell or share this number with any other person or entity and will decline to make it available in response to any freedom of information request. Only government entities that are authorized to receive and use social security numbers by law will gain access, other than when outside access is ordered by a competent court of record.

If you have any questions or concerns about this privacy notice, or if you wish to submit a complaint regarding the Lottery's privacy policy, please contact the Legal Division at (304) 558-0500 extension 1802.

¹ Prize winners of more than \$600 who are unable or unwilling to submit their tax identification number are subject to federal income tax "back-up withholding" of 24% of the prize money.