TRADITIONAL RETAILER

OWNER/OFFICER/MEMBER CHANGE APPLICATION

900 Pennsylvania Avenue
Charleston, WV 25302
1-800-982-2274 ext. 1817

For a fillable version of this Form:

Please complete and submit this application only after the business/organization and its legal counsel have had an opportunity to read, review and understand W.Va. Code §29-22 et seq., W.Va. Code of State Rules §179-1 et seq., Lottery Policy Statements and the Traditional Retailer Handbook.

08/13/2026

TRADITIONAL RETAILER OWNER/OFFICER/MEMBER CHANGE INSTRUCTIONS

This form should be used when adding or updating an owner, officer, or member's information.

- **Each new Owner/Officer/Member added must complete the following:**
  - Owner/Officer/Member Application – pg. 1-2
  - Individual Release Form if adding new owner/officer/member – pg. 3-5 / PD Form Exhibit 1
    ** Each new person must complete this form*
  - Completed Fingerprint Release Form if adding new owner/officer/member – pg. 7 / Exhibit 2
    ** Each new person must complete this form*
  - Each new Owner/Officer/Member added will need to submit their fingerprints for a criminal review – pg. 6

  **If you have previously submitted fingerprints to the West Virginia Lottery, please contact the licensing specialist for further instructions.*

- **Mail or Email completed application to:**

West Virginia Lottery
Attn: Cynthia Hunter, Licensing Specialist
Licensing Division
P.O. Box 2067
Charleston, WV 25327-2067

chunter@wvlottery.com

If you have any questions or concerns, you may contact the West Virgina Lottery Licensing Division:

- **Cynthia Hunter**, Licensing Specialist 304-558-0500 Ext. 1817, chunter@wvlottery.com
- **Philip Dandy**, Manager 304-558-0500 Ext. 1907, philip.c.dandy@wvlottery.com
- **Elizabeth Webb**, Deputy Director 304-558-0500 Ext. 1934, ewebb@wvlottery.com

TRADITIONAL RETAILER OWNER/OFFICER/MEMBER CHANGE APPLICATION

DATE STAMP

PART 1 – BUSINESS INFORMATION

1. License Number: _____ ___ Independent ___ Chain Head/ Chain Sub ___ Franchisee

2. Business/Organization Name: _____

   Doing Business as Name: _____

   Phone Number: _____ Email: _____

   Mailing Address: _____ ___ Select if **NEW**

   City: _____ State: _____ Zip: _____ County: _____

   Shipping Address: _____ ___ Select if **NEW**

   City: _____ State: _____ Zip: _____ County: _____

   F.E.I.N. (No SSN#): _____ West Virginia Tax ID#: _____

PART 2 – APPLICANT OWNERSHIP INFORMATION

3. List all names identifying all Owners/Members/Officers in the table below. Each new individual being added to the license will also be required to complete the Individual Release and the Fingerprint Information forms.

   ___ Select if **NO** NEW individuals

Last Name:	First Name:	M.I.:

4. List all names of removed Owners/Officers/Members in the table below.

   ___ Select if **NO** individuals removed

Last Name:	First Name:	M.I.:

Disclaimer: By submitting this form, the licensee hereby acknowledges and attests that the information provided herein is true, correct and accurate. The licensee further agrees that by submitting this form, it absolves and releases the West Virginia Lottery from any and all liability and responsibility resulting from the licensee providing incorrect information herein, whether intentional or accidental, and additionally waives any claim or cause of action against the West Virginia Lottery resulting from any fraud, forgery or impropriety associated with the act of executing this form by the herein named individual on behalf of said licensee.

Signature: _____ Date: _____

PERSONAL DATA / FINANCIAL DISCLOSURE and RELEASE FORM

Trad – PD Form Exhibit 1

EACH individual listed as an Owner/ Officer/Member on Question #3 of this Application must complete this form.

PART 1:

Full Name: _____ Maiden Name/Other Name: _____

Social Security Number: _____ Phone Number: _____

Address of Personal Primary Residence: _____

City: _____ State: _____ Zip: _____

Date of Birth: Month: _____ Day: _____ 4 Digit Year: _____

List your form of Identification, i.e. Driver's License, Passport or Government ID, and Identification Number.

Copy Is Required: Form of ID: _____ Identification Number: _____

PART 2:

1. **Business/Organization Type:**

   ____ Corporation/Subsidiary ____ Joint Venture/Partnership ____ Trust ____ LLC/LLP ____ Other _____

2. **Relationship to Business/Organization:**

   ____ Principal ____ Partner ____ Officer/ Director ____ Trustee ____ Member

   ____ Manager ____ Stockholder ____Other (Explain)_____

PART 3:

Type of Business:

____ Limited Partnership ____% ____ General Partnership ____ % ____ Corporation ____ %

Indicate ALL relatives employed by the WV Lottery: _____ None:_____

PART 4:

1. If your primary source of income is not the Business/Organization Applicant, list your current employer and the address.

   Primary Employer: _____

   Address of Primary Employer: _____

   City: _____ State: _____ Zip: _____

2. Citizenship/Residency: West Virginia Resident ____ YES ____ NO / United States Citizen ____ Yes ____ No

3. If you are a not a citizen of the United States please list Country of Citizenship, the VISA classification and the **VISA Number:**_____ ***Include copy of VISA attach with Exhibit 1**

PERSONAL DATA / FINANCIAL DISCLOSURE and RELEASE FORM

PART 5:

Please complete the chart below:

Have you ever:	YES	NO
Been sued, resulting in outstanding claims or judgments?		
Filed for bankruptcy in West Virginia or the US?		
Been investigated by a state or federal investigatory agency?		
Sustained a substantial loss with a significant insurance payment?		
Operated under another business name(s)?		
Ever been convicted of a felony, theft, or crime related to gambling or moral turpitude?		

*If YES to any of the above questions, provide complete details on a separate sheet(s). ___ Attached with Exhibit 1

PART 6:

1. **List all personal banking information, including checking, savings, loans, etc.:**

   a. Bank Name: _____

   Address: _____

   Phone #: _____ Type of Account: _____

   b. Bank Name: _____

   Address: _____

   Phone #: _____ Type of Account: _____

2. **Please provide a credit reference and include the type of credit and the account number:**

   Bank Name: _____

   Address: _____

   Phone #: _____ Type of Credit: _____

   Account #: _____

   **** Corporations of Chain locations may request omission of the owner(s)/officer(s) personal banking information by submitting a signed letter of request.***

PART 7:

I hereby swear or affirm that I:

____ HAVE NOT been convicted of any violation of the State Lottery Act, any felony, or any crime related to theft, gambling, or involving moral turpitude in this or in any other state or foreign country.

OR

____ HAVE been convicted of a violation(s) of the State Lottery Act, a felony, or a crime related to theft, gambling or involving moral turpitude in this or in any other state or foreign country.
*A detailed written explanation must be provided. ___ Attached with Exhibit 1

PART 7: ***Continued***

I hereby affirm that the information provided in the Personal Data and Financial Disclosure form and Affidavit is true to the best of my knowledge and belief. I understand that any untruthful or misleading answers are causes for the rejection of the application.

I hereby further authorize any representative of the West Virginia Lottery Commission bearing this release, or transmitting a copy of the same, to obtain information from files or other sources pertaining to the Applicant's personal background including, but not limited to: police records, academic, athletic, medical, credit, or any other records. I hereby direct you to release such information upon the request of any duly authorized representative of the West Virginia Lottery. This release is executed with the full knowledge and understanding that the information is for the official use of the West Virginia Lottery. I hereby release you, the institution or establishment which you represent including its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may result to the Applicant's heirs, family or associates because of compliance with this authorization and request to release information, or any attempt to comply with it.

NAME: _____ **SIGNATURE:** _____ **DATE:** _____

NOTARY

Before me, the undersigned, a Notary Public in and for said County and State, the above individual personally appeared and acknowledged the execution of the foregoing instrument as his/her voluntary act and deed.

IN WITNESS WHEREOF, I, _____, have executed this instrument in the

County of _____, State of _____, on this _____ day of _____, 20 _____.

My Commission Expires: _____ Notary Signature: _____

County of Residence: _____ Seal:

FINGERPRINT INSTRUCTIONS

For United States Applicants:

All U.S.-based applicants are required to complete Live Scan fingerprinting through IdentoGO. Appointments can be scheduled online at https://uenroll.identogo.com or by calling 855-766-7746.

- Service Code: **228RJN – Traditional Lottery License**

For Non-United States Applicants:

Applicants outside the U.S. who wish to submit fingerprint cards must go online at https://uenroll.identogo.com, enter your service code, **228RJN** and select, "Submit a Fingerprint Card by Mail."

The system will guide the applicant through the process and generate a barcode confirmation sheet, which must be printed and mailed with the completed fingerprint card to the address provided during enrollment.

Companies may establish a billing account with Idemia (IdentoGO) to cover fingerprinting fees on behalf of applicants by completing the form at:
https://www.identogo.com/uploads/general/WV-NCAC-Account-Application-2025.pdf

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***The WV Lottery will no longer retain fingerprint records on file. When a background review is requested, each individual must contact IdentoGO to resubmit their fingerprints.**

OCA# _____

Trad – FP Form
Exhibit 2

Fingerprint Information

All Fields are mandatory unless otherwise noted.

Name (Please Print): _____ SSN: _____
Last Name First Name Middle Name

Alias (Maiden Name): _____ Citizenship (Country): _____

Phone: _____ Email: _____

Home Address: _____
Street Address City State Zip Code

Business Name: _____

Business Address: _____
Street Address City State Zip Code

Date of Birth: _____ Place of Birth: _____

Date Submitted Fingerprints: _____

***The WV Lottery will no longer retain fingerprint records on file. When a background review is requested, each individual must contact IdentoGO to resubmit their fingerprints.**

RELEASE OF INFORMATION

I hereby request a record check be made to find any police record on the herein named individual and by submitting this request. I understand that the submitted information will be retained by the West Virginia State Police in the Automated Fingerprint Identification System.

I certify that this is for official business, and I am authorizing the West Virginia Lottery to obtain any record found.

Applicant Notification and Record Challenge: *Your fingerprints will be used to check the criminal history records of the FBI. You have the opportunity to complete or challenge the accuracy of the information contained in the FBI identification record. The procedure for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28, CFR, 16.34.*

Privacy Act Notice: *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 penalty. If you choose voluntarily to supply your social security number, it will be used to aid the West Virginia Lottery in the conduct of this criminal background inquiry.*

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

Signature: _____ Date: _____

PRIVACY NOTICE --
USAGE OF SOCIAL SECURITY NUMBERS

This form is included to notify you of our privacy practices and no action is required on your part.

With the exception of Lottery Commissioners, Lottery officers or 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 IdentoGO 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 ext. 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.