



NOTICE AND ORDER OF DENIAL OF OCCUPATIONAL LICENSE APPLICATION

State Form 47368 (R3/11-08)

INDIANA GAMING COMMISSION

Applicant Identification

Last name

First name

Middle initial

Maiden name

Address (number and street)

City

State

ZIP code

Telephone number

Date of birth (month, day, year)

Social Security Number (last four digits)

XXX-XX-_____

Denial

☐ Felony Conviction

☐ Age of Applicant

Indiana Code 4-3-8-3 provides that the Commission may not issue an occupational license to an individual unless the individual:

(1) is at least eighteen (18) years of age, and

(2) has not been convicted of a felony under Indiana law, the laws of any other state, or the laws of the United States.

Resolution 2008-91 delegates to Commission staff the authority to deny applicants from these two categories.

Application date (month, day, year)

License level applied for

Position applied for

Felony convictions disclosed by applicant (if applicable)

Date of convictions (month, day, year)

Sentence

Jurisdiction/Court of record

Notice

If you wish to request a hearing on your denial, you must submit a request in writing, postmarked no later than fifteen days after service of this notice to:

Executive Director
Indiana Gaming Commission
101 W. Washington Street, East Tower, Suite 1600
Indianapolis, IN 46204

Your request must:

- 1) Be in writing.
- 2) State your name, address, and telephone number
- 3) State in detail the reasons why and the facts upon which you rely to show that your license application should not have been denied.
- 4) Be signed, dated, and verified. The verification must be notarized and must contain a certification stating, "under the penalty of perjury, the undersigned has examined this request for hearing and to the best of my knowledge and belief it is true, complete, and correct."

Commission staff will contact you with information regarding your request for hearing. Other requirements are located at 68 IAC 7-1.

Notice of denial served on the applicant by personal service:

delivered to: _____

date: _____

time: _____

You may also seek a felony waiver. To access information about eligibility for felony waiver and to download a felony waiver application, please visit the Commission's website at: <http://www.in.gov/igc/2344.htm> and scroll down to the "Felony Waivers" topic.

☐ Copy of this form has been forwarded to the Legal Division at the Indiana Gaming Commission

☐ Copy of this form has been provided to the casino Human Resources department

Signature of the IGC agent delivering notice of denial

Identification number