

Kentucky Horse Racing & Gaming  
OFFICE OF CHARITABLE GAMING

4047 Iron Works Parkway  
Lexington, KY 40511

PH: (502) 573-5528

FAX: (502)-573-6625

**NOTICE OF CEASE OR CHANGE  
OF GAMING LICENSE**

(IN ACCORDANCE WITH KRS CHAPTER 238 AND 820 KAR CHAPTER 1)

License Number	Date	Time	a.m. <input type="checkbox"/>	p.m. <input type="checkbox"/>
Name of Licensee				
Street Address	City	Zip Code	County	

THIS IS TO SERVE AS WRITTEN NOTIFICATION THAT THE ABOVE LISTED LICENSEE HAS CEASED GAMING  
OR WANTS TO REVISE THEIR GAMING LICENSE TO REFLECT A CHANGE.

**CEASING CHARITABLE GAMING:** The representative of the organization states the organization wishes to cease gaming activity. The organization will return the license to the Department of Charitable Gaming via postal mail within 10 days.

**NOTE: In the event of ceasing gaming activities, the organization will undergo a final inventory by a DCG Compliance Officer.**

**CHANGING CHARITABLE GAMING LICENSE:** The representative of the organization states that organization wishes to change their gaming day, time, location or type. The organization is responsible for submitting such request, with a lease agreement (if they are not gaming at their own location), showing the day, time and location of the gaming activities to occur. The organization understands that any change is not complete, and therefore the requested change cannot start until the revised license has been issued.

**COMMENTS:**

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I have read this document and I am aware of its content.  
LICENSEE REPRESENTATIVE SIGNATURE AND TITLE

OFFICE REPRESENTATIVE SIGNATURE

**\*\*\* You are not required to use this form to effect notification of changes to your gaming. This form is provided for your convenience.**