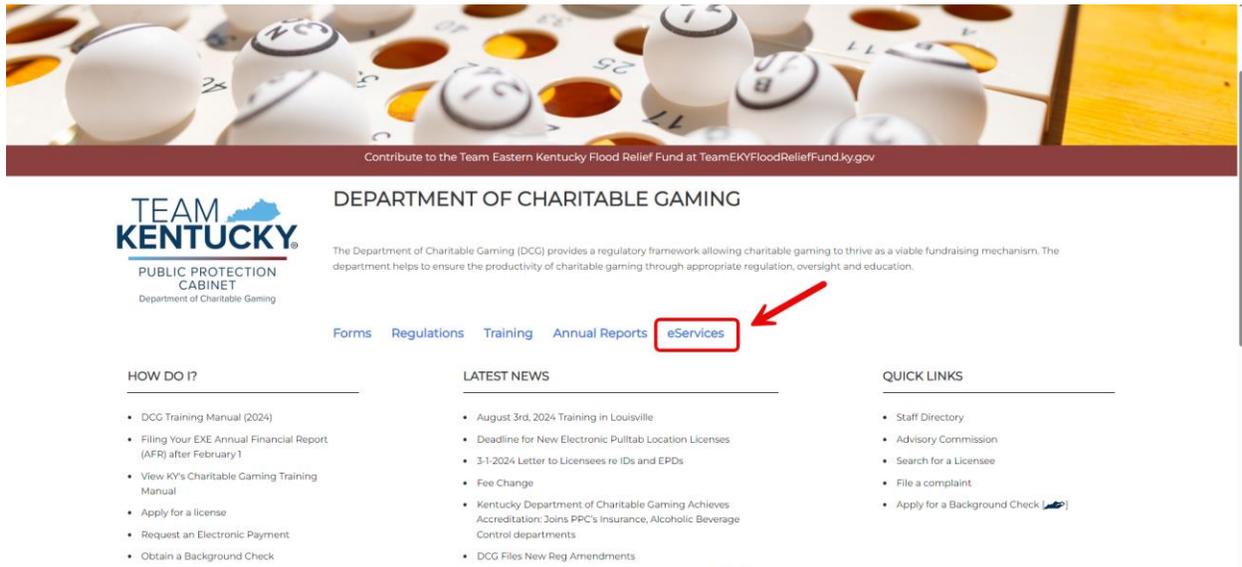


Renewing Your Charitable Gaming License for Manufacturers and Distributors

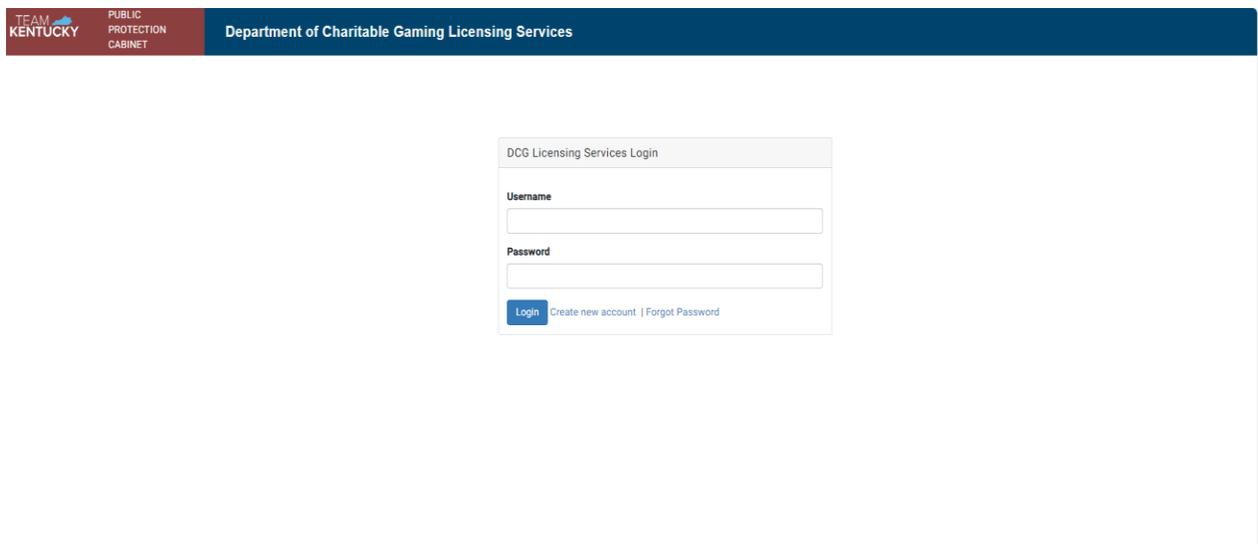


Using eServices to Renew a MAN or DIS license.

1. To access the Department of Charitable Gaming eServices portal, go to the website, [DEPARTMENT OF CHARITABLE GAMING \(ky.gov\)](https://www.dcg.ky.gov)



2. Input the assigned Username and Password that was sent via email. You can change the password after this initial login.



3. Select License Renewal. (**Change Password** is located in the upper right-hand corner.)

The screenshot shows the top navigation bar with the 'TEAM KENTUCKY PUBLIC PROTECTION CABINET' logo and the title 'Department of Charitable Gaming Licensing Services'. In the upper right corner, there are links for 'Change Password' and 'Log out'. Below the navigation bar, there are input fields for 'Business Name' and 'User Email', with red text annotations: 'The name of the licensee will show here' pointing to the Business Name field and 'The user email will show here' pointing to the User Email field. A 'Changing password' status indicator with a red arrow points to the 'Change Password' link. The 'Entity ID: 29016' is displayed in the bottom right. The main content area is divided into 'Individual Information' and 'Services' sections. The 'Individual Information' section contains 'View Profile' and 'View Business Profile' buttons. The 'Services' section contains two buttons: 'License Renewal / License Extension' (highlighted in yellow) and 'Record Correction Request'.

4. Select the license to be renewed and click **Submit**.

The screenshot shows the 'Renew License(s)' page. At the top, there is a navigation bar with the 'TEAM KENTUCKY PUBLIC PROTECTION CABINET' logo and the title 'Department of Charitable Gaming Licensing Services'. Below the navigation bar, there are input fields for 'Business Name' and 'User Email', and the 'Entity ID: 29016' is displayed in the bottom right. The main content area is titled 'Renew License(s)'. Below the title, there is a note: 'The system defaults the Original Amount to the active renewal fee. If applicable for the license you are renewing, the system will update the amount to reflect the correct fee once you select the renewal status.' Below the note is a table with the following columns: 'Select', 'License Type', 'License Number', 'Expiration Date', 'Amount Due', and 'License Status'. The table contains one row with a yellow radio button in the 'Select' column, 'Distributor' in the 'License Type' column, a blurred license number in the 'License Number' column, '01/31/2024' in the 'Expiration Date' column, '\$25.00' in the 'Amount Due' column, and 'Expired' in the 'License Status' column. Below the table is a purple 'Submit' button.

Select	License Type	License Number	Expiration Date	Amount Due	License Status
<input type="radio"/>	Distributor	[Blurred]	01/31/2024	\$25.00	Expired

5. This is the new online Charitable Gaming License Application, CG-APP-MAN or CG-APP-DIS, that can be used for renewing a gaming license. Some of the data fields will automatically be pre-loaded with current licensing data. Review all data fields to ensure accurate information.

6. You can edit existing data by clicking the yellow **Edit** icon at the end of the row of data. You can delete old data by clicking the yellow **Remove** icon at the end of the row of data. When adding new data, be sure to click the **Add** button in order to save the data. Click **Next** to advance to through the application.

7. Continue to review and update all data on the CG-APP-MAN or CG-APP-DIS application. A prompt window will appear if there is missing data or required data. The system will not allow you to advance to the next page until the error has been corrected. You may be required to **Add** new data before you can **Remove** outdated data.

6. The following information is required for the **chief executive officer and the chief financial officer** of the applicant.
Note: These officers shall be subject to a state and FBI criminal history background check, and fingerprinting will be required. Additional information relating to the procedures for the background checks will be forwarded to the applicant. Also note that physical addresses, **not P.O. box addresses**, must be provided for all officers.

Officer's Type

First Name Middle Name Last Name

Date Of Birth Home Address Country

Zip Code State City

Social Security Number E-Mail Address

Add *You must click Add button to save the data below **OK**

You should have atleast one chief financial officer

Sr. No	Officer's Title	First Name	Middle Name	Last Name	DOB	SSN	Home Address	Country	City	State	Zipcode	Phone	Email
1	CEO												
2													

8. The last page of the online application will be the **Certification** page. Your electronic signature will be entered here. Click **Review and Submit** in the lower right-hand corner.

CERTIFICATION

I certify, under penalty of perjury, that I am an officer authorized by the applicant to make application for licensure and that I have examined this application for licensure, including accompanying materials, and all information submitted is true and correct to the best of my knowledge and belief. I further certify that the applicant agrees to comply with all applicable laws and administrative regulations regarding charitable gaming in the Commonwealth of Kentucky.

Signature*
/s/

Printed Name*

Title

Date*

If you have questions or need assistance completing this application, please call the Licensing Branch at (502) 573-5528 or toll-free in Kentucky, (800) 729-5672. Visit the Department's website at: dcg.ky.gov

Notice: Kentucky law requires licensees to notify the Department of Charitable Gaming in writing of any changes related to the information provided on this application within 30 days of the date the change occurred. KRS 238.525(6).

Back **Review and Submit**

9. A **Review and Submit** page will appear with all the data that was entered into the renewal application. Verify that all data is correct and once confirmed, click **Review and Submit** again.

The screenshot shows the 'REVIEW AND SUBMIT' page for a Charitable Gaming Distributor License Application. The header includes the 'TEAM KENTUCKY' logo, 'PUBLIC PROTECTION CABINET', and 'Department of Charitable Gaming Licensing Services'. It also features a 'Change Password' and 'Log out' link. The user's 'Business Name' and 'User Email' are displayed, along with 'Entity ID: 29016'. The main heading is 'CHARITABLE GAMING DISTRIBUTOR LICENSE APPLICATION' with a prominent yellow 'REVIEW AND SUBMIT' button. Below this, a notice states: 'A complete application must be received at least 60 days prior to the intended start of your license gaming or before the expiration of your current distributor license. Please ensure you answer every question, regardless of whether you are a first-time application or applying to renew an existing license, unless stated otherwise on the application.' Another notice reads: 'Notice: KRS 238.530(3) provides that no person who is licensed as a distributor shall be licensed as a manufacturer, and no person licensed as a manufacturer shall be licensed as a distributor.' The 'GENERAL DISTRIBUTOR INFORMATION' section contains the following fields:

- 1. Name of Applicant (DISTRIBUTOR): Name of Applicant* (text input)
- License Number: DIS #* (text input)
- 2. Is the applicant organized as: Select organization ... (dropdown menu)
- If "Other", please explain the company's organizational structure in detail: (text input)
- 3. Contact Info: Telephone* (text input), Fax (text input), Email Address* (text input)

10. The **Invoice Details** page will appear. Click **Check out/Complete Order** to process the \$25 renewal fee. This is a nonrefundable application fee and shall be credited against the amount of the annual license fee, if the requested license is granted (820 KAR 1:005 Sec 2). Only the \$25 renewal fee can be paid online at this time.

The screenshot shows the 'Invoice Details' page. The header is identical to the previous page. The main heading is 'Invoice Details'. Below this is a table with the following data:

Description	Fee(s)	Action(s)
License Renewal / License Extension - DIS - Distributor	\$25.00	■
Total Amount Due	\$25.00	

Below the table, there are two buttons: 'Checkout / Complete Order' (highlighted with a red circle) and 'Cancel Order'.

11. Select the payment type.

Ky.gov An Official Website of the Commonwealth of Kentucky

Department of Charitable Gaming

Select Payment Type

ACH / ELECTRONIC CHECK OR CREDIT CARD

Cancel and return to Department of Charitable Gaming

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TEAM KENTUCKY

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Summary

License Renewal / License Extension - DIS - \$25.00

Distributor [redacted]

Item Price: \$25.00

Quantity: 1

12. Input the required data for the payment type that was selected. Click **Next**.

Ky.gov An Official Website of the Commonwealth of Kentucky

Department of Charitable Gaming

Select Payment Type

ACH / ELECTRONIC CHECK CREDIT CARD

Card Details

Card Number (required) Expiration Date (required) Security Code (required)

Cardholder Details

Name (required) Country (required) United States

Address Line 1 (required) Address Line 2

City (required) State (required) Zip Code (required)

NEXT

Cancel and return to Department of Charitable Gaming

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TEAM KENTUCKY

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Summary

License Renewal / License Extension - DIS - \$25.00

Distributor [redacted]

Item Price: \$25.00

Quantity: 1

Sub Total \$25.00

Service Fee \$0.74

Total \$25.74

13. A summary of the payment data will be shown. Verify the data is correct or edit if necessary. Click **Pay Now**.

Ky.gov An Official Website of the Commonwealth of Kentucky

Department of Charitable Gaming

Card Number [redacted] Expiration Date [redacted] [EDIT](#)

Cardholder Details [EDIT](#)

PAY NOW

Cancel and return to Department of Charitable Gaming

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TEAM KENTUCKY

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Summary

License Renewal / License Extension - DIS - \$25.00

Distributor [redacted]

Item Price: \$25.00

Quantity: 1

Sub Total \$25.00

Service Fee \$0.74

Total \$25.74

14. The **Transaction/Order Information** page will show that the transaction has been completed. A printed copy of the receipt is available by selecting **Print Copy of Receipt**.

TEAM KENTUCKY PUBLIC PROTECTION CABINET
Department of Charitable Gaming Licensing Services
Change Password Log out

Business Name: [Redacted] User Email: [Redacted] Entity ID: 29016

Transaction / Order Information

Transaction Details
Transaction Status: Complete Transaction/Order Number: 71942898 Transaction Date: [Redacted]

Account Holder Details
Name: [Redacted] Address: [Redacted] Payment Method: [Redacted]

Payment Summary
Quantity: 1
Description: License Renewal / License Extension - DIS - Distributor [Redacted]
Amount: \$25.00

Portal Administration Fee: \$0.74
Total Charged: \$25.74

[Print Copy of Receipt](#) [Go Home](#)

PUBLIC PROTECTION CABINET Department of Charitable Gaming Licensing Services

Transaction / Order Information

Transaction Details
Transaction Status: Complete Transaction/Order Number: 72057456 Transaction Date: 08/22/2024

Account Holder Details
Name: [Redacted] Address: [Redacted] Payment Method: [Redacted]
Ending With [Redacted]

Payment Summary
Quantity: 1
Description: Record Correction (Name/ Address/ Contacts) - [Redacted]
Amount: \$25.00

Portal Administration Fee: \$1.00
Total Charged: \$26.00

I certify that: The Routing and Account numbers are correct; and, I have contacted my financial institution and authorized Kentucky.gov's originating bank, SPS (ODFI ID #1522077581), to debit my account; and, Should the ACH Debit transaction be returned by the bank as not payable, I am responsible for any fees or penalties assessed by my financial institution and the KHRC Sports Wagering.