

## **Oregon Racing Commission**

800 NE Oregon Street, Suite 310 Portland, OR 97232 Phone: 971-673-0208 Fax: 971-673-0213

# Personal History Record & Financial Questionnaire

### **General Instructions**

- Handwrite legibly or type an answer to every question. If a question does not apply to you, write "NA" in the space. If space available is insufficient, continue on the supplemental page or use a separate sheet of paper and make sure to reference the question you're answering. Do not misstate or omit any fact as each statement made is subject to verification. Applicant(s) must initial each page in the bottom right corner. In doing so, the applicant is attesting to the accuracy and completeness of the information provided on that page.
- All applicants are advised that this personal history record is an official document and misrepresentation or failure to provide information requested may be deemed to be sufficient cause for the refusal or revocation of a license.
- All applicants are further advised that an application for a Racing License, finding of suitability, or for other action may not be withdrawn without the permission of the Oregon Racing Commission.
- Each principal, partner, and/or co-owner must each submit a separate license application.

#### Application for:

Nature of Racing/Gaming License applied for; OTB Owner, ADW, Hub, etc.

Name of Facility/Business as filed with the Oregon Secretary of State and Registry Number

If this is a Change of Ownership, provide the name of the business it is now operating under

Section 1: Personal Information: A multi-jurisdictional license must be submitted in conjunction with this form.

Last Name:		First Name:		Middle Name:	
Address:		City/State:		Country:	
Social Secur	rity No:	Birth Date:	Se	x: Male ( ) Female ( )	
Race:	Height:	Weight:	Eye Color:	Hair Color:	
Telephone (Cell):		Telephone (Work):		Driver's License #:	State:
Passport No	Passport No (if no Driver's License):		Co	untry of Issuance:	

Applicants Initials

#### Section 2: Military Information:

Have you ever served in the Military? Yes ( ) No ( ). If "no" you may skip to Section 3.

While serving in the military were you ever arrested for an offense, which resulted in summary action, a trial, or special or general court martial? Yes ( ) No ( ). If yes, please provide details on the supplemental page.

Branch of Service:	Serial Number:	Date of Entry-Active Service:
Date of Separation:	Type of Discharge (Honorable, Di	shonorable, etc.):

#### Section 3: Arrests, Detentions, and Litigation: (Include arrests even if you were not convicted)

Have you ever been arrested, detained, charged, indicted, or summoned to answer for any criminal offense or violation for any reason, whatsoever, regardless of the outcome of the event? Do not include minor traffic violations.

Yes ( ) No ( ). If "yes", please provide details in the space provided below. List all cases/arrests.

Date of Arrest	Charge	Location (City/State)	Disposition	Arresting Agency

- A. Has a criminal indictment, information, or complaint ever been returned against you by a Grand Jury, but you were not arrested, or in one you were named as an un-indicted co-party? Yes ( ) No ( ). If "yes" please provide details below.
- B. Has a city, state, federal law enforcement agency, commission, or committee ever questioned you? Yes ( ) No ( ). If "yes" please provide details below.
- C. Have you ever been subpoenaed to appear or testify before a county, state, or federal grand jury or board or commission? Yes ( ) No ( ). If "yes" please provide details below.

Applicants Initials

#### Section 4: Financial:

- 1. Have you ever filed for bankruptcy? Yes ( ) No ( )
- 2. Has a lien ever been filed against you? Yes ( ) No ( )
- 3. Have you ever had a debt collection filed against you? Yes ( ) No ( )
- 4. Have you ever been sued? Yes ( ) No ( )
- 5. Are you presently a party in any litigation? Yes ( ) No ( )
- 6. Has a judgement of obligation ever been filed against you? Yes ( ) No ( )

If you answered "yes" to any of the above questions please provide details below.

#### Section 5: Professional or Privileged Licenses, Permits or Certifications:

Have you ever held a professional or privileged license, permit, or certification in this or another state? Yes ( ) No ( ). Type of license(s) and dates held:

Were disciplinary actions taken against you, with respect to these licenses? Yes ( ) No ( ). If "yes" provide details:

Have you ever held a financial interest in a gambling venture, including a racetrack (horse, dog, etc.), lottery, casino, bookmaking operation, or pari-mutuel operation? Yes ( ) No ( ). If "yes", provide details to include; dates, locations, type(s), and names of businesses, and partners names and addresses:

Have you ever appeared before a licensing agency or similar authority, for any reason? Yes ( ) No ( ) If "yes" provide details:

Have you ever been refused a racing or gaming license, or any other certification in any jurisdiction? If "yes" provide location, agency, and details:

Have you ever applied for a license to sell or serve alcoholic beverages? Yes ( ) No ( ). If "yes" provide details:

Have you ever been granted a racing license or been a participant in any group which has been issued a racing license by the State of Oregon? Yes ( ) No ( ). If "yes" provide details:

Applicants Initials\_\_\_\_

# **Supplemental Page**

Use this page to document information that you were unable to explain in the space provided on the questionnaire. Remember to reference the section and question in your explanation/answer.



Applicants Initials

# **Notary/Certification Page**

#### (This page must be notarized and returned with the application in order to be considered for licensure.)

- 1. All applicants applying for licensure are subject to fingerprinting and a criminal records check, as specified/required in Oregon Revised Statues (ORS) 181A.195.
- 2. I expressly agree to the subject to subpoen powers of the authorized regulatory agency or written request issued in lieu of a subpoena and to provide the agency with any and all such information or documents which it may so request. This agreement shall extend to anything which relates to any matter which is subject of an agency or hearing or investigation.
- 3. I understand that participation in racing is a privilege, not a right, that any license issued pursuant to this form is subject to condition precedent as set out in the Rules of Racing, and that my failure to comply therewith can be grounds for immediate voidance or revocation of such license. Upon approval of this license, I agree to abide by all rules of racing and rulings or decisions of the Stewards with the knowledge that rulings or decisions of the Stewards shall remain in force until reversed or modified only by the authorized regulatory agency.
- 4. By submitting this application, I the undersigned, hereby (i) agree to abide by the rules and regulations of the pari-mutuel regulatory agency of the State of Oregon, ORS 462.010 462.990, the laws of the United States of America, Canada, all state/provincial governments, municipalities and other sub-divisions thereof; and (ii) agree to abide by any provision regarding search, within the grounds of a racetrack or racing association, of any premises or vehicle which I may occupy or control or have the right to occupy or control and my person, property, and effects and in the seizure of any article the possession of which may be forbidden. All submitted applications are considered temporary until the criminal background is completed and the application is approved by the Executive Director.

I hereby certify that I have read the foregoing and that every statement made by me in this application is true, complete, and accurate. I realize any falsification or omitting of facts can result in a denial of application.

Signature of Applicant Date		Printed Name of Applicant	Date
State of			
County of			
Signed or attested before me on (da	ıte)	, 20	
By name of individual		, identified by or pe	ersonally
known to me		Notary Stamp	:
(Signature of Notary)			
Notary Public – State of			