

Nebraska Schedule I—County/City Lottery Operator Application

**Form 50G
Schedule I**

- Include license fee of \$500.
- Incomplete schedules will be returned.

1 Nebraska ID Number of County, City, or Village	3 Will the lottery operator be operating at a main location? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, provide an address of main location.
2 County, City, or Village Name on Form 50G	4 Will digital-on-premises tickets be sold at this location? <input type="checkbox"/> YES <input type="checkbox"/> NO

Lottery Operator Information (Attach additional sheet if necessary)

5 Nebraska ID Number	6 Federal ID or Social Security Number	7 Type of Application: <input type="checkbox"/> New <input type="checkbox"/> Renewal <input type="checkbox"/> Report Changes <input type="checkbox"/> Cancel
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Business Name and Location Address	Business Name and Mailing Address
Name	Business Name
Trade Name of Business (If Different Than Above)	Street or Other Mailing Address
Street Address	City State Zip Code
City State Zip Code County	

8 Type of Ownership <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Domestic Corporation <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Other _____ <input type="checkbox"/> Partnership <input type="checkbox"/> Foreign Corporation <input type="checkbox"/> Domesticated Corporation	9 If the applicant is a corporation, limited liability company, or partnership, under the laws of what state has it been incorporated, formed, or organized?
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• Your Social Security number and date of birth are required under the [Nebraska County and City Lottery Act](#) and will be used to request criminal history information from law enforcement agencies to determine if the legal requirements for a lottery operator's license are met.

• Each applicant for a license as a lottery operator is subject to a background investigation and/or an inspection of its facilities. The Department may require the applicant to pay the actual costs incurred in conducting such investigation or inspection.

10 List the Social Security number, full name, home address, date of birth, type of involvement, and percentage of ownership for each of the following persons involved with the applicant.

- If a sole proprietorship, list the individual owner.
- If a partnership, list each partner and spouse.
- If a corporation, list each officer and spouse and each person holding 10% or more of the debt or equity of the applicant corporation. If any entity holding 10% or more of the debt or equity of the applicant corporation is a partnership, limited liability company, or corporation, list each partner of such partnership, each member of such limited liability company, or each officer of such corporation and every person holding 10% or more of the debt or equity of any such partnership, limited liability company or corporation.
- If a limited liability company, list each member and spouse.

(Attach additional sheet if necessary)

Social Security Number	Name, Address, City, State, Zip Code (See instructions)	Date of Birth	Type of Involvement and Percentage of Ownership

11 Does any person other than those listed in line 10 above have any ownership interest in the license applicant? (See instructions)

Yes No

If Yes, in the case of an individual, identify the Social Security number, full name, home address, date of birth, type of ownership interest of each such individual. In the case of a business, identify the federal employer ID number, business name, address, and type of ownership interest of each such business. (Attach additional sheet if necessary)

12 Has each of the individuals listed in line 10 above complied with the Instructions for Completing Fingerprint Application , or when applicable, filed a signed Affidavit by Spouse for Waiver Form ? <input type="checkbox"/> Yes <input type="checkbox"/> No (See What Must Be Filed instructions)	14 Do any of the individuals listed in line 10 above have a financial interest, directly or indirectly, in any company licensed as a manufacturer or distributor pursuant to the Nebraska Bingo Act or the Nebraska Pickle Card Lottery Act or in any company licensed as a manufacturer-distributor pursuant to the Nebraska County and City Lottery Act ? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, attach a detailed explanation of such interests.
13 Has each of the individuals listed in line 10 above completed and filed a Personal History Record and Background Disclosure Form , or when applicable, attached a signed Affidavit by Spouse for Waiver Form ? <input type="checkbox"/> Yes <input type="checkbox"/> No (See What Must Be Filed instructions)	

15 Does any member of the governing board or any governing official of the county, city, or village named in this application have any financial interest, directly or indirectly, in the business named in this application?
 Yes No

If Yes, attach a detailed explanation of such interests.

16 Do any of the individuals listed in line 10 above currently hold or have they previously held any other licenses issued under the [Nebraska Bingo Act](#), the [Nebraska Pickle Card Lottery Act](#), the [Nebraska Lottery and Raffle Act](#), or the [Nebraska County and City Lottery Act](#)?
 Yes No If Yes, indicate the types of licenses, and their current status (active, suspended, cancelled, revoked, or expired).

Under penalties of law, I declare that I have examined this application, and to the best of my knowledge and belief, it is correct. I will comply with the provisions of the Nebraska County and City Lottery Act and the regulations adopted under such Act.

sign here ▶ _____
Signature of Lottery Operator Owner, Member, Partner, Officer, Title _____ Date _____ Daytime Phone Number _____
or Person Authorized by Attached Power of Attorney

Name of Person to Contact Regarding This Application:
Name _____ Title _____ Daytime Phone Number _____

Authorization—Signature of Governing Official

I declare that I have examined this application, and authorize the applicant to conduct a lottery on behalf of the county, city, or village named in this application.

sign here ▶ _____
Authorized Signature _____ Title _____ Date _____ Daytime Phone Number _____

Instructions

Who Must File. Any individual or business that has contracted with a county, city, or village to conduct a lottery on its behalf must apply for and obtain a lottery operator license. A separate license is required for each county, city, or village on whose behalf a lottery will be conducted by the lottery operator.

What Must Be Filed. Any individual or business seeking a license as a lottery operator must complete and submit a Nebraska Schedule I - County/City Lottery Operator Application, Form 50G, to the Nebraska Department of Revenue (Department).

When and Where to File. A license issued to a lottery operator expires on May 31 of every even-numbered year and may be renewed biennially. The application may be submitted with the [Nebraska Application for County/City Lottery, Form 50G](#), or submitted separately if the county, city, or village is already licensed. Applications for license renewal must be submitted to the Department at least 60 days prior to the expiration date of the license.

License fees are due in full for the biennial licensing period. However, if a new license application is received by the Department and the license will become effective on or after June 1 of the second year of the biennial licensing period, the license fee will be one-half of the biennial fee.

Mail the original application form and required license fee, [Background Check Waiver](#) form, and fingerprint processing fee to the Nebraska Department of Revenue, Charitable Gaming Division, PO Box 94855, Lincoln, NE 68509-4855. Retain a copy of this application for your records. Checks written to the Department may be presented electronically.

The Nebraska Schedule I may also be used to report changes in the application information or to cancel the license. Any change in the information originally submitted on the application must be provided to the Department within 30 days of the change.

An individual or business must have physical possession of the license issued by the Department before they can operate as a lottery operator.

Specific Instructions

Line 3. A main location is a location where keno wagers may be placed, and winning numbers are selected and electronically transmitted to a satellite location.

Line 4. Upon approval from the county, city, or village, a lottery operator may sell tickets via a mobile device or operator's tablet. Each location must indicate if it is going to sell digital-on-premises tickets.

Line 9. If your business is a corporation, limited liability company, or partnership, enter the name of the state under the laws of which the business has been formed. The [Nebraska County and City Lottery Act](#) requires a lottery operator to be a resident of Nebraska or, if a partnership, organized under the laws of Nebraska, or if a corporation, incorporated under the Nebraska Business Corporation Act, or if a limited liability company, formed under the Limited Liability Company Act. A nonprofit organization or nonprofit corporation is not eligible to obtain a lottery operator license.

Line 10. Provide the Social Security number, name, address, date of birth, type of involvement (owner, member, partner, officer, debt or equity holder, or spouse), and percentage of ownership for each person who has any interest in the business to be licensed as a lottery operator.

Line 11. Identify any persons who have an ownership interest in the license applicant not listed in line 8. Owner means a person with a right to share in the profits, losses, or liabilities of an applicant or licensee. The term includes loan guarantors who make actual debt payments for or contribute capital to a license applicant or licensee with a contingent right to share in the profits, losses, or liabilities of the operation. The term ownership interest is synonymous with owner.

Lines 12 and 13. [Neb. Rev. Stat. § 9-1,104](#) requires all applicants for a lottery operator license to be fingerprinted for criminal background investigation purposes. Please refer to the [Instructions for Completing Fingerprint Application](#) to determine who is subject to this requirement. Each individual listed must also submit a [Background Check Waiver](#) form and the fingerprint processing fee to the Department.

Authorized Signatures. The application must be signed by an owner, member, partner, or officer of the applicant, or an individual authorized by an attached [power of attorney](#).

County/City Authorization. The application must also be signed by a member of the governing board or a governing official of the county, city or village as an indication of approval of the applicant to conduct the lottery on its behalf.

Any questions regarding the completion of this application should be addressed to the Nebraska Department of Revenue, Charitable Gaming Division, PO Box 94855, Lincoln, NE 68509-4855, 402-471-5949, or 877-564-1315. Additional information and forms may be obtained from revenue.nebraska.gov/gaming.