NEBRASKA
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## **Nebraska Cash Device Approval Application and Return**

• Please attach \$500 non-refundable fee via check or money order to this application.

FORM **57A** 

Do you hold, or have you previously held, a Nebraska ID Number?		ease Do Not Write In This Space		
Yes No If Yes, provide the number				
2 Federal Employer ID or Social Security Number				
Applicant Name and Mailing Address				
Name				
Street or Other Mailing Address				
State State		Zip Code		
Cash Device To Be Tested  • Include all the required information in the columns below.				
Device Software Name	Version Number	Manufacturer of Device	For DOR Use Only Approval Numbers	
Under penalties of law, I declare that I have examined this application and return, and to the best of my knowledge and belief, it is correct and complete.				
sign				
Signature of Owner, Partner, Corporate Officer, Authorized by Attached Power of Attorney	or Person Title	Date	Daytime Phone Number	
Fmail Address				

## Instructions

**Who Must File**. All distributors of cash devices covered by the Mechanical Amusement Device Tax Act must file an application. An application must be filed for each cash device to be approved, with a separate check or money order of \$500.00 issued for each application.

When and Where to File. This application, properly signed and accompanied by check or money order payable to the Nebraska Department of Revenue (DOR), must be filed before the approval process of the above cash device can begin. Once issued, approval of a cash device does not expire unless the software of the device is altered in a manner that affects gameplay. At that point, a new approval of the cash device will be required.

**Business Name and Address**. Please provide the business name and mailing address of the applicant in order to receive a response from the Nebraska Department of Revenue.

Any incomplete or incorrect application will be rejected, and must be refiled.

## **Definitions**

**Cash Device (Device)**. A cash device is any mechanical amusement device capable of awarding (a) cash, (b) anything redeemable for cash, (c) gift cards, credit, or other instruments which have a value denominated by reference to an amount of currency, or (d) anything redeemable for anything described in subdivision (c) of this definition.

## **Specific Instructions**

- **Line 1**. If you have, or have ever had, a Nebraska ID number, enter it here.
- Line 2. If you currently have a Federal Employer ID number, enter it on this line. If not, enter your Social Security number. Enter the mailing name and address for your business as well.
- **Line 3.** Do not fill out the fields marked for Department of Revenue Use Only. Additionally, enter the required information regarding the cash device submitted for approval in the columns provided. If these columns are not filled out, the application will be returned.

**Authorized Signature**. The Nebraska Application for Cash Device Approval, Form 57A, must be signed by an owner, partner, officer, or member of the business, or a person authorized by an attached Power of Attorney, Form 33.

**Note**: Each Form 57A must be accompanied by a non-refundable check or money order for \$500.00. Failure to attach this application fee will result in a return of the application. The final report from the testing laboratory should be transmitted directly to the Department of Revenue by the laboratory. This application will not be considered complete until the report has been received by the Department of Revenue. The Department of Revenue will contact the signatory of this application to arrange delivery of the cash device, if required.

If you need additional assistance, contact the Charitable Gaming Division, Nebraska Department of Revenue, 137 NW 17th Street, PO Box 94855, Lincoln, NE 68509-4855, or call 877-564-1315 or 402-471-5944.