



CHOCTAW GAMING COMMISSION  
P. O. BOX 6045 / 385 Willis Road  
Choctaw, MS 39350  
Ph: 601.656.6038 Fax: 601.656.9175

## GAMING LICENSE APPLICATION

### **Instructions:**

### **VENDOR GAMING LICENSE**

1. This gaming license application is an official document and misrepresentation or failure to reveal information requested may be sufficient cause for denial, suspension or revocation.
2. This application must be completed and submitted to the following email address:  
[renita\\_willis@mscgc.org](mailto:renita_willis@mscgc.org)
3. Persons completing this gaming license application for a key/primary position will have their fingerprints and photo taken submitted to Choctaw Gaming Commission.
4. All questions must be answered accurately and in as much detail as possible. If a question does not pertain to you, indicate "N/A" (not applicable) in the space provided but do not leave blank. If there are attachments please indicate "See Attachment".
5. All requested documents must be submitted to complete your application:
  - Valid Federal or State Issued photo identification (cannot be expired)
  - Birth certificate or Passport
  - Any other requested documents
6. Type of License and Fee Schedule:

a) Management Contract	\$2,000
b) Management Official	\$2,000
c) Key Employee	\$1,000
d) Distributer	\$1,000
e) Manufacturer	\$1,000
f) Vendor Services	\$1,000
g) Amended Applications	\$1,000