WASHINGTON STATE GAMBLING COMMISSION
LOCATION: 4565 7th Avenue SE, Lacey WA 98503
MAILING ADDRESS: P.O. Box 42400, Olympia WA 98504-2400
TELEPHONE: 360-486-3440 / FAX NUMBER: 360-486-3631
IN STATE TOLL-FREE: 1-800-345-2529 / WEB SITE: www.wsgc.wa.gov

Print

Clear Form

GAME ENDORSEMENT FORM FOR CHANGES TO PREVIOUSLY APPROVED PROPRIETARY GAMES

DEPOSIT REQUIRED $500

INSTRUCTIONS

- You must use this form to submit changes to approved proprietary table games for use in Washington State. You must receive approval before implementing changes to games, including adding any new equipment to the game.
- The initial deposit to review game changes is $500.00. The commission may also assess additional amounts to cover associated inspection and investigative costs as required by law. These costs, which are in addition to the initial deposit, will be determined by our staff and are payable prior to the completion of the evaluation.
- You can find gambling rules and laws on our website, under Rules and Laws tab. You will find them very helpful and informative. Please use one form for each game.
- Make check payable to the Washington State Gambling Commission.

You can find currently approved proprietary game rules on our website under the Gambling Activities and Tribal Gaming tabs.

YOUR APPLICATION AND THE PUBLIC RECORDS ACT

From the moment we receive your application, it becomes a public document subject to disclosure under the Public Records Act (RCW 42.56) and other Washington laws. The Commission may disclose to the public, other state or federal agencies, or discuss at a public meeting all information set forth in this application and all supplemental information submitted.

GAME

Please provide the official name of the game you wish to have reviewed:

Proprietary Game: |___|___|___|

4. Is this a replacement for an existing approved game? ☐ Yes ☐ No

If YES, list the game:

If NO, explain why you are submitting a change application: (Attach separate sheet if needed)

5. Are changes compliant with RCW / WAC / Tribal-State Compact? ☐ Yes ☐ No

If NO, explain: (Attach separate sheet if needed)

6. Provide the following for your proprietary game:

- ☐ Enclose 1 copy of a diagram, photograph, or layout of any materials and equipment associated with the game / equipment;
- ☐ Enclose the rules of play showing changes made to previously approved rules including specific examples. Ensure all game specifications and / or capabilities are explained;
- ☐ Enclose a schedule of any and all payouts and odds;
- ☐ Enclose a description of any dealing procedures for the game;
- ☐ Provide a copy of the operational procedures / manuals for the game / equipment, including relevant hardware and/or software manuals;
- ☐ A list of contacts with whom we may discuss this submission. Include a name, address, telephone number and e-mail address (if available).

Ensure that all required documentation is included with this application.

INFORMATION REGARDING THE PERSON COMPLETING THIS FORM:

Last Name:

First Name:

Middle Name:

Title / Position /
Relationship to Company:

Mailing Address:

City: State: Zip:

Telephone: - - Fax: - -

E-Mail Address:

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