



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
DIVISION OF PARI-MUTUEL WAGERING

www.MyFlorida.com/dbpr

TO BE COMPLETED BY SLOT MACHINE OCCUPATIONAL LICENSEES ONLY	
Applicant's Name:	
License Number:	
Job Title(s):	

Please note: this form may only be used by individuals holding a current slot machine, pari-mutuel, or cardroom occupational license issued by this regulatory agency. If your license has expired, please complete a new application.

UPGRADE A 1051 – SLOT PROFESSIONAL EMPLOYEE LICENSE	
From a:	to a:
<input type="checkbox"/> 1-year Slot Professional Individual	<input type="checkbox"/> 1-year Slot Combo Professional (No Fee)
	<input type="checkbox"/> 1-year Business Employee (No Fee)
<input type="checkbox"/> 3-year Slot Professional Individual	<input type="checkbox"/> 3-year Slot Combo Professional (No Fee)
	<input type="checkbox"/> 3-year Business Employee (No Fee)

UPGRADE A 1052 – SLOT GENERAL EMPLOYEE LICENSE	
From a:	to a:
<input type="checkbox"/> 1-year Slot General Individual	<input type="checkbox"/> 1-year Slot Combo Professional (No Fee)
	<input type="checkbox"/> 1-year Slot Combo General (No Fee)
	<input type="checkbox"/> 1-year Slot Professional Individual (No Fee)
	<input type="checkbox"/> 1-year Slot Business (No Fee)
<input type="checkbox"/> 3-year Slot General Individual	<input type="checkbox"/> 3-year Slot Combo Professional (No Fee)
	<input type="checkbox"/> 3-year Slot Combo General (No Fee)
	<input type="checkbox"/> 3-year Slot Professional Individual (No Fee)
	<input type="checkbox"/> 3-year Slot Business (No fee)

UPGRADE A 1056 – SLOT COMBO GENERAL LICENSE	
From a:	to a:
<input type="checkbox"/> 1-year Slot Combo General	<input type="checkbox"/> 1-year Slot Combo Professional (No Fee)
<input type="checkbox"/> 3-year Slot Combo General	<input type="checkbox"/> 3-year Slot Combo Professional (No Fee)

UPGRADE A 1012 – CARDROOM EMPLOYEE LICENSE	
From a:	to a:
<input type="checkbox"/> 1-year Cardroom Employee	<input type="checkbox"/> 1-year Slot Combo Professional (No Fee)

FOR DIVISION USE ONLY			
License Code _____	License # _____	File # _____	License Year _____
Association Code _____	Date Received _____	Entered By _____	
License Fee _____	FP Date _____	FP Fee _____	Total Fee _____
<input type="checkbox"/> ARCI checked			

UPGRADE A 1031- PARI-MUTUEL PROFESSIONAL COMBO LICENSE**From a:**

- 1-year Pari-Mutuel Professional Combo
- 3-year Pari-Mutuel Professional Combo

to a:

- 1-year Slot Combo Professional - \$10 fee
- 3-year Slot Combo Professional - \$30 fee

UPGRADE A 1032- PARI-MUTUEL GENERAL/COMBO LICENSE**From a:**

- 1-year license Pari-Mutuel General Combo
- 3-year license Pari-Mutuel General Combo

to a:

- 1-year Slot Combo General - \$40 fee
- 1-year Slot Combo Professional - \$40 fee
- 3-year Slot Combo General - \$120 fee
- 3-year Slot Combo Professional - \$120 fee

UPGRADE A 1021- PARI-MUTUEL PROFESSIONAL INDIVIDUAL LICENSE**From a:**

- 1-year Pari-Mutuel Professional Individual
- 3-year Pari-Mutuel Professional Individual

to a:

- 1-year Slot Combo General - \$10 fee
- 1-year Slot Combo Professional - \$10 fee
- 3-year Slot Combo General - \$30 fee
- 3-year Slot Combo Professional - \$30 fee

UPGRADE A 1022- PARI-MUTUEL GENERAL INDIVIDUAL LICENSE**From a:**

- 1-year Pari-Mutuel General Individual
- 3-year Pari-Mutuel General Individual

to a:

- 1-year Slot Combo General - \$40 fee
- 1-year Slot Combo Professional - \$40 fee
- 3-year Slot Combo General - \$120 fee
- 3-year Slot Combo Professional - \$120 fee

ALL APPLICANTS PLEASE READ AND SIGN BELOW

Under the Federal Privacy Act, disclosure of Social Security numbers is voluntary unless specifically required by Federal Statute. In this instance, disclosure of Social Security numbers is mandatory pursuant to Title 42, United States Code, Sections 653, 654; and Sections 409.2577, 409.2598, and 559.79, Florida Statutes. Social Security numbers are used to allow efficient screening of applicants and licensees by a Title IV-D child support agency to assure compliance with child support obligations. Social Security numbers must also be recorded on all occupational license applications and are used for licensee identification purposes pursuant to the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (Welfare Reform Act), 104 Pub.L. 193, Sec. 317.

Each application for a license or renewal of a license issued by the Department of Business and Professional Regulation shall be signed under oath or affirmation by the applicant, or owner or chief executive of the applicant without the need for witnesses unless otherwise required by law.

I certify that I am empowered to execute this application as required by Section 559.79, Florida Statutes. I understand that my signature on this application has the same legal effect as if made under oath. To the best of my knowledge, all information contained on this application is true and correct. I understand that falsification of any information on this application may result in administrative action, including fines up to \$1,000, denial, suspension or revocation of the license. I agree to abide by and obey all rules and regulations of the Division of Pari-Mutuel Wagering and the laws of the State of Florida, pursuant to Section 551.107, Florida Statutes.

Signature of Applicant

Date