



**Maine State Harness Racing Commission**  
 28 State House Station  
 Augusta, Maine 04333-0028  
 Phone: 207-287-3221 Fax: 207-287-5576



**STABLE LICENSE APPLICATION**

*Applications must be printed or typed in blue or black ink. All questions must be answered.*

In making this application for license or to otherwise participate in racing in the State of Maine, it is understood that an investigative report may be made whereby information is obtained through personal interviews with third parties such as family members, business associates, financial source, friends and neighbors or others with whom you are acquainted. This inquiry includes information as to your character, general reputation, personal characteristics and mode of living, which may be applicable. You have the right to make a written request, within a reasonable period of time, for a complete and accurate disclosure of additional information concerning the nature and scope of the investigation.

<b>Check the TYPE of Request:</b>		<b>New License</b>		<b>License Renewal</b>	
<b>Section 1. Applicant Information</b>					
USTA Membership No.:			Expiration Date:		
Trainer Type:		G	L		
Nature of entity applying:		Corporate	Partnership	Ltd. Partner	Syndicate
Horses are to be raced in the name:					
Applicant Name:					
Principal Address:					
City:		State:	Zip:		
Cell/Home Phone:			Fax:		
Work Phone:			Email:		

Answer Y (Yes) or N (No) and provide corresponding detail where appropriate:

Are you registered in another state?  
 Where (State)? \_\_\_\_\_ Date: \_\_\_\_\_

Have you previously been denied a registration?  
 Where (State)? \_\_\_\_\_ Date: \_\_\_\_\_

Have any of the applicants (or persons involved with application) ever been suspended, denied a license or ruled off by this or any other harness racing commission or governing body?  
 Where (State)? \_\_\_\_\_ Date: \_\_\_\_\_  
 Detail: \_\_\_\_\_

Have any of the applicants (or persons involved with application) ever been convicted of a crime?

*For each conviction described above, a certified copy of the court complaint, including indictment and /or certified copy of the disposition must be attached to the application. If papers are not attached, your application will be considered incomplete and will not be processed.*

Are you a defendant in a civil action pending in the State of Maine regarding nonpayment of bills?

Are there any unpaid civil judgments against you?  
 If YES, provide detail: \_\_\_\_\_

Who is your trainer? \_\_\_\_\_

List of horses to be raced in Maine by this stable: Specify whether the horse was obtained through a lease (L) or purchase (P) in appropriate space. If leased, you must state lessor's name and address where indicated and attach a copy of the lease agreement(s) with application.

	Horse's Name	Name (Lessor /Seller)	Address (Lessor /Seller)	P/L
1.				
2.				
3.				

All winnings to be credited to: \_\_\_\_\_ License No.: \_\_\_\_\_ TIN/SSN: \_\_\_\_\_

**ALL CORPORATE APPLICANTS must complete the following section.**

Corporate Name:			
Date of Incorporation:		Place of Incorporation:	
Stock Description:			
Bank Conducting Business:			
Bank Address:			
Bank Telephone:			

A copy of the certificate of incorporation for any corporate applicant or ownership agreement for any multiple ownership applicant must be attached to the application. Full disclosure must be made of all individuals required to be licensed in connection with this application by the Rules and Regulations of the Maine State Harness Racing Commission. In case of a corporate applicant, all corporate officers, member of the Board of Directors, managers and stockholders having any interest must be disclosed and licensed. For any simple Stable Name or multiple membership, all owners and managers must be disclosed and licensed.

Name: _____	Address: _____		
USTA Lic. No.: _____	SS#: _____	DOB: _____	Title: _____ % of Ownership: _____
Name: _____	Address: _____		
USTA Lic. No.: _____	SS#: _____	DOB: _____	Title: _____ % of Ownership: _____
Name: _____	Address: _____		
USTA Lic. No.: _____	SS#: _____	DOB: _____	Title: _____ % of Ownership: _____
Name: _____	Address: _____		
USTA Lic. No.: _____	SS#: _____	DOB: _____	Title: _____ % of Ownership: _____

***It is the responsibility of the applicant to amend said application promptly when changes occur in ownership. Failure to do so may result in disciplinary action.***

**NOTICE:** The Racing Secretary shall refuse entry for any entity required to be licensed to either a corporation or multiple ownership situation wherein application for such a stable name has not been made prior to entry.

**Any person making any false, untrue or misleading statement on an application for license or registration or in a written or oral examination in connection with such an application may be disciplined as provided for in the rules and regulations of the Maine State Harness Racing Commission.**

**Any false written statements made by you with the intent to deceive a public servant in the performance of official duties may expose you to criminal liabilities under 17-M.R.S. 453 § 1(B).**

Print Name, Title of Corresponding Officer

Corresponding Officer Signature

The above named personally appeared before me and swore that the information contained herein is, to the best of his/her knowledge, true.

Date

Notary Public Signature

**Section 2: Fees**

\$30 One-Year Registration

**License fees must accompany application. Checks must be made payable to: Treasurer, State of Maine**

**OFFICE USE ONLY**

Date Received:					Method of Payment			
Application:	Approved	Rejected		Returned	Check#:			
Current License #:					Cash Receipt #:			
Comments					Credit Card #:			
					Credit Type:	MC		VISA
					Expiration Date:			