



FOXWOODS[®]

CASINO + PHILADELPHIA

Foxwoods Casino Philadelphia Vendor Application Form

IMPORTANT NOTICE: The Pennsylvania Gaming Act and Regulations require all casino vendors become registered and complete a certification process. This form is the starting point for your potential business relationship with Foxwoods Casino Philadelphia. In addition to identifying any need Foxwoods Casino Philadelphia may have for your goods and/or services, this form will be used to begin the mandated vendor registration and/or certification process for your company. Therefore, it is required that you answer all questions on this form completely and accurately.

A Foxwoods representative may contact you regarding the information you provide below if there is an interest in considering your company for goods and/or services at our facility. Please mail this completed and signed form along with any attachments to: Foxwoods Casino Philadelphia, 2 Penn Center Plaza 1500 JFK Blvd., Suite 200, Philadelphia, PA 19102.

1. **Company/corporate name and state of incorporation (if incorporated):**

2. **Company's operating name (if different than above):** _____

3. **Name and company title of person completing this form:** _____

4. **Business Street Address:** _____

5. **City:** _____ **State:** _____ **Zip:** _____

6. **Email:** _____ **Company website:** _____

7. **Phone:** _____ **Fax:** _____

8. **Please state the company's closest office to Philadelphia and the number of employees at the office:**

INITIALS:

9. Is the company identified in question one registered as a minority-owned or women-owned business with:

The Commonwealth of Pennsylvania: Yes ID# _____ No

The City of Philadelphia: Yes ID# _____ No

10. Is the company identified in question one registered as a vendor with the Gaming Control Board?
Yes ID# _____ No

11. Is the company identified in question one certified as a vendor with any other casino?

In Pennsylvania: Yes Casino ID# _____ No

Other states: Yes State(s): _____ ID#: _____ No

12. Is the company identified on this form registered as a small business with:

The Commonwealth: Yes ID# _____ No

The federal government: Yes ID# _____ No

13. Please list all states in which you are registered or organized as a business entity under the laws of that jurisdiction (include Pennsylvania, if relevant, and the applicable business entity type for each state):

14. Please disclose customer name, a contact and phone number for three present or recent customer references, including any casinos with whom the company has contracted:

1. _____

2. _____

3. _____

15. Please state the number of years your company has been in business and gross revenues for the company over the past three fiscal years.

INITIALS:

16. Please set forth the full name and title of all persons who will be involved in sales to casinos.
(please attach additional sheets if necessary): _____
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Signature: I am signing this form on behalf of and as an authorized agent of the company identified in question one of this form and I certify that that all the information provided by me in this form and the attachments to it, are true and accurate to the best of my knowledge. In signing below I further acknowledge on behalf of my company, that the company is aware of the obligation to submit registration and certification forms, and to undergo investigation in order to do business under Pennsylvania law, and further agree to cooperate fully if selected as a potential Foxwoods Casino Philadelphia vendor.

Signed:

Date

Print:

Title:

FOOTNOTE: Potential vendors should review the websites for the Pennsylvania Gaming Control Board (www.pgcb.state.pa.us) and the Pennsylvania Department of General Services (www.dgs.state.pa.us) for information about how to register as a vendor. Registration will greatly streamline your ability to do business with Foxwoods Casino Philadelphia.