



NRC's Multiple Jurisdiction
**STABLE NAME
and/or
OWNERSHIP ENTITY
APPLICATION**

for use by Compact licensees

FOR OFFICE USE ONLY

Date: ___/___/___	License #: _____
Total Fees: _____	Receipt/Trans. ID # _____
Payment type: _____	
Clerk _____	Approved by _____

Use this form if you plan to race a horse that you own with others (in a corporation, LLC, partnership, trust, estate) or that you intend to race under a stable name. Answer all questions on behalf of the Ownership Entity (unless a sole owner registering a stable name).

1. Breed: <input type="checkbox"/> Thoroughbred <input type="checkbox"/> Standardbred <input type="checkbox"/> Quarter Horse <input type="checkbox"/> Other _____	2. <input type="checkbox"/> New <input type="checkbox"/> Renewal
3. License Term: <input type="checkbox"/> 1 Year <input type="checkbox"/> 2 Years <input type="checkbox"/> 3 Years (Check with the applicable racing commission to learn what is available.)	
4. Type of Entity: <input type="checkbox"/> Corporation <input type="checkbox"/> LLC (member-managed) <input type="checkbox"/> LLC (manager-managed) <input type="checkbox"/> Joint Venture (multiple entities) <input type="checkbox"/> Partnership (general) <input type="checkbox"/> Partnership (limited) <input type="checkbox"/> Professional Ass'n <input type="checkbox"/> Trust <input type="checkbox"/> Estate <input type="checkbox"/> Other: _____	

5. Entity (applicant) full legal name: _____

Service of all papers may be made upon you by mail to your Business address, and it is your responsibility to report any changes to it:

6. Address: Business: _____

Other: _____ Email: _____

7. Telephone: Business: _____ Home: _____ Fax: _____ Cell: _____

8. Federal / Foreign Tax I.D. number: _____ Primary Trainer: _____

9. Stable Name (name your horses race under): _____

10. Stable Name is registered with: USTA TJC USTA or TJC registration number: _____

11. Has your Entity or Stable ever been known or licensed under an alias, assumed, alternate, or prior name? Yes No

If yes, name(s), when, where, why: _____

12. Every State (and when) your Entity/Stable has raced: _____

13. Do you own a registered horse under direct care or supervision of a trainer, licensed and in good standing, in CA? Yes No

14. Designate an owner (or trustee or executor) who is responsible for all racing activities of your Ownership Entity or Stable. *In AZ, NE (if ptnrshp), PA and WV, you MUST appoint someone to represent your entity/stable and use a notarized Authorized Agent form.*

Name	Title (and % s/he owns)	Address	Telephone	SSN/tax #

15. If you want to designate anyone else (i.e., a trainer) to handle some ownership duties, you must answer this Question or submit partnership papers that address the issue (*and in MI, NE, NJ, OH, and VA, all general partners must sign such papers*). *In AZ, NE (if ptnrshp), PA and WV, you MUST use and submit an Authorized Agent form for each person who is a designee of your entity or stable.*

(a) To whom are winnings payable: _____

(b) Who has power of entry/declaration: _____

(c) Who has power to claim horses: _____

(d) What restrictions, if any, apply to such person or persons' authority to withdraw or spend your entity/stable monies, or to enter, declare, or claim horses on its behalf? _____

16. List those with a title or beneficial ownership interest in the Entity or Stable (list them all, using a separate page if necessary):

Name	Status	Address	Business Telephone	Percent owned	Compact License #

17. Horses owned or leased by your Ownership Entity or Stable (list them all, using a separate page if necessary):

Name	Breed	Birth Year	Trainer	Horse was purchased or leased from:	Entity: % own	Entity: % lease

18. CORPORATIONS (and LLCs): (a) When and where incorporated: _____

(b) Stock (type/shares outstanding): _____ (c) Bank Information: Bank's name: _____ ; address: _____ ; telephone: _____

(d) Parent corporation(s): _____ ; conducts business in Florida? Yes No

(e) Officers and directors (or LLC managers) of the Ownership Entity (list them all, using a separate page if necessary). It is not necessary to provide this information to race in AZ, KY, IN, NE, VA, or WA; and in OH, you have to disclose only your CEO.

Name	Title / Position	Address	Telephone	Compact License #

19. Has your Entity or Stable itself (i) any criminal convictions; (ii) ever not been in good standing at a track or had its racing license denied, suspended, or revoked; or (iii) any current racing-related debts that are overdue by more than 90 days? Yes No
 If yes, you must use a separate page and fully explain (when, where, what charges/issues/penalties/debts, how, why, & current status).

20. You must submit a copy of your Ownership Entity papers (articles of incorporation; partnership agreement), reducing any oral part to writing signed by all parties (notarized for DE or KY); and of any authorized agent forms (required in AZ, NE (as partnership), and WV), leases, or contingent-sale agreements. You must also register your colors in DE, KY, IL, MD, LA, NJ, PA, VA, and WA:

Jacket color and description: _____

Sleeves: _____ Collar: _____ Cap: _____

"I hereby affirm, under penalty of perjury, that I represent this Ownership Entity/Stable as a CEO, LLC manager, general partner, trustee or executor of it, or I am a sole proprietor registering a stable name; all owners of this entity / stable are listed herein and are eligible to be licensed; there are no hidden ownership interests; and all documents and information herein are true and accurate."

Name: _____ Signature: _____ Date: _____

PARTNERSHIPS: To race in AR, DE, LA, MD, NE, PA (thoroughbred) all general partners must sign and thus join this affirmation:

Signature: _____ Date: _____ Signature: _____ Date: _____

Signature: _____ Date: _____ Signature: _____ Date: _____

Signature: _____ Date: _____ Signature: _____ Date: _____

SUPPLEMENTAL PAGE(S) -- NRC Stable Name/Ownership Entity Application

For **Q.16**, additional persons with a title or beneficial ownership interest in the Entity or Stable:

Name	Status	Address	Business Telephone	Percent owned	Compact License #

For **Q. 17**, additional horses owned or leased by our Ownership Entity or Stable:

Name	Breed	Birth Year	Trainer	Horse was purchased or leased from:	Entity: % own	Entity: % lease

For **Q. 18(e)**, additional officers and directors (or LLC managers) of the Ownership Entity:

Name	Title / Position	Address	Telephone	Compact License #

"I hereby affirm that this Supplement is true and accurate." Signature of applicant: _____