

NRC's Multiple Jurisdiction STABLE NAME and/or

OWNERSHIP ENTITY APPLICATION

FOR OFFICE USE ONLY				
Date://	License #:			
Total Fees:	Receipt/Trans. ID #			
Payment type:				
Clerk	Approved by			

-	for use by Compact licensees			
Use this form if you plan to race to race under a stable name. An				
1. Breed: ☐ Thoroughbred	☐ Standardbred ☐ Quarte	er Horse Other	2. \(\square\) New	☐ Renewal
3. License Term: ☐ 1 Year	\square 2 Years \square 3 Years (C	Check with the applicable r	acing commission to learn wha	is available.)
4. Type of Entity: ☐ Corporati ☐ Partnership (general) ☐ ☐	· ·	• /	anaged) ☐ Joint Venture (mui	•
5. Entity (applicant) full legal n	ame:			
Service of all papers may be made	de upon you by mail to your	Business address, and it is	your responsibility to report a	y changes to it:
6. Address: Business:				
Other:			Email:	
7. Telephone: Business:	Home:	Fax: _	Cell:	
8. Federal / Foreign Tax I.D. nu	ımber:	Primary Trainer		
9. Stable Name (name your ho	rses race under):			
10. Stable Name is registered w	vith: □ USTA □ TJC	USTA or TJC r	egistration number:	
11. Has your Entity or Stable e	ver been known or licensed i	under an alias, assumed, al	ternate, or prior name? \Box Y	es 🗆 No
If yes, name(s), when, when	e, why:			
12. Every State (and when) you	r Entity/Stable has raced: _			
13. Do you own a registered hor	rse under direct care or super	rvision of a trainer, license	d and in good standing, in CA?	\square Yes \square No
14. Designate an owner (or trus NE (as partnership), <i>and</i> WV, <i>yo</i>				
Name	Title (and % s/he owns)	Address	Telephone	SSN/tax #
15. If you want to designate an partnership papers that address the ptnrshp), PA and WV, you MUS	he issue (and in MI, NE, NJ,	OH, and VA, all general p	partners must sign such papers	. In AZ, NE (if
(a) To whom are winnings p	ayable:			
(d) What restrictions, if any,	apply to such person or per	sons' authority to withdraw	or spend your entity/stable mo	nies, or to
enter, declare, or claim	horses on its behalf?			

Name	St	tatus		Address		Business Telephone	Percent owned	Compact License #
17. Horses owned or lea	sed by your	Ownershi	p Entity (or Stable (list them all, us	ing a separate p	page if necess	ary):	
		<u>Birth</u>				purchased	Entity:	
Name	Breed	<u>Year</u>	Trainer		or leas	ed from:	% own	% lease
18. CORPORATIONS ((and LLCs):	(a) When	n and who	ere incorporated:				
(b) Stock (type/shar	es outstandin	ıg):				(c) Bar	nk Informati	on: Bank's
							elephone:	
(e) Officers and dire	ectors (or LL	C manage	ers) of the	e Ownership Entity (list t	hem all, using a	separate pag	e if necessar	y). It is not
necessary to provide thi				Y, IN, NE, VA, or WA; a	and in OH, you h	have to disclo		
Name	Т	itle / Posi	tion	Address		Telephone	Compac	t License #
19. Has your Entity or S denied, suspended, or rev If yes, you must use a sep 20. You must submit a part to writing signed by and WV), leases, or cont	voked; or (iii) parate page a copy of your all parties (notingent-sale a	any currand fully ear Owners otarized furgerent	ent racing explain (which has been the content of t	g-related debts that are overhen, where, what charge y papers (articles of income KY); and of any authority also register your colust also register your colust.	verdue by more res/issues/penalticorporation; partnered agent forms ors in DE, KY,	than 90 days? es/debts, how, ership agreen (required in h	why, & curnent), reduction AZ, NE (as part)	Yes ☐ No rent status). ing any oral partnership)
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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
owned
License #

Licen

For Q. 17 , additional horses ow	vned or leas	sed by our Ownership Entity or Stable:			
	<u>B</u>	<u>irth</u>	Horse was purchased	Entity:	Entity:

Name	Breed	<u>Birth</u> Year	<u>Trainer</u>	or leased from:	<u>Entity:</u> % 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:

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