



**STATE OF NEW MEXICO
GAMING CONTROL BOARD**

**MANUFACTURER'S REQUEST FOR RENEWAL OF
ASSOCIATED EQUIPMENT/ LICENSING WAIVER**

1. Name of Manufacturer: _____
Address: _____ City: _____ State: _____ Zip: _____
Contact Person: _____ Phone: _____
2. Type of associated equipment (attach schematics and description): _____
Company/Name/Model/Version Number: _____

Any developer of associated equipment, or a manufacturer/distributor of associated equipment, must complete and submit this form before renewal of the waiver will be considered. This form must be submitted at least **THIRTY DAYS** prior to the expiration date of the consent waiver.

Forms must be submitted to: New Mexico Gaming Control Board
Information Systems Division
6400 Uptown Blvd. NE – Suite 100-E
Albuquerque, NM 87110

Each type of associated equipment requires a separate form – do **NOT** include more than one type of associated equipment on each form. The Gaming Control Board charges a fee of \$25.00 for associated equipment renewals/reviews pursuant to Section 60-2E-29 (G) and (H) of the Gaming Control Act.

The undersigned, understands the requirements outlined above and requests a renewal of associated equipment, and where appropriate, a waiver of the requirement to obtain a manufacturer's license under Section 60-2E-13(D) of the Gaming Control Act. Furthermore the undersigned hereby agrees to indemnify, hold harmless and defend, not excluding the State's right to participate, the State of New Mexico, the State Gaming Control Board, and each of their members, agents, and employees in their individual and representative capacities from any and all claims, suits, and actions, brought by anyone associated with this request, or by any third party, against the agencies or persons named in this paragraph, arising out of the submission, investigation and deliberation of this request, and against any and all liabilities, expenses, damages, charges and costs, including court costs and attorneys' fees, which may be sustained by the persons and agencies named in this paragraph as a result of said claims, suits and actions.

Please attach your check in the amount of \$25.00 payable to the Gaming Control Board.

Printed Name and Title of Company Official

Signature of Company Official

Date