



MASSACHUSETTS GAMING COMMISSION

PLEASE SUBMIT THIS LETTER AND ATTACHMENTS TO:
MASSACHUSETTS GAMING COMMISSION
ATTENTION: JOHN ZIEMBA, OMBUDSMAN
84 STATE STREET, 10TH FLOOR
BOSTON, MA 02109

APPLICATION FOR COMMUNITY DISBURSEMENT W/O LETTER OF AUTHORIZATION

in accordance with 205 CMR 114.03(2)(b)

TYPE OF REQUEST (choose one from drop down menu): [Click to choose one](#)

1. NAME OF MUNICIPALITY
2. MUNICIPAL DEPARTMENT THAT WOULD RECEIVE FUNDS IF GRANTED
3. NAME AND TITLE OF INDIVIDUAL RESPONSIBLE FOR HANDLING OF FUNDS
4. ADDRESS OF INDIVIDUAL RESPONSIBLE FOR HANDLING OF FUNDS
5. PHONE # AND EMAIL ADDRESS OF INDIVIDUAL RESPONSIBLE FOR HANDLING OF FUNDS
6. NAME AND TITLE OF INDIVIDUAL AUTHORIZED TO COMMIT FUNDS ON BEHALF OF MUNICIPALITY
7. ADDRESS OF INDIVIDUAL AUTHORIZED TO COMMIT FUNDS ON BEHALF OF MUNICIPALITY
8. PHONE # AND EMAIL ADDRESS OF INDIVIDUAL AUTHORIZED TO COMMIT FUNDS
9. NAME OF APPLICANT FOR GAMING LICENSE AND CATEGORY OF LICENSE BEING APPLIED FOR
10. NAME OF HOST COMMUNITY FOR APPLICANT FOR GAMING LICENSE

TIMING OF REQUEST

A municipality may apply for community disbursement funds without a signed letter of authorization only at certain times. Please check the box next to the statement that best describes the situation of the city or town seeking funds:

- A. 21 DAYS HAVE PASSED SINCE THE APPLICANT AND THE HOST COMMUNITY EXECUTED A HOST COMMUNITY AGREEMENT.

DATE APPLICANT AND HOST COMMUNITY EXECUTED A HOST COMMUNITY AGREEMENT

- B. THE APPLICANT IS APPLYING FOR A CATEGORY 1 (FULL CASINO) LICENSE AND THIS APPLICATION FOR FUNDS IS BEING SUBMITTED AFTER OCTOBER 2, 2013 (90 DAYS PRIOR TO DEADLINE FOR SUBMISSION OF RFA-2 APPLICATION BY APPLICANT)

- C. THE APPLICANT IS APPLYING FOR A CATEGORY 2 (SLOTS) LICENSE AND THIS APPLICATION FOR FUNDS IS BEING SUBMITTED AFTER AUGUST 5, 2013 (60 DAYS PRIOR TO DEADLINE FOR SUBMISSION OF RFA-2 APPLICATION BY APPLICANT)

ITEMIZATION OF REQUESTED FUNDS

Please identify below all legal, financial, and other professional services deemed necessary by the community, and for which the community now seeks funds, relative to the cost of determining the impact of the proposed gaming establishment and for the negotiation and execution of a surrounding community agreement. Documentation (e.g.- invoices, proposals, estimates, etc.) adequate for the Commission to evaluate this application in accordance with 205 CMR 114.03(2)(b)(2) must be attached to this application. Please attach additional sheets if necessary.

(CLICK ON BOX TO INSERT TEXT)

- 1Name of vendor Address vendor Type of Service Provided Cost of Service Type of request
- 2Name of vendor Address of vendor Type of Service Provided Cost of Service Type of request
- 3Name of vendor Address of vendor Type of Service Provided Cost of Service Type of request
- 4Name of vendor Address of vendor Type of Service Provided Cost of Service Type of request
- 5Name of vendor Address of vendor Type of Service Provided Cost of Service Type of request
- 6Name of vendor Address of vendor Type of Service Provided Cost of Service Type of request

INTERACTION WITH APPLICANT

To be eligible for disbursement of these funds the community must attest that a request for the funds being requested in this application was first made to the applicant directly and denied, and that a copy of this application was served on the applicant prior to being filed with the Commission. Please provide a response to each of the following:

1. Please describe the manner in which the subject funds were requested from the applicant and denied by the applicant including the date(s) on which the request was made, to whom it was made, the manner in which the request was denied (i.e.- whether the denial was in writing, verbal, or by virtue of a lack of response to the request), and the nature of any relevant conversations. Please attach a copy of any relevant written communications.
2. Please attach proof of service of this application on the applicant prior to it being filed with the Commission that reflects the date it was filed, the name and address of the person it was sent to, and the method of service that was used.

JUSTIFICATION

The Commission may approve this application and grant the funds requested if it finds that there is a reasonable likelihood that the community will be designated a surrounding community pursuant to 205 CMR 125.01, that the request is reasonable in scope, and that the risk that the community will not be able to properly determine the impacts of a proposed gaming establishment without the requested funds outweighs the burden of the actual financial cost that will be borne by the applicant. Please provide a response to each of the following:

1. Please explain why the community believes it is reasonably likely that it will be designated a surrounding community. Reference may be made to the factors outlined in 205 CMR 125.01(2)(b), including the proximity of the community to the proposed gaming establishment, any connecting infrastructure, and other similar elements.
2. Please explain why the community believes that it will not be able to properly determine the impacts of the proposed gaming establishment without the requested funds. Include an explanation as to the interaction the community has had with the regional planning agency, if any, and why that process, if any, will not be sufficient; the interaction it has had with the host community and other prospective surrounding communities and why existing studies and reports, if any, will not be satisfactory.
3. Please provide any additional information that the community believes demonstrates that the funds being requested are reasonable in scope. For example, please explain why the costs of the services requested are a reasonable amount.

CERTIFICATION BY MUNICIPALITY

On behalf of the aforementioned municipality I hereby certify under the pains and penalties of perjury that all information contained in this application or attached hereto is accurate to the best of my knowledge and understanding. Further, I represent that I have actual authority to submit this application.

Signature of responsible municipal official

Date

Name of responsible municipal official

Title