



To:

From:

Date:

Subject:

The _____ is requesting the authorization of the IEB to make the following changes beginning on _____ and until complete:

_____ Slot Machine Movement

- Relocation of Existing Slot Machines on the Casino Floor
- Relocation from a Storage Location to the Casino Floor
- Relocation from the Casino Floor to a Storage Location
- Installation of New Slot Machines to the Licensee's Casino Floor (Shipment)
- Removal / Transport of slot machines from the Licensee's Facility (Shipment)

_____ Type of Change (if any)

- Machine Theme Conversion
- Machine Theme Termination
- Progressive Transfer
- Percentage Change
- Denomination Change
- Other Machine Modification

Does the request involve Progressive Slot Machines?

Yes:

No:



*Investigations and
Enforcement Bureau*

Number of Gaming positions

Before: _____ After: _____

Description of Modification (Detailed):



Investigations and
Enforcement Bureau

For Official Use Only

Please note: all slot machine modifications require IEB inspection.

Approval for Change:

IEB

Date

Certification of Completion
and Slot Machine Readiness:

Slot Shift Manager

Date

**In signing off on this certification the licensee is stating that any and all settings, liabilities, transfers, approvals, have been completed for the aforementioned project. Sign off individual must hold a key license at a minimum.*

CERTIFICATION OF SURVEILLANCE:

Please note: Email certification that Surveillance approves the slot coverage must be received by IEB prior to any bill testing.

cc:
IEB --Gaming Agents Division Chief
IEB – Compliance Coordinator
IEB - Compliance Regulatory Manager