



STATE OF NEW JERSEY
CASINO CONTROL COMMISSION

Attn: Licensing Unit
Tennessee Avenue and Boardwalk
Atlantic City, NJ 08401
(609) 44 1-3441

Inactive List Request Form

Please be advised that I will not be submitting a resubmission review form, supporting documentation and fees in a timely manner and I hereby request to be placed on the Inactive Casino Key Employee License List.

I understand that I will remain on the list for a period of five (5) years, during which time I can initiate the reactivation of my license by submitting the material referenced above. Persons inactive over one (1) year should call the Licensing and Financial Evaluation Unit at (609) 441-3441 for guidance before filing any forms.

I understand that I must initiate the reactivation of my license and receive Commission approval prior to working in any position that requires licensure as a casino key employee.

Further, I understand that if I do not activate my license during the five (5) year cycle, my license will be deemed to be abandoned.

NAME: _____

LICENSE NO.: _____

Signature

Date

Address (No. and Street, Apt, Suite, Rd No.)

City, State, Zip Code

Home Telephone No.

Cell Telephone No.

Business Telephone No.

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Electronic Submission Instructions

To send secure communications/attachments to the Licensing and Financial Evaluation Unit at the Casino Control Commission:

1. Please make sure all form fields are filled out correctly. Navigate to the secure site portal url - <https://ssl.datamotion.com/register/cureg.aspx?rept=licensing@ccc.state.nj.us>
2. Register to the site if logging in for the first time.
3. Attach any necessary files by selecting the "Browse for file".



4. Once you are finished composing your email click "Send Secure" to send your email.

