



State of California  
Department of Justice  
Bureau of Gambling Control  
(916) 227-3584; Fax: (916) 227-2308

## APPLICATION FOR TRANSFER OF WORK PERMIT BGC-022 (Rev. 04/13)

Please read the instructions listed on this form. **This application is only used for the transfer of valid work permits issued by the California Gambling Control Commission as provided in California Code of Regulations Title 4, Section 12120.** Work permits issued by a local jurisdiction licensing authority may not be transferred. Type or print legibly in ink an answer for each question. If a question does not apply to you, please indicate with "N/A". Do not misstate or omit any material fact(s) as each statement made herein is subject to verification. Any corrections, changes, or other substitutions must be initialed and dated by the applicant.

<b>PLEASE TYPE OR PRINT ALL INFORMATION</b>			
<b>Part I</b>	APPLICANT NAME	WORK PERMIT NUMBER	
	HOME ADDRESS		
	MAILING ADDRESS (IF DIFFERENT THAN HOME ADDRESS)		
	PHONE NUMBER ( )	E-MAIL ADDRESS (optional)	DATE OF BIRTH
	NAME OF GAMBLING ESTABLISHMENT ON YOUR EXISTING WORK PERMIT		

<b>Part II</b>	I would like to transfer my existing work permit to the following gambling establishment:		
	NAME OF GAMBLING ESTABLISHMENT		
	MAILING ADDRESS		
	PHONE NUMBER ( )	FAX NUMBER (if any) ( )	E-MAIL ADDRESS (if any)
	JOB TITLE AND DESCRIPTION OF DUTIES:		

**I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.**

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

***I hereby authorize the Bureau of Gambling Control, or its representatives, to furnish any information of any nature concerning me to the California Gambling Control Commission or the licensed gambling establishment for which I am employed.***

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

I certify that this applicant has been offered a position under my employ and I have authorized his/her application for transfer of work permit.

Signature of Owner/Hiring Authority/Designated Agent \_\_\_\_\_ Name and Title (print) \_\_\_\_\_ Date \_\_\_\_\_

## TRANSFER OF WORK PERMIT INSTRUCTIONS

The Gambling Control Act requires that all individuals who are employed as gambling enterprise employees hold a valid work permit. An application for a transfer of work permit (BGC-022 (Rev. 04/13)) shall be made to the Bureau of Gambling Control (Bureau) when a work permit holder has obtained his or her work permit from the California Gambling Control Commission (Commission) because the local licensing authority does not have a work permit process in place, or is not required by the local licensing authority of a city, county, or city and county.

This application is used **only** for the transfer of valid work permits issued by the Commission. Do not use this form if the current employer or the gambling establishment where you want to transfer is required to obtain their work permits from the local licensing authority. All individuals applying to **transfer** a work permit must complete and submit the following:

1. Application for Transfer of Work Permit (BGC-022 (Rev. 04/13)) signed by the applicant and by the owner/hiring agent/designated agent of the gambling establishment.
2. A 2X2, passport-style color photograph taken within the last 30 days.
3. A photocopy of your current California Driver's License or California Identification Card.
4. A photocopy of your current work permit.
5. A non-refundable \$25.00 transfer application fee. Checks should be made payable to the **Bureau of Gambling Control**.

The application for transfer can be mailed to:

For Regular Mail Delivery:

**Bureau of Gambling Control  
P.O. Box 168024  
Sacramento, CA 95816-8024**

For Commercial/Personal Delivery:

**Bureau of Gambling Control  
4949 Broadway  
Sacramento, CA 95820**

By submitting this application, applicants understand that they are seeking the granting of a privilege and acknowledge that the burden of proving their qualifications for a favorable determination is at all times on them.

The applicant accepts any risk of adverse public notice, embarrassment, criticism, or other action or financial loss that may result from action with respect to the submitted application.

Any questions regarding the process of transferring a work permit may be directed to the Bureau at the above address or by telephone at (916) 227-3584. You may also find forms and other useful information by accessing the Bureau's website at: [www.oag.ca.gov/gambling](http://www.oag.ca.gov/gambling).