



APPLICATION FOR CERTIFICATE OF SUITABILITY AS A GAMING SERVICE PROVIDER

AN APPLICANT FOR A CERTIFICATE OF SUITABILITY HAS NO RIGHT TO BE AWARDED SAME. ALL CERTIFICATES ISSUED BY THE GAMING BOARD FOR THE BAHAMAS ARE CONTINGENT ON THE ONGOING SUITABILITY OF THE PERSONS/COMPANY TO WHOM THEY ARE ISSUED. IN EVERY CASE, THE APPLICANT BEARS THE ONUS OF PROVING FULL COMPLIANCE WITH ALL APPLICABLE QUALIFICATION CRITERIA.

NOTE:

This Form must be completed jointly by the parties as follows:

- (i) The holder of the relevant Operator Licence must complete Section A and insert the information requested in the Table immediately below, and
- (ii) The proposed gaming service provider must complete Section B, the Affidavit & the Authorisation for Examination and Release of Information.

APPLICANT FOR CERTIFICATE OF SUITABILITY [GAMING SERVICE PROVIDER]:

| | |
|--|--|
| Name of licensed operator | |
| Name of proposed gaming service provider | |
| Duration of agreement for provision of services and summary of services to be provided: | |
| | |
| Date of completion of form | |

All correspondence must be addressed to:

The Secretary
Gaming Board for The Bahamas
4th Floor, Centreville House
2nd Terrace West & Collins Avenue
Nassau, BAHAMAS

For official use only

GB Ref. No.: _____

Insp. Sig.: _____



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APPLICATION INSTRUCTIONS

1. **Read these instructions and every question carefully before answering and follow any specific instruction which may be given in relation to certain questions.**
2. **Answer every question in full. If you fail to answer any question, give incomplete answers or fail to submit all the additional information required, your application will be considered to be incomplete and may be rejected by the Board.**
3. If a question does not apply to you, write "N/A" (for "Not Applicable") in the space provided for the answer. If there is nothing to disclose in response to a particular question, write "None" in the space provided for the answer. If an alteration is made to an answer, sign in full next to the alteration.
4. All answers on this form, except signatures, must be typed or **legibly printed in black ink**. On completion, each page of this form must be signed in full in the space provided at the bottom of each page.
5. **This application form must be completed by the person authorised thereto by the applicant company identified on the front page.** Return the completed form to the Secretary, Gaming Board for The Bahamas, Centreville House, 2nd Terrace West & Collins Avenue, Nassau, Bahamas.
6. The original completed application form and all the additional required information must be submitted to the Board (**no copies of the original application or the supporting documentation are required to be submitted**).
7. If additional space is required to answer any question, please use additional pages, but be sure to indicate the number(s) of the question(s) you are answering on these additional pages and clearly cross reference the additional information with the relevant questions.
8. All amounts must be reflected in **Bahamian Dollars**. When converting from a foreign currency to Bahamian Dollars or if documents are included which reflect foreign currencies, convert at or quote the applicable **rate of exchange and the date of the rate of exchange**.
9. If any details of the applicant, which are reflected in this application form, change before a licence has been issued by the Board, the Board must immediately be notified in writing.
10. All dates must be in the format: **Day / Month / Year**.

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SECTION A (TO BE COMPLETED BY LICENSED OPERATOR)

| | |
|---|-----------------------|
| Registered name | |
| Licence Number | |
| CONTACT PERSON FOR THIS APPLICATION: | |
| Title & Full Names | |
| Telephone & Fax Numbers | |
| E-mail address(es) | |
| AGREEMENT FOR PROVISION OF SERVICES BY GAMING SERVICE PROVIDER: | |
| Actual/Projected date of commencement | |
| Projected date of termination (if any) | |
| Nature of services, resources and/or infrastructure to be provided (where applicable): | |
| Gaming Services: | |
| | |
| Human/management resources: | |
| | |
| Infrastructure: | |
| | |
| DECLARATION BY LICENSED OPERATOR: | |
| <p>I,, declare that –</p> <p>(i) I have been authorised by the licensed operator named herein to bring this application in conjunction with the proposed Gaming Service Provider identified in this application;</p> <p>(ii) I have personally completed Section A of this application form and the particulars given herein are to the best of my knowledge true and accurate in every detail, and</p> <p>(iii) There are <u>no other agreements</u> which have been executed between the licensed operator and the proposed Gaming Service Provider, other than those which have been submitted to the Gaming Board in conjunction with this application.</p> | |
| _____ | _____ |
| SIGNATURE | CAPACITY OF SIGNATORY |
| | _____ |
| | DATE |

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SECTION B (TO BE COMPLETED BY PROPOSED GAMING SERVICE PROVIDER)

1. IDENTIFYING DETAILS OF APPLICANT:

| | |
|---|--|
| Registered name | |
| Registration number | |
| Trading name | |
| Principal activities: | |
| Contact Person for this application: | |
| Title & Full Names | |
| Telephone & Fax Numbers | |
| E-mail address(es) | |
| Principal business address of the applicant: | |
| Street address | |
| City/Town & Province/State | |
| Postal/Zip code | |
| Country | |
| Telephone & Fax Numbers | |
| Website address | |
| Mailing address | |
| City/Town & Province/State | |
| Postal/Zip code | |
| Country | |
| Registered office of the applicant: | |
| Street address | |
| City/Town & Province/State | |
| Postal/Zip code | |
| Country | |
| Telephone & Fax Numbers | |

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2. OTHER NAMES AND ADDRESSES OF THE APPLICANT:

State all previous names under which and addresses from which the applicant has done business in the past five years.

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3. DESCRIPTION OF THE APPLICANT ENTITY:

Indicate what type of legal entity the applicant is:

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| Limited liability company | |
| Corporation | |
| Public unlisted company | |
| Public listed company | |
| Partnership | |
| Other (provide details) | |

4. DOCUMENTATION REQUIRED:

4.1 Where applicable, submit certified true copies of the **Certificate of Incorporation and Memorandum & Articles of Association, Articles of Incorporation, Articles of Organization, Founding Document, Charter, Shareholders’ Agreement, Partnership Agreement, Trust Deed, certificate(s) of legal name changes and all amendments thereto.**

4.2 Submit a certified true copy of the **resolution by the Board of Directors or similar controlling body authorising the signatory hereto to execute the application documents on behalf of the applicant.**

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5. SHAREHOLDING OF THE APPLICANT:

| Share structure | No. of shares authorised | No. of shares issued | Par value per share | Premium at issue | Current market value | Classes* | Voting rights |
|------------------|--------------------------|----------------------|---------------------|------------------|----------------------|----------|---------------|
| Ordinary Shares | | | | | | | |
| Preferred Shares | | | | | | | |
| Other (specify) | | | | | | | |

Provide a copy of the most recent share/securities register or indicate where it may be perused.

** Elaborate if there is more than one class of share with different voting rights.*

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5.1 If the rights of shareholders of any class of shares may be modified other than by a vote, indicate this and explain briefly:

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6. NON-VOTING SHAREHOLDERS:

6.1. If applicable, give details of all the non-voting shareholders below:

| Name & address of shareholder | Passport/Social Security/Registration number/ National I.D. No. | Date of birth/ incorporation | Number of shares held | Description of non-voting shares | Method of payment for shares |
|-------------------------------|---|------------------------------|-----------------------|----------------------------------|------------------------------|
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7. INVOLVEMENT:

7.1. Direct shareholding - list all the direct shareholders in the applicant below:

| Full name of holder | Passport/social security/registration no. / national I.D. No. | No. of shares held | Percentage shareholding |
|---------------------------|---|--------------------|-------------------------|
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| TOTAL SHAREHOLDING | | | 100% |

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7.2. Indirect shareholding - list all the persons holding an indirect shareholding of 5% or more in the applicant below:

| FULL NAME OF HOLDER | PASSPORT/SOCIAL SECURITY/REGISTRATION NO. | NO. OF SHARES HELD | PERCENTAGE SHAREHOLDING |
|----------------------------|--|---------------------------|--------------------------------|
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7.3. List all the directors of the applicant:

| FULL NAME | PASSPORT/SOCIAL SECURITY NO. | EXECUTIVE/NON-EXECUTIVE | NATIONALITY | SHAREHOLDER REPRESENTED |
|------------------|-------------------------------------|--------------------------------|--------------------|--------------------------------|
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7.4. List the executive management of the applicant below:

| FULL NAME | PASSPORT/SOCIAL SECURITY NO. / NATIONAL I.D. NO. | DESIGNATED POSITION | NATIONALITY |
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8. INFORMATION REGARDING SERVICES TO BE PROVIDED:

8.1. Describe the nature of the gaming-related services to be provided to the licensed operator below:

8.2. Attach a complete signed copy of ALL agreements (including any annexures, schedules, addenda or appendices thereto) entered into with the licensed operator for the provision of gaming services by the Applicant, marked 8.2.

8.3. Has the Applicant, or any of its owners, directors, managers or employees –

(a) ever provided any gaming-related management or other services to any other gaming operator, whether licensed or unlicensed, anywhere in the world?

Yes No

If **yes**, complete the table below:

| NAME & TRADING NAME OF LICENSED OPERATOR | DATE OF COMMENCEMENT | DATE OF TERMINATION | REASON FOR TERMINATION | JURISDICTION BY WHICH APPROVED* |
|--|-------------------------|------------------------|---------------------------|---------------------------------------|
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* Attach a certified, current copy of the licence/authorisation/certificate issued.

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(b) **ever** been refused an application for the provision of any gaming-related management or other services to any other gaming operator, whether licensed or unlicensed, anywhere in the world?

Yes No

If **yes**, complete the table below:

| NAME & TRADING NAME OF LICENSED OPERATOR | JURISDICTION REFUSING THE APPLICATION | REASON FOR REFUSAL | DATE OF REFUSAL |
|---|--|---------------------------|------------------------|
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8.4. Describe the nature of **all** the human resources to be provided to the Operator by the Applicant by completing the table below:

| CATEGORY OF POSITION AND DUTIES | NUMBER OF APPOINTEES | EXPECTED DURATION OF APPOINTMENT | NATURE OF SUCCESSION PLANNING ARRANGEMENTS |
|--|-----------------------------|---|---|
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9. DIAGRAMMATIC REPRESENTATION OF OWNERSHIP:

If question 7 above indicates any entity as indirectly holding shares or any other ownership interest in the applicant, prepare a **diagrammatic flowchart** which illustrates the entire relationship of all the entities involved to the applicant as an attachment clearly labelled **“Question 9”**.

List all legal and natural persons, who each hold a direct or indirect financial interest of 5% or more in the applicant, clearly indicating the respective shareholdings in each entity, including the applicant. If the ultimate holding company of the applicant is a public company and no natural person controls 5% or more of the publicly traded shares, indicate this fact in a footnote to the flowchart.

10. TERMS AND CONDITIONS:

10.1. Indicate the terms on which shares are to be, and during the past five years have been, offered to the public or otherwise:

| SHAREHOLDING | TERMS | DATE |
|---------------------|--------------|-------------|
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10.2. Indicate the terms and conditions of all outstanding loans, mortgages, trust deeds, pledges or other indebtedness or obligations pertaining to the applicant are subject:

| OBLIGATION | AMOUNT | INTEREST | TERMS |
|-------------------|---------------|-----------------|--------------|
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11. SHARE OPTIONS:

A. Describe in detail any options existing in respect of shares issued or to be issued by the applicant. The description must include the title and number of shares subject to the option, the reason/purpose of the option, the year(s) during which the options have been or will be granted, the conditions under which the options have been or will be granted, the monetary consideration in respect of the option or the formula used to determine the value of the option, the terms under which option holders became, or will become, entitled to exercise the options, the period involved for exercising the options and the date of expiry of the options. For the purposes of this application, “option” means the right, warrant or option to subscribe to or purchase any shares issued by the company. (Continue on a separate page, clearly labelled “**Question 11**”, if there is insufficient space.)

| Option holder | Relationship with applicant | No of shares to which option pertains | Market value at issue of option | Current market value |
|---------------|-----------------------------|---------------------------------------|---------------------------------|----------------------|
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B. Identify all persons holding the options as described in A and complete the table below:

12. FINANCIAL INSTITUTIONS:

12.1 Furnish the information below in respect of all bank accounts currently held with any financial institution, whether domestic or foreign, regardless of whether such account was held in the name of the applicant or a nominee of the applicant or was otherwise under the direct or indirect control of the applicant.

| Name & street address of financial institution | Name of account holder | Type of account(s) | Account number | Period of time account held (from/to) |
|--|------------------------|--------------------|----------------|---------------------------------------|
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Provide copies of statements of all the accounts indicated above which reflect all transactions for the past three months.

12.2 Furnish the information below in respect of all bank accounts at any financial institution, wheresoever located, held in the name of the applicant or a nominee of the applicant, which were closed during the past five years.

| Name & street address of financial institution | Name of account holder | Type of account(s) | Account number | Period of time account held (from/to) |
|--|------------------------|--------------------|----------------|---------------------------------------|
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13. SHARES HELD BY APPLICANT:

Furnish the information below in respect of each company in which the applicant holds shares:

| INFORMATION REQUIRED | ENTITY 1 | ENTITY 2 | ENTITY 3 | ENTITY 4 |
|----------------------------------|-----------------|-----------------|-----------------|-----------------|
| Name of company | | | | |
| Reg. no of company | | | | |
| Type of shares held | | | | |
| Purchase price of shares | | | | |
| Number of shares held | | | | |
| Date acquired | | | | |
| Percentage Ownership held | | | | |
| Current market value | | | | |

Comment [VD2]: Is it necessary for us to know this?

14. FINANCIAL INTERESTS HELD IN OTHER BUSINESSES, EXCLUDING SHARES:

Describe below the nature and extent of any business interest other than shareholding, which the applicant has in any other businesses.

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15. MANAGEMENT AND OTHER CONTRACTS:

Furnish the information below in respect of all entities with whom the applicant has management or other contracts valued at B\$100,000 or more, or from whom the company has received B\$100,000 or more in goods or services in the **six months** preceding this application.

| NAME OF CONTRACTOR/SUPPLIER | STREET ADDRESS & TELEPHONE NO. | GOODS/SERVICES SUPPLIED | VALUE OF CONTRACT | METHOD OF PAYMENT |
|------------------------------------|---|--------------------------------|--------------------------|--------------------------|
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16. CRIMINAL AND RELATED HISTORY:

This question requests information about any offences the applicant, its officers, owners, or subsidiaries may have committed or may have been charged with. Prior to answering this question, carefully study the definitions and instructions below.

For the purposes of this application form: -

“Offence” includes all crimes, felonies, misdemeanours, or criminal offences regardless of their classification, and includes offences in respect of which an admission of guilt fine was payable without an obligation to appear in court.

“Charge” includes any indictment, complaint, information, summons or other notice relating to the alleged commission of any offence.

“Officer” includes all directors, executive management and trustees.

“Owner” includes all shareholders, members, partners, or other persons with a direct or indirect financial interest of 5% or more in the applicant.

Where an applicant has been charged, answer of **“yes”** must be given and all relevant information provided to the best of your ability, even if:

- the applicant did not commit the offence(s) with which it was charged;
- the charge was dismissed or withdrawn;

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- the applicant was not convicted or
- the event(s) to which the charge(s) pertained occurred more than ten years ago.

If the records relating to the charges have been expunged by court order, answer “no” and attach a copy of the expunction order to this application, clearly labelling it “Attachment to Question 16”.

16.1. OFFICIAL ENQUIRY:

Has the applicant, its owners, officers or any of its subsidiaries in the past ten years ever been subjected to an official enquiry by any regulatory body, government or provincial department, law enforcement agencies or gaming authorities?

Yes No

If yes, provide details below:

16.2. INDICTMENTS, CHARGES AND CONVICTIONS:

Has the applicant, its owners, officers or any of its subsidiaries ever been indicted, charged* with or convicted of a criminal offence or been a party or named as an indicted co-accused or co-conspirator in any criminal proceeding in any jurisdiction?

Yes No

If yes, complete the table below:

| CASE NUMBER | NATURE OF CHARGE OR COMPLAINT | DATE | JURISDICTION AND NAME OF LAW ENFORCEMENT AGENCY | COURT INVOLVED | OUTCOME/ SENTENCE |
|-------------|-------------------------------|------|---|----------------|-------------------|
|-------------|-------------------------------|------|---|----------------|-------------------|

Comment [VD3]:

Comment [VD4]: What does this asterisk refer to?

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17. TRADE REGULATIONS AND SECURITIES JUDGMENTS:

Has the applicant, its owners, officers or any of its subsidiaries ever had a judgment, consent, decree or consent order pertaining to a violation or alleged violation of trade regulations or securities Acts or similar Acts of any country, entered against it?

Yes No

If **yes**, complete the table below:

| CASE NUMBER | JURISDICTION AND NAME OF COURT OR AGENCY | NATURE OF JUDGEMENT, DECREE OR ORDER | DATE ENTERED |
|-------------|--|--------------------------------------|--------------|
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18. INSOLVENCY PROCEEDINGS AND APPOINTED RECEIVER, AGENT OR TRUSTEE:

A. Has the applicant, its owners, officers or any associated company had any application or petition under any provision of any insolvency or bankruptcy legislation filed by or against it during the ten years preceding the date of this application?

Yes No

If **yes**, provide details below:

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B. Has the applicant, its owners, officers or any associated company sought relief under any provision of any insolvency or bankruptcy legislation during the ten years preceding the date of this application?

Yes **No**

If **yes**, provide details below:

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19. EXISTING LITIGATION:

Is the applicant, any owner, officer or subsidiary currently involved in any litigation?

Yes **No**

If yes, on a **separate pages under the above number and heading**, describe all existing civil litigation in which the applicant, owner, officer or subsidiary is currently involved with, in any jurisdiction. Exclude any case for monetary damages where the damages are not expected to exceed B\$100 000 or the equivalent thereof.

The description must include all the relevant details such as the title, case number, name and address of the court where the case is pending, the identity of all the parties, a summary of the charge and the general nature of all claims being made as well as the next date to appear in court.

20. GAMING LICENCES:

20.1. Provide details below of all gaming-related licences **currently held**:

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| LICENCE TYPE | ISSUING JURISDICTION | DATE GRANTED | EXPIRY DATE |
|-----------------|-------------------------|-----------------|----------------|
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** Provide copies of all licences granted as well as the conditions attached to each licence.*

20.2. Provide details below of all gaming-related licences **previously held**:

| LICENCE TYPE | ISSUING JURISDICTION | DATE GRANTED | DATE TERMINATED | REASONS FOR TERMINATION |
|-----------------|-------------------------|-----------------|--------------------|----------------------------|
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20.3. Provide details below of all gaming-related licences **previously refused**:

| LICENCE TYPE | ISSUING JURISDICTION | DATE APPLIED FOR | DATE REFUSED | REASONS FOR REFUSAL |
|-----------------|-------------------------|---------------------|-----------------|------------------------|
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20.4. Provide details below of all applications for gaming-related licences **currently pending**:

| LICENCE TYPE | ISSUING JURISDICTION | DATE APPLIED FOR |
|--------------|----------------------|------------------|
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21. ATTACHMENTS (ALL DOCUMENTATION MUST BE SUPPLIED IN ENGLISH)

Over and above the documents requested elsewhere herein, the following documents must be appended to this application form:

21.1. Audited financial statements of the applicant for the past three years.

If the applicant has been dormant or has been newly acquired, a letter must be provided by the auditors of the Applicant entity confirming that the Applicant is dormant and that the Applicant has no material liabilities or contingent liabilities.

If the applicant is unable to provide audited financial statements for certain or all of the years required in terms of this application, a letter must be provided by the auditors of the Applicant entity confirming the non-availability of such annual financial statements and stating the reasons therefor. In such an event, at a minimum, management accounts in respect of the applicant entity must be provided for the relevant period, certified by the auditors as containing a true reflection of the business activities of the applicant company during the relevant period.

21.2. Organisational chart

Submit an organisational chart in respect of the applicant, which illustrates the organisational hierarchy and job descriptions with the names of all the incumbents, including all governance structures, e.g. audit and similar committees.

22. TAX INFORMATION

22.1. Complete the tax details in respect of the applicant requested below:

| | |
|---|--|
| Income tax reference no, if applicable | |
| Tax authority name and location | |
| VAT reference no, if applicable | |

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| Other tax liability reference no's (specify) | |
|---|--|

22.2. Has the applicant submitted its income tax and all other required returns for the **three** years directly preceding the date of this application to the relevant Authorities?

Yes No

If **yes**, and the applicant is a foreign company, furnish tax clearance certificates or the equivalent from the country of origin.

If **no**, give an explanation below.

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Documentation in respect of any extension granted by any Tax Authority must also be attached.

AFFIDAVIT

I,, do hereby make oath and say that:

1. I am duly authorised to complete this application and to make this declaration on behalf of, the Applicant herein.
2. I am aware that the Board may refuse a licence to any applicant that supplies information to the Board which is false in any material respect or subject to any material omission.

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3. The particulars contained herein are to the best of my knowledge and belief true and correct in every detail and I have fully disclosed all information required in completing this form.

SIGNATURE OF DEPONENT

DATE

I certify that:

This declaration was sworn to before me at, on this day of, 20.....

* Delete which is not applicable

.....
NOTARY PUBLIC/COMMISSIONER OF OATHS

Note: This affidavit must be accompanied by a Board resolution authorising the signatory to execute same.

AUTHORISATION FOR EXAMINATION AND RELEASE OF INFORMATION AND INDEMNIFICATION

TO: All courts, probation departments, employers, educational institutions, banks, financial and other institutions, tax collection authorities, law enforcement agencies, without exception both foreign and domestic and to whomsoever else this authorization may be duly presented.

AUTHORISATION

I, _____ (Surname) _____ (Other names)

_____ (Address)

Date of Birth: _____ / _____ / _____ Personal Identity Number:

AUTHORISED SIGNATURE



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Nationality: _____ Passport Number: _____

Address for Tax Purposes: _____

Telephone: _____ E-mail: _____

Applicant Entity (if authorising for an entity applicant): _____

Title, (if authorising for an entity applicant): _____

HEREBY AUTHORISE the Responsible Minister, the Secretary of the Gaming Board for The Bahamas the Commissioner of the Royal Bahamas Police Force or any person so designated in writing, pursuant to the provisions of the Gaming Act, 2014 (No. 40 of 2014) (hereinafter "the Act") (collectively the "Authorised Persons") -

1. to undertake any investigation concerning my eligibility qualification for a licence under the Act or, my suitability to be associated with a licence holder or applicant for a licence in terms of said Act;
2. on production of an original letter of authorisation, to inspect and obtain copies of:
 - (a) any credit report, other report, legal or personal information that has any bearing on my creditworthiness, credit history, credit standing or credit capacity;
 - (b) any loan information, cheque account records, savings deposit records, safe deposit box records, passbook records and bank statement sheets pertaining to me;
 - (c) any records relating to investigations of my activities conducted by any local or overseas police force, crime investigation agency, corporate regulatory agency or any gambling or casino regulatory body;
 - (d) any court records relating to any present or past civil or criminal court proceedings to which I am or was a party; and
 - (e) any other document, record or correspondence pertaining to me.

ACKNOWLEDGEMENT

I understand that as an applicant for, or holder of, a license under the Act that I am obligated to timely pay to the Gaming Board all background investigation and regulatory investigative costs associated with licensure under the Act.

RELEASE

I hereby release, remise and forever discharge all Authorised Persons including the Responsible Minister, the Secretary of the Gaming Board for The Bahamas or any person so designated in writing, including the Commissioner of the Royal Bahamas Police Force or an Agent of the Gaming Board appointed pursuant to the Gaming Act, and any employee, member, subcontractor or representative of the Responsible Minister, the Secretary, the Royal Bahamas Police Force or an Agent, any source or person, including, but not limited to, law enforcement, criminal justice and regulatory agencies, from any damages, directly or indirectly, related to the request for or release of said information, any cause of action, suit, debt, judgment, execution, and/or other claims and demands whatsoever, known or unknown, in law or equity, that the undersigned ever had, now has, may have or claim to have against any or all of the entities or individuals receiving this Release Authorisation arising out of or by reason of the conduct of the investigation authorized herein or any action related to it. I hereby execute this Release with full authority to do so.

INDEMNIFICATION

AUTHORISED SIGNATURE



| | |
|--------------------------------|-------------------------|
| FOR OFFICE USE ONLY | REFERENCE NUMBER |
| | |

I, with full authority to do so, hereby indemnify and hold harmless every Authorised Person, firm, company and/or government body including the Responsible Minister, the Secretary of the Gaming Board for The Bahamas or any person so designated in writing, including the Commissioner of the Royal Bahamas Police Force or an Agent of the Gaming Board appointed pursuant to the Act, and any employee, member, subcontractor or representative of the Responsible Minister, the Secretary, the Royal Bahamas Police Force or an Agent and any source or person to whom this Release Authorization is presented from and against all claims, damages, losses and expenses, including reasonable attorney's fees, arising out of or by reason of, compliance with this Release Authorization.

You are **HEREBY AUTHORISED** to release to any Authorised Person presenting this Authorisation, all the documents, reports, records and information requested by him/her. A photo-static or e-mail copy of this Release Authorisation is as effective and valid as the original.

This authorisation shall supersede and countermand any prior request or authorisation to the contrary. A certified copy of this authorisation will be considered as effective and as valid as the original.

Grantor Signature: _____

Grantor's Spouse's Signature: _____

(If the grantor of this Release Authorisation is married at the time of filing and the license application is being filed in an individual capacity rather than as a representative of an entity applicant the individual's spouse must execute this Release Authorisation.

IN WITNESS WHEREOF, I have executed this request at _____, on this _____ day of _____, 20_____.

SIGNATURE OF APPLICANT

SIGNED AND SWORN TO before me, _____, this _____ day of _____, 20_____.

NOTARY PUBLIC/COMMISSIONER OF OATHS

Note: This Authorisation must be accompanied by a Board resolution authorising the signatory to execute same.

 AUTHORISED SIGNATURE