



**APPLICATION FOR THE RENEWAL OF A GAMING
HOUSE AGENT LICENCE**

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

A Gaming House Agent Licence is required on which the business activities described in section 44(2)(d) of the Gaming Act, 2014, are conducted, pursuant to an Agency Agreement entered into between the holder of a gaming house operator licence and the proposed gaming house agent, as described in section 46(4)(a) of the Act.

NOTE:

A gaming house agent licence –

- (a) shall relate to the premises in respect of which it is issued; and
- (b) shall entitle the holder of a gaming house agent licence, and no other person, to conduct the activities described in section 44(2)(d) on the licensed premises.

Unless indicated otherwise or otherwise apparent from the context, all references to “the Applicant” in this form shall be construed as references to the holder of a gaming house operator licence which seeks to continue conducting the activities described in sections 44(2)(d) of the Act on the premises in respect of which this application is made.

LICENSED GAMING HOUSE OPERATOR LICENCE:

| | |
|------------------------------------|--|
| Registered name of business | |
| Trading name of business | |
| 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, 4th Floor, 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 **exchange rate 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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1. DETAILS OF THE APPLICANT AND THE LICENSED GAMING HOUSE AGENT:

| | |
|---|--|
| Registered name | |
| Registration number | |
| Trading name | |
| Principal activities | |
| Contact Person for this application: | |
| Title & Full Names | |
| Telephone & Fax Numbers | |
| E-mail address | |
| Identifying details of proposed gaming house agent (owner of business): | |
| Title & Full Names | |
| Street Address: | |
| City/Town & Island | |
| Postal/Zip code | |
| Telephone & Fax Numbers | |
| E-mail address | |
| Physical address of the premises in respect of which this application is made: | |
| Street address | |
| City/Town & Island | |
| Postal/Zip code | |
| Telephone & Fax Numbers | |
| Trading name of the premises in respect of which this renewal application is made: | |
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2. TRADING HISTORY:

Provide the information stipulated below regarding the trading history of the gaming house agent premises:

| | |
|--|--|
| Date of commencement of trading | |
| Nature of current business activities | |
| | |
| If any, date(s) of and reasons for any interruption in trading over the last 12 months | |
| | |
| Number of existing, identified "gaming" employees | |
| Number of existing identified "key" employees | |
| Number of existing identified "other" employees | |
| Is an increase or decrease in number of employees envisaged? If so, indicate "increase" or "decrease" and reasons for it below: | |
| | |

3. SECURITY OF TENURE:

3.1. If the proposed gaming house agent is the owner of the premises, attach certified documentary proof to this effect as Annexure 3.1 to this application, OR

3.2. Complete the Table below ONLY if the proposed gaming house agent is NOT the lawful owner of the premises:

| DETAILS OF OWNER OF PREMISES: | | |
|--------------------------------------|---------------|-----------|
| Full Names of Owner | | |
| Address of Owner | | |
| Contact Numbers | MOBILE PHONE: | LANDLINE: |

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| | | |
|---|--------------------|-------------------|
| E-mail address | | |
| Nature of agreement between proposed gaming house agent and owner of premises | | |
| Commencement and termination date of agreement | COMMENCEMENT DATE: | TERMINATION DATE: |

3.3. Where it has been necessary to complete the Table under section 3.2 above, the following must be submitted in conjunction with this application –

(i) a certified copy of the agreement of lease or similar contract evidencing that the Applicant enjoys security of tenure in respect of the premises, as Annexure 3.B to this application.

4. VALID BUSINESS LICENCE:

4.1. Does the licensed Agent hold a current and valid Business Licence issued in respect of this exact location?

Yes No

4.2. If the response to Question 4.1 is “Yes”, **provide a certified copy of said Business Licence.**

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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.
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.....

.....
NOTARY PUBLIC/COMMISSIONER OF OATHS

* Delete which is not applicable

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

AUTHORISED SIGNATURE



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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: _____

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.

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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

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