

# APPLICATION FOR THE RENEWAL OF A GAMING LICENCE

AN APPLICANT FOR A LICENCE OR RENEWAL 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 Licence is required for:

- (a) the operation of a casino and the playing in or on designated areas of the casino resort, or such various separate parts of such premises as are specified in the licence, including private gaming areas approved by the Board in the prescribed manner, of any gambling game, including, but not limited to
  - (i) gambling games played on traditional or electronic gaming tables and slot machines;
  - (ii) any gaming device, operated for any consideration, for the play of poker, blackjack, any other card or table game, or keno or any simulation or variation of any of the foregoing, including, but not limited to, any game in which numerals, numbers, or any pictures, representations, or symbols are used as an equivalent or substitute for cards in the conduct of such game;
- (b) the placing and acceptance of bets on any event;
- (c) the conduct of pari-mutuel wagering through a hub; and
- (d) the arrangement, organization and operation of junkets.

#### APPLICANT FOR THE RENEWAL OF A GAMING 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
4<sup>th</sup> Floor, Centreville House
2<sup>nd</sup> Terrace West & Collins Avenue
Nassau, BAHAMAS

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GB Ref. No:	
Insp. Sig.:	



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#### APPLICATION INSTRUCTIONS

- 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. All applicants for a Licence are governed by the provisions of Part IV of the Gaming Act, 2014.
- 4. The Gaming Board cannot accept any responsibility for adverse public notice, embarrassment, criticism, or financial loss to the applicant which may result from action taken with regard to this application.
- 5. The applicant will be responsible for the payment of any expenses incurred by the Gaming Board during the course of any enquiries which may be conducted in connection with this application.
- 6. 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.
- 7. 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.
- 8. 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, 4<sup>th</sup> Floor, Centreville House, 2<sup>nd</sup> Terrace West & Collins Avenue, Nassau, Commonwealth of The Bahamas.
- 9. 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).
- 10. If additional space is required to answer any question, <u>please use additional pages</u>, 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.



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ONLY					

- 11. 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.
- 12. 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.
- 13. All dates must be in the format: Day / Month / Year.
- 14. Any person with a **financial interest of five per centum or more in the applicant**, must submit to the Board a **renewal application for a certificate of suitability**, in the format required by the Board, accompanied by the prescribed renewal fees.



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ONLY					

# 1. IDENTIFYING DETAILS OF APPLICANT:

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



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ONLY	

#### 2. OTHER NAMES AND ADDRESSES OF THE APPLICANT:

	State all previous names under which and addresses from which the applicant has done business in	า th
	past year.	
_		

#### 3. DESCRIPTION OF THE APPLICANT ENTITY:

Indicate what type of legal entity the applicant is:

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

#### 4. **DOCUMENTATION REQUIRED:**

- **4.1** Submit certified true copies of all **Founding Documentation to which changes have been made during the past three (3) years** (including but not limited to 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 sign the application documents on behalf of the applicant.



FOR OFFICE USE	REFERENCE NUMBER
ONLY	

# 5. SHAREHOLDING OF THE APPLICANT:

Share	No of	No of	Par value	Premium	Current	Classes*	Voting
structure	shares	shares	per share	at issue	market		rights
	authorised	issued			value		
Ordinary							
Shares							
Preference							
Shares							
Other							
(specify)							
Provide a co	ppy of the mo	st recent s	hare/securit	ies register	(or indicate	e where it m	ay be perused).
* Elaborate	if there is mor	e than one	class of sha	re with diffe	rent voting	rights.	
			,	33	,	3	
5 1 If the ric	thts of sharph	olders of a	inv class of s	shares may h	ne modifie	d other than	by a vote, indi
		olucis of c	illy class of s	silaics illay i	oc mounic	a other than	by a vote, mai
this and exp	lain briefly:						



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ONLY	

# 5.2. NON-VOTING SHAREHOLDERS:

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

Name & address of shareholder	Passport/Social Security/Registration number	Date of birth (for natural persons)	Number of shares held	Description of non-voting shares	Method of payment for shares

## 6. **INVOLVEMENT**:

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

FULL NAME	PASSPORT/SOCIAL	NO. OF	PERCENTAGE
OF HOLDER	SECURITY/REGISTRATION NO	SHARES HELD	SHAREHOLDING
TOTAL SHAREHOLDING	100%		



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ONLY	

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

FULL NAME	PASSPORT/SOCIAL	NO. OF	PERCENTAGE
OF HOLDER	DER SECURITY/REGISTRATION NO		SHAREHOLDING

**6.3.** List all the directors of the applicant:

FULL NAME	PASSPORT/SOCIAL	EXECUTIVE/NON-	NATIONALITY	SHAREHOLDER
	SECURITY NO	EXECUTIVE		REPRESENTED



FOR OFFICE USE	REFERENCE NUMBER
ONLY	

## **6.4.** List the executive management of the applicant below:

FULL NAME	PASSPORT/SOCIAL	DESIGNATED POSITION	NATIONALITY
	SECURITY NO		

## 7. DIAGRAMMATIC REPRESENTATION OF OWNERSHIP:

If question 6 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 7**".

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.



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ONLY	

#### 8. TERMS AND CONDITIONS:

**8.1.** Indicate the terms on which shares are to be, and **during the past three (3) years** have been, offered to the public or otherwise:

SHAREHOLDING	TERMS	DATE

**8.2.** Indicate the terms and conditions to which all outstanding loans, mortgages, trust deeds, pledges or other indebtedness or obligations pertaining to the applicant are subject:

OBLIGATION	AMOUNT	INTEREST	TERMS

#### 9. 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,



FOR OFFICE USE	REFERENCE NUMBER
ONLY	

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 9", if there is insufficient space).


**B.** Identify all persons holding the options as described in **A** and complete the table below:

Option	Relationship with	No of shares to which	Market value at	Current
holder	applicant	option pertains	issue of option	market value



FOR OFFICE USE	REFERENCE NUMBER		
ONLY			

## **10. FINANCIAL INSTITUTIONS:**

**10.1** 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)

- 10.1.1 Provide copies of statements of all the accounts indicated above which reflect ALL transactions for the past three (3) months.
- 10.2 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 year.



FOR OFFICE USE	REFERENCE NUMBER	
ONLY		

Name & street address of financial institution	Name of account holder	Type of account(s)	Account number	Period of time account held (from/to)

## 11. SHARES HELD BY APPLICANT:

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

INFORMATION	ENTITY 1	ENTITY 2	ENTITY 3	ENTITY 4
REQUIRED				
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				



FOR OFFICE USE	REFERENCE NUMBER		
ONLY			

# 12. FINANCIAL INTERESTS HELD IN OTHER BUSINESSES, EXCLUDING SHARES:


Describe below the nature and extent of any business interest other than shareholding, which the

#### 13. MANAGEMENT AND OTHER CONTRACTS:

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

STREET ADDRESS	GOODS/SERVICES	VALUE OF	METHOD OF
& TELEPHONE NO	SUPPLIED	CONTRACT	PAYMENT



FOR OFFICE USE	REFERENCE NUMBER		
ONLY			

#### 14. 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;
- the applicant was not convicted or
- the event(s) to which the charge(s) pertained occurred more than ten years ago.



FOR OFFICE USE	REFERENCE NUMBER
ONLY	

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 14".

#### 14.1. OFFICIAL ENQUIRY:

14.1.	OTTICIAL	LINGOIN	• •								
Has th	ne applicar	nt, its ow	ners, office	ers or a	ny of its sul	osidia	ries <b>in the</b>	past year be	en su	ıbjected to aı	า
officia	l enquiry	by any	regulatory	body,	governmer	t or	provincial	department,	law	enforcemen	t
agenc	ies or gam	ing autho	orities?								
Yes			No								
If <b>yes</b> ,	provide d	etails belo	ow:								

## **14.2.** INDICTMENTS, CHARGES AND CONVICTIONS:

Has the applicant, its owners, officers or any of its subsidiaries **in the past year** 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	Nature of	Date	Name of	Court	Outcome/
number	charge or		law enforcement	involved	Sentence



FOR OFFICE USE	REFERENCE NUMBER
ONLY	

complaint	agency	

#### TRADE REGULATIONS AND SECURITIES JUDGMENTS: **15**.

Has the applicant, its owners, officers or any of its subsidiaries in the past year 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	NAME OF	NATURE OF JUDGEMENT,	DATE ENTERED
NUMBER	COURT OR AGENCY	DECREE OR ORDER	

# 16. INSOLVENCY PROCEEDINGS AND APPOINTED RECEIVER, AGENT OR TRUSTEE:

pr	eced	ing t	the date o	f this	applica	tion?										
un	der a	any	provision	of any	y insolv	ency or	bankr	uptcy	legisla	tion file	by o	r aga	inst it	during	the ye	ar
Α.	Has	the	applicant	, its o	wners,	officers	or any	y asso	ciated	compan	y had	any	applica	ation or	petitio	on

Page | 17

unde	r any provision of any i	insolver	ncy or bankruptcy legislation filed by or against it <b>c</b>
prece	eding the date of this ap	plicatio	on?
Yes		No	
AUTHORI	SED SIGNATURE		



AUTHORISED SIGNATURE

FOR OFFICE USE	REFERENCE NUMBER
ONLY	

Page | 18

If <b>yes</b> , provide details below:
<b>B.</b> Has the applicant, its owners, officers or any associated company sought relief under any provision of any insolvency or bankruptcy legislation <b>during the year preceding the date of this application</b> ?
Yes No
If <b>yes</b> , provide details below:
17. EXISTING LITIGATION:
Is the applicant, any owner, officer or subsidiary currently involved in any litigation?
Yes No
If yes, on a separate page(s) 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 US \$100,000
or the equivalent thereof.



FOR OFFICE USE	REFERENCE NUMBER
ONLY	

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.

#### 18. GAMING LICENCES:

**NOTE:** The responses to the questions in this section must be provided in respect of all gaming-related licences and/or similar approvals issued to, held by, refused in respect of (as the case may be) the Applicant and any of its owners, directors, managers or senior employees.

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

LICENCE TYPE	ISSUING JURISDICTION	DATE GRANTED	EXPIRY DATE

<sup>\*</sup> Provide copies of all licences granted as well as the conditions attached to each licence.



FOR OFFICE USE	REFERENCE NUMBER
ONLY	

**18.2.** Provide details below of all gaming-related licences **previously held but relinquished** in **the** past year:

LICENCE	ISSUING	DATE	DATE	REASONS FOR
TYPE	JURISDICTION	GRANTED	TERMINATED	TERMINATION

**18.3.** Provide details below of all gaming-related licences **refused in the past year:** 

LICENCE TYPE	ISSUING JURISDICTION	DATE APPLIED FOR	DATE REFUSED	REASONS FOR REFUSAL

**18.4.** Provide details below of all applications for gaming-related licences currently pending:

LICENCE TYPE	ISSUING JURISDICTION	DATE APPLIED FOR



FOR OFFICE USE	REFERENCE NUMBER
ONLY	

THE B	AHA									
18.5	Has th	ne Applicant, or	any of its owners	, directo	ors, mana	gers o	r senior e	mployees	5 <b>–</b>	
	(a)	•	d any gaming-rela		Ū			,	y other g	aming
	Yes			No						

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

NAME & TRADING	DATE OF	DATE OF	REASON FOR	JURISDICTION BY
	COMMENCEMENT	TERMINATION	TERMINATION	
NAME OF LICENSED	COMMENCEMENT	TERIVIINATION	TERIVINATION	WHICH
OPERATOR				APPROVED*

<sup>\*</sup> Attach a certified, current copy of each licence/authorisation/certificate issued.

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



FOR OFFICE USE	REFERENCE NUMBER
ONLY	

Yes No

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

NAME & TRADING NAME OF LICENSED OPERATOR	JURISDICTION REFUSING THE APPLICATION	REASON FOR REFUSAL	DATE OF REFUSAL

# 19. 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:

#### 19.1. Audited financial statements of the applicant for the past three (3) years.

If the applicant is unable to provide audited financial statements for a certain period 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.

#### 19.2. Organisational chart

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



FOR OFFICE USE	REFERENCE NUMBER
ONLY	

# 20. TAX INFORMATION

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

Income tax reference number, if applicable	
Tax authority name and location	
VAT reference number, if applicable	
Other tax liability reference # (specify)	
<b>20.2.</b> Has the applicant submitted its income tax	and all other required returns for the <b>three (3)</b> years
directly preceding the date of this application to the	ne relevant Authorities?
Yes No	
If yes, and the applicant is a foreign company, fur	nish tax clearance certificates or the equivalent from
the country of origin.	
If <b>no</b> , give an explanation below.	
<b>Documentation</b> in respect of any extension grante	ed by any Tax Authority must also <b>be attached.</b>
	Page   23
AUTHORISED SIGNATURE	



FOR OFFICE USE	REFERENCE NUMBER
ONLY	

1. DURING THE PAST TWELVE (12) MONTHS, HAS THE APPLICANT—					
RESULT OF				' GAMING LEGISLATION MING BOARD OR ANY O	_
Y	ES N	10			
If Yes, please pro	vide details:				
DATE OF CONTRAVENTI ON	NATURE OF CONTRAVENTION	PENALTY IMPOSED BY GAMING BOARD	DATE OF PENALTY	REMEDIAL ACTION TAKEN BY LICENCE HOLDER	
21.2. BEEN FOUND TO HAVE BREACHED ANY CONDITION TO WHICH THE LICENCE HELD BY IT IS SUBJECT AS A RESULT OF ANY AUDIT OR INSPECTION CONDUCTED BY THE GAMING BOARD OR ANY OTHER REGULATORY AUTHORITY?					
Υ	ES N	0 🗀			
If Yes, please pro	vide details:				
DATE OF BREACH	NATURE OF BREACH	PENALTY IMPOSED BY GAMING BOARD	DATE OF PENALTY	REMEDIAL ACTION TAKEN BY LICENCE HOLDER	

DATE OF	NATURE OF	PENALTY	DATE OF	REMEDIAL ACTION
BREACH	BREACH	IMPOSED BY GAMING BOARD	PENALTY	TAKEN
		C/ III/III C D C/ III D		BY LICENCE HOLDER

21.3. MADE PAYMENT TIMEOUSLY AND IN FULL OF ALL MONTHLY GAMING & BASIC TAXES DUE?



FOR OFFICE USE	REFERENCE NUMBER
ONLY	

DATE OF BREACH	NATURE OF BREACH	PENALTY IMPOSED BY GAMING BOARD	DATE OF PENALTY	REMEDIAL ACTION TAKEN BY LICENCE HOLDER
L.4. BEEN SUE	BJECT TO ANY FORM (	OF DISCIPLINARY ACTI	ON BY THE G	SAMING BOARD?
YE	ES	NO		
		NO [		
		PENALTY IMPOSED BY GAMING BOARD	DATE OF PENALTY	REMEDIAL ACTION TAKEN BY LICENCE HOLDER
Yes, please production DATE OF DISCIPLINARY	vide details:  NATURE OF  DISCIPLINARY	PENALTY IMPOSED BY		TAKEN BY LICENCE
Yes, please production DATE OF DISCIPLINARY	vide details:  NATURE OF  DISCIPLINARY	PENALTY IMPOSED BY		TAKEN BY LICENCE
f Yes, please production  DATE OF  DISCIPLINARY  ACTION	NATURE OF DISCIPLINARY ACTION  NY CIVIL JUDGMENT RIES DURING THE PA	PENALTY IMPOSED BY GAMING BOARD	PENALTY	TAKEN BY LICENCE



FOR OFFICE USE	REFERENCE NUMBER
ONLY	

DATE OF	CASE	IDENTITY OF	NATURE OF	QUANTUM	CURRENT
INSTITUTION OF	NUMBER	PARTIES	CLAIM	OF CLAIM	STATUS OF
PROCEEDINGS	INUIVIDER		CLAIIVI		CASE
			HOLDERS <u>OR</u> SUBSI	DIARIES BEEN	A PARTY TO A
LAWSUIT DUR	ING THE PAST	TWELVE (12) MO	ONTHS?		
VEC	1 NO				
YES	NO				
If Vac integer investigle	- d-4-:l				
If Yes, please provide	e details:				
DATE OF	CASE	IDENTITY OF	NATURE	QUANTUM	CURRENT
INSTITUTION OF		PARTIES	05.01.413.4	OF CLAIM	STATUS OF
PROCEEDINGS	NUMBER		OF CLAIM		CASE
1110022211100					G/ 15 2

24.	INTEREST	OF 5% OR	MORE IN	N THE APPLIC	E DISQUALIFIED	OLDING A FINANCIAL FROM HOLDING A
	YES		NO			
If Yes	s, provide (	details:				
AUTHOR	ISED SIGNATURE	_				Page   26



FOR OFFICE USE	REFERENCE NUMBER
ONLY	

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# 25. CHECKLIST OF ATTACHMENTS/ REQUIRED DOCUMENTATION.

**25.1.** Complete the schedule below, clearly indicating the response as **YES**, **NO**, **N/A**:

Page 3	Completed renewal application(s) for certificate of suitability?	YES	-	NO	-	N/A
Page 5	[Ref. 4.1] Amended Corporate Documentation (if applicable)	YES	-	NO	-	N/A
Page 5	[Ref. 4.2] Resolution by Board of Directors	YES	-	NO	-	N/A
Page 6	[Ref. 5] Most recent Share/Securities Register	YES	-	NO	-	N/A
Page 9	[Ref. 7] Diagrammatic representation of Ownership	YES	-	NO	-	N/A
Page 12	[Ref. 10.1.1] Banks Statements for past three months	YES	-	NO	-	N/A
Page 12	[Ref. 10.1.2] Copies of corresponding cheques	YES	-	NO	-	N/A
Page 19	[Ref. 18.1] Copies of licences granted	YES	-	NO	-	N/A
Page 21	[Ref. 18.5.a] Gaming-related licence/authorisation/certificate	YES	-	NO	-	N/A
Page 22	[Ref. 19.1] Audited Financial Statements (3 years)	YES	-	NO	-	N/A
Page 22	[Ref. 19.2] Detailed Organisational Chart	YES	-	NO	-	N/A
Page 23	[Ref. 20.2] Tax Clearance Certificate (if applicable)	YES	-	NO	-	N/A
Page 23	[Ref. 20.2] Tax Extension Documentation (if applicable)	YES	-	NO	-	N/A



AUTHORISED SIGNATURE

FOR OFFICE USE	REFERENCE NUMBER
ONLY	

# **AFFIDAVIT**

l,	, do hereby make oath and say that:	
1.	I am duly authorised to complete this application and to make this declaration on behalf	f of
2.	I am aware that the Board may refuse a licence to any applicant that supplies information to Board which is false in any material respect or subject to any material omission.	the
3.	The particulars contained herein are to the best of my knowledge and belief true and correct every detail and I have fully disclosed all information required in completing this form.	t in
SIGI	ATURE OF DEPONENT DATE	
l cei	ify that:	
	leclaration was sworn to before me at day of, on this day of	
* De	te which is not applicable	
 NOT	RY PUBLIC/COMMISSIONER OF OATHS	
<u>Note</u>	This affidavit must be accompanied by a Board resolution authorising the signatory to execute same.	
	Page   78	



FOR OFFICE USE	REFERENCE NUMBER
ONLY	

# 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.

AUTH	ORISAT	TION	
l,		(Surname)	(Other names)
			(Address)
Date o	of Birth:	:/P	ersonal Identity Number:
Nation	nality:	Passport Nur	mber:
Addre	ss for T	Fax Purposes:	
Teleph	none: _		E-mail:
Applic	ant Ent	tity (if authorising for an entity applicant):	
	Tit	itle, (if authorising for an entity applicant):	
HEREBY Royal B 40 of 20	Sahama 014) (ho	as Police Force or any person so designated in ereinafter "the Act") (collectively the "Author	ry of the Gaming Board for The Bahamas the Commissioner of the writing, pursuant to the provisions of the Gaming Act, 2014 (No. rised Persons") -
1.		ndertake any investigation concerning my elig ssociated with a licence holder or applicant fo	ibility qualification for a licence under the Act or, my suitability to r a licence in terms of said Act;
2.	on pr	roduction of an original letter of authorisation	n, to inspect and obtain copies of:
	(a)	any credit report, other report, legal or pe credit history, credit standing or credit cap	ersonal information that has any bearing on my creditworthiness, acity;
	(b)	any loan information, cheque account recretords and bank statement sheets pertain	ords, savings deposit records, safe deposit box records, passbook ning to me;
	(c)	,	y activities conducted by any local or overseas police force, crime agency or any gambling or casino regulatory body;
	(d)	any court records relating to any present party; and	or past civil or criminal court proceedings to which I am or was a
	(e)	any other document, record or correspond	lence 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.



FOR OFFICE USE	REFERENCE NUMBER
ONLY	

#### 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

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 atday of, 2, 2
SIGNATURE OF APPLICANT
SIGNED AND SWORN TO before me, day of
NOTARY PUBLIC/COMMISSIONER OF OATHS
Note: This Authorisation must be accompanied by a Board resolution authorising the signatory to execute same.

Page | 30