# **Jersey Gambling Commission**

4<sup>th</sup> Floor, Osprey House, 5-7 Old Street St. Helier, Jersey, JE2 3RG Tel: +44 (0)1534 828 540



# APPLICATION FOR A GAMING MACHINE LICENCE

This application form may only be completed by a licensed bookmaker operating from a premises approved by the Commission on application for a gaming machine licence in accordance with PART 2 Regulation 11 of the Gambling (Jersey) Law 2012. This application must be read in accordance with the **Policy and Code of Practice for Gaming Machines**.

If you have any queries about the application form and how to complete it, please contact the Commission on the above telephone number.

# Name of Licensed Premises Applying for the Licence Section 1 – Contact Details 1 Name of the designated contact responsible for this application. All future correspondence relating to the application will be directed to this address. Title First name(s) Surname Address Postcode Office phone number (including area code) Daytime phone number (including area code) Email

Section 2 – Org	ganication Do	taile				
Section 2 - Org	gamsalion De	tall5				
2 Name of o (registered individual						
3 Trading na	ame (if rom above)					
4 If the orga	egistered bus	iness, c	omplete the fol	lowing:		
JFSC Registration number Registered office address						
Postcode						
Building name Building number Street Town/city Postcode Country						
Section 3 – Ga	ming Machine	e Details				
NOTE: In the event that the applicant completes the "Suppliers and Gaming Machine Details Annex A.xls" then please go to Section 4.  What type(s) and how many machine(s) are you applying for?						
Gaming Machine Type I		1	П	Quantity	ĺ	
Gaming Machine Type I				Quantity	<u>.</u> [	
NOTE: The applicant may only hold a maximum of four (4) machines per premises (Type I, Type II or any mix of both).						
Machine Supplier Name						
NOTE: If the applicant self-supplies, then please state "self-supply" and the applicant must also apply for a Machine Suppliers permit.						

Commonly known as a AWP in the UK.Commonly known as a FOBT (B2 & B3) in the UK.

### **Section 4 – Declaration**

### The following declaration must be signed in all cases:

- a) If the organisation is an individual, by that individual;
- b) If the application is made on behalf of a partnership, by all individuals who are partners;
- c) In any other case, by a duly authorised officer of the organisation.

Should the information provided in relation to this application form cease to be correct, it is the organisation's responsibility to advise the Jersey Gambling Commission immediately. Failure to do so could result in any approval subsequently issued being reviewed and possibly revoked.

The Jersey Gambling Commission may require confirmation or further information from third parties in respect of any evidence or documentation I/we have provided in support of this application. I/We agree to grant authorisation to the Jersey Gambling Commission officers to request and receive information about me/us from those third parties.

I/We understand that any misrepresentation or failure to reveal information or grant any authorisation requested may be deemed sufficient cause for the refusal or revocation of approval.

I/We certify to the best of my/our knowledge and belief that the information given in this application is complete and correct in every respect.

а	Surname	
	Signed	
	Position in organisation Date	
b	First name(s) Surname	
	Signed	
	Position in organisation	
	Date	

### **Data Protection**

The Commission requires data regarding applicants (including lead executives and beneficiaries, where necessary) for the purposes set out in the Gambling Commission (Jersey) Law 2010 and the Gambling (Jersey) Law 2012. As a competent authority listed in Schedule 1 of the Data Protection (Jersey) Law 2018, the Commission will primarily collect and process data and special category data necessary for the exercise of its public functions.

The Commission has produced a Privacy Policy for users and an Information Note. These are available on the website at the following link - <a href="https://www.jgc.je/data-protection">https://www.jgc.je/data-protection</a>. Please read them carefully.

### **Section 5 - Payment Details**

The completed application form and any attachments should be bound/stapled as a single document and be forwarded with the appropriate fee, as set out in the Fees Notice for Gaming Machine Operators:

Jersey Gambling Commission 4th Floor, Osprey House 5-7 Old Street St. Helier Jersey JE2 3RG

NOTE: Please make **cheques** payable to the JERSEY GAMBLING COMMISSION or by **Bank Transfer** to HSBC

Sort Code: 40-25-34

Account no: 52474700 (Provide the company name as reference).

### **Section 6 - Notes**

The principal purpose of seeking the information required by this Application form is to provide core factual details, thereby enabling:

- Preliminary investigations in order to ascertain the full scope of its investigations; and
- Identify where further information will need to be requested and/or required.

Additional information may be sought by the Jersey Gambling Commission which may result in a visit to the premises or a meeting with the applicant.

If any details set out on this Application form change prior to the determination of this Application, you must notify the Jersey Gambling Commission in writing as soon as reasonably practicable.

Use BLOCK CAPITALS.

All dates should be in the form of Day / Month / Year (DD / MM / YYYY).

Answer every question, using N/A or NIL where applicable.

## Section 6 – continued

Use additional sheets as necessary, cross-referencing against the relevant question the additional sheet(s) on which the answer is to be found.

Please number, date and sign any additional attached pages to the application form.

Application processing will not commence until all initial requested documentation is received.

If you require any assistance or would like to discuss any part of the application form, please contact the Jersey Gambling Commission on +44 (0)1534 828540.