



APPLICATION FOR RENEWAL: 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 (LIMITED):

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.: _____

AUTHORISED SIGNATURE



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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 the page.**
5. This application form must be returned to The Secretary, Gaming Board for The Bahamas, 4th Floor, Centreville House, 2nd Terrace West & Collins Avenue, Nassau, Commonwealth of The Bahamas. The original plus one copy of the completed application form and all the additional required information must be submitted to the Board.
6. 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.
7. 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.
- 8. All dates must be in the format: Month / Day / Year.**



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1. 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	
Principal business address of the applicant:	
Street address	
City/Town	
Island	
Country	
Telephone Number	
Fax Number	
Website address	
Mailing address	
City/Town	
Island	
Country	
Registered office of the applicant:	
Street address	
City/Town	
Island	
Country	
Telephone Number	
Fax Number	

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2. DURING THE PAST 12 MONTHS, HAS THE APPLICANT OR ANY PERSON HOLDING A FINANCIAL INTEREST OF 5% OR MORE IN THE APPLICANT BECOME DISQUALIFIED FROM HOLDING A LICENCE IN TERMS OF SECTION 25 OR 26 OF THE ACT?

YES NO

If Yes, provide details:

3. HAS THE APPLICANT, ITS SHAREHOLDERS, DIRECTORS OR SUBSIDIARIES BEEN INDICTED OR CHARGED WITH ANY CRIMINAL OFFENCES, EXCLUDING NON-MOVING TRAFFIC OFFENCES, DURING THE PAST TWELVE (12) MONTHS?

YES NO

If Yes, complete the table below:

JURISDICTION	NATURE OF OFFENCE	DATE OF CHARGE	OUTCOME (ACQUITTED, CONVICTED, DISMISSED ETC.)	SENTENCE (IF APPLICABLE)

4. HAS THE APPLICANT OR ANY OF ITS SHAREHOLDERS OR SUBSIDIARIES BEEN A PARTY TO A LAWSUIT DURING THE PAST TWELVE (12) MONTHS?

YES NO

If Yes, please provide details:

DATE OF INSTITUTION OF PROCEEDINGS	CASE NUMBER	IDENTITY OF PARTIES	NATURE OF CLAIM	QUANTUM OF CLAIM	CURRENT STATUS OF CASE

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5. DURING THE PAST TWELVE (12) MONTHS, HAS THE APPLICANT—

5.1. BEEN FOUND TO HAVE CONTRAVENED ANY PROVISION OF ANY GAMING LEGISLATION AS A RESULT OF ANY AUDIT OR INSPECTION CONDUCTED BY THE GAMING BOARD?

YES NO

If Yes, please provide details:

DATE OF CONTRAVENTION	NATURE OF CONTRAVENTION	PENALTY IMPOSED BY GAMING BOARD	DATE OF PENALTY	REMEDIAL ACTION TAKEN BY LICENCE HOLDER

5.2. 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?

YES NO

If Yes, please provide details:

DATE OF BREACH	NATURE OF BREACH	PENALTY IMPOSED BY GAMING BOARD	DATE OF PENALTY	REMEDIAL ACTION TAKEN BY LICENCE HOLDER

5.3. MADE PAYMENT TIMEOUSLY AND IN FULL OF ALL GAMING TAXES DUE?

YES NO

If No, please provide details:

DATE OF BREACH	NATURE OF BREACH	PENALTY IMPOSED BY GAMING BOARD	DATE OF PENALTY	REMEDIAL ACTION TAKEN BY LICENCE HOLDER

5.4. BEEN SUBJECT TO ANY FORM OF DISCIPLINARY ACTION BY THE GAMING BOARD?

YES NO

If Yes, please provide details:

DATE OF	NATURE OF	PENALTY IMPOSED BY	DATE OF	REMEDIAL ACTION TAKEN

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DISCIPLINARY ACTION	DISCIPLINARY ACTION	GAMING BOARD	PENALTY	BY LICENCE HOLDER

6. HAVE ANY CIVIL JUDGMENTS BEEN TAKEN AGAINST THE APPLICANT OR ANY OF ITS SUBSIDIARIES DURING THE PAST TWELVE (12) MONTHS?

YES NO

If Yes, provide details:

DATE OF INSTITUTION OF PROCEEDINGS	CASE NUMBER	IDENTITY OF PARTIES	NATURE OF CLAIM	QUANTUM OF CLAIM	CURRENT STATUS OF CASE

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AFFIDAVIT

[To be signed and certified as true and correct in the presence of a Notary Public]

I, _____, of the _____
(Full names)

District of the island of _____ one of the islands of the Commonwealth of
The Bahamas make oath and say as follows:-

1. That:
- (a) I have taken cognisance of and understand the rights and duties pertaining to the licence applied for, as set out in the Gaming Act, 2014;
 - (b) I am duly authorised to complete this application form on behalf of the Applicant identified in this form, and
 - (c) I have personally completed this form and have supplied all the information indicated herein; and

2. That I certify that the particulars contained herein are true and correct in every detail and that I have fully disclosed the information required in completing this form.

SIGNATURE OF DEPONENT

This Affidavit was sworn before me at _____ on this _____ day of _____, _____.

(Place Stamp Here)

NOTARY PUBLIC

My commission expires: _____

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.

 AUTHORISED SIGNATURE



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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 I 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