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**APPLICATION FOR THE RENEWAL OF A GAMING HOUSE  
PREMISES 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.**

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A Gaming House Premises Licence is required on which any combination of the business activities described in section 44(2)(a), (b) and (c) of the Gaming Act, 2014, is conducted.

**NOTE:**

A gaming house premises licence –

- (a) shall relate to the premises in respect of which it is issued; and
- (b) shall entitle the holder of a gaming house operator licence, and no other person, to conduct the activities described in section 44(2)(a) – (c) on the licensed premises; and
- (c) may be applied for only in response to a formal invitation to apply for such licences.

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 conduct the activities described in sections 44(2)(a) – (c) of the Act on the premises in respect of which this application is made.

**LICENSED GAMING HOUSE OPERATOR:**

<b>Registered name of business</b>	
<b>Trading name of business</b>	
<b>Date of completion of form</b>	

**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**

**For official use only**

**GB Ref. No.:** \_\_\_\_\_

**Insp. Sig.:** \_\_\_\_\_

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**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 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, 2<sup>nd</sup> 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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**DETAILS OF THE APPLICANT AND THE LICENSED GAMING HOUSE PREMISES:**

<b>Registered name</b>	
<b>Registration number</b>	
<b>Trading name</b>	
<b>Principal activities</b>	
<b>Contact Person for this application:</b>	
<b>Title &amp; Full Names</b>	
<b>Telephone &amp; Fax Numbers</b>	
<b>E-mail address</b>	
<b>Physical address of the premises in respect of which this application is made:</b>	
<b>Street address</b>	
<b>City/Town &amp; Island</b>	
<b>Postal/Zip code</b>	
<b>Telephone &amp; Fax Numbers</b>	
<b>Trading name of the premises in respect of which this renewal application is made:</b>	

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**2. PROXIMITY TO OTHER INSTITUTIONS OR FACILITIES:**

Provide the following information regarding social institutions or facilities located 100 feet or less from the licensed gaming house premises in respect of which this renewal application is made:

<b>TYPE OF INSTITUTION</b>	<b>NAME (AND STREET ADDRESS, IF APPLICABLE)</b>	<b>DISTANCE FROM PREMISES</b>
Church		
School		
College		
Residential area		
Pension payment point		
Proximity to other gaming-related premises		

**3. TRADING HISTORY:**

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

<b>Date of commencement of trading</b>	
<b>Clearly describe the current nature of business activities</b>	
<b>If any, date(s) of and reasons for any interruption in trading over the last 12 months</b>	

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<b>Total number of employees working at this premises</b>	
<b>Number of "gaming" employees</b>	
<b>Number of "key" employees</b>	
<b>Number of "other" employees</b>	
<b>Is an increase or decrease in number of employees envisaged? If so, indicate "increase" or "decrease" and reasons for it below:</b>	

**5. SECURITY OF TENURE:**

- 5.1.** If the Applicant is the owner of the premises, attach certified documentary proof to this effect as Annexure 5.1 to this application, OR
- 5.2.** Complete the Table below ONLY if the Applicant is NOT the lawful owner of the proposed gaming house premises:

DETAILS OF OWNER OF PREMISES:		
Name of Owner		
Address of Owner		
Contact Numbers	MOBILE PHONE:	LANDLINE:
E-mail address		
Nature of agreement between Applicant and owner of premises		
Commencement and termination date of agreement	COMMENCEMENT DATE:	TERMINATION DATE:

- 5.3.** Where it has been necessary to complete the Table under section 5.2 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 5.B to this application.

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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.**

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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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 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 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