



APPLICATION FOR
APPROVAL AND OR REGISTRATION OF
PREMISES AS PRESCRIBED PREMISES
Pursuant to the Betting, Gaming and Lotteries Act

Form C
For use by
Individuals and
Sole Traders

New ☐ Renewal ☐

20 /20

Application #: _____

PLEASE SUBMIT THE FOLLOWING WITH THIS APPLICATION:-

- 1) ORIGINAL RECEIPT(S) FROM THE COLLECTOR OF TAXES IN RESPECT OF LEVY PAID FOR THE CURRENT YEAR.
- 2) VALID IDENTIFICATION CARD – PASSPORT, NATIONAL ID, DRIVER’S LICENCE
- 3) CERTIFIED COPY OF THE BUSINESS' CERTIFICATE OF REGISTRATION (IF APPLICABLE)
- 4) PROOF OF ADDRESS FOR PREMISES

**ALL CORRESPONDENCE SENT TO THE CONTACT INFORMATION BELOW IS CONSIDERED DELIVERED,
UNLESS FORMAL NOTIFICATION OF A CHANGE HAS BEEN SUBMITTED**

OWNER/OPERATOR OF PREMISES GENERAL INFORMATION		
1. CHRISTIAN NAME <i>(First Name)</i>	2. MIDDLE NAME	3. SURNAME <i>(Last Name)</i>
4. HOME ADDRESS: <i>(Apt. No., Street No. and Name, Postal Zone, Parish)</i>		
5. TELEPHONE NUMBERS: HOME: _____ MOBILE (1): _____ WHATSAPP: _____ MOBILE (2): _____		
6. E-MAIL ADDRESS:		
7. NATIONALITY:	8. ID TYPE AND NUMBER: <input type="checkbox"/> Passport <input type="checkbox"/> National ID <input type="checkbox"/> Driver’s Licence No. _____	9a. TAXPAYER REGISTRATION No. (TRN) _____ 9b. BRANCH No. _____

SECTION B – PRESCRIBED PREMISES INFORMATION	
10. NAME OF PREMISES: <i>(Where machines will be located - Prescribed Premises)</i>	
11. ADDRESS: <i>(Apt. No., Street No. and Name, Postal Zone, Parish)</i>	12. BUSINESS TELEPHONE NUMBER(s):
13. NATURE OF BUSINESS: <i>(please tick where applicable in the box provided)</i> (a) <input type="checkbox"/> A BAR LICENSED UNDER THE SPIRIT LICENCE ACT/THE TRADE AND BUSINESS ACT (b) <input type="checkbox"/> A CLUB REGISTERED UNDER THE REGISTRATION OF CLUBS ACT (c) <input type="checkbox"/> HOTEL (d) <input type="checkbox"/> GAMING LOUNGE (e) <input type="checkbox"/> BETTING LOUNGE (f) <input type="checkbox"/> OTHER (Please specify): _____ If 13(a), (b) or (c), please submit a copy of the relevant licence.	
14. DECLARATION FOR INDIVIDUALS/SOLE TRADER: ON THE BASIS OF 13(a), (b), (c), (d) or (e) or the approval if granted under 13(f) hereof, I hereby apply for a licence to register the said premises herein as a Prescribed Premises for the purpose of operating Gaming Machines thereon. _____ Signature of Applicant _____ Date: dd/mm/yyyy	

SECTION C – GAMING MACHINE OWNER/OPERATOR GENERAL INFORMATION	
15. NAME OF OWNER/OPERATOR:	
16. HOME ADDRESS: <i>(Apt. No., Street No. and Name, Postal Zone, Parish)</i>	17. TELEPHONE NUMBER

FOR COMMISSION’S USE ONLY		
RECOMMENDATION AND APPROVAL		AMOUNT PAYABLE
Recommended by: Senior Licensing & Registration Officer Name: _____ Signature: _____	Approved by: Director of Licensing & Registration Name: _____ Signature: _____	Payment to IRD: Receipt No. _____ Amount: _____ Payment BG&LC: Receipt No. _____ Amount: _____

FOR LICENSING & REGISTRATION DIVISION USE ONLY

OUTSTANDING FEES PAYABLE TO BETTING, GAMING & LOTTERIES COMMISSION FOR MULTIPLE YEARS

Application #	Year	Premises Fee	Amount Paid
	2017-2018	\$1,000	
	2018-2019	\$1,000	
	2019-2020	\$1,000	
	2020-2021	\$1,000	
	2021-2022	\$1,000	
GRAND TOTAL			