



APPLICATION FOR RENEWAL OF REGISTRATION AS A VIDEO LOTTERY SITEHOLDER

Name and Address of Registered Video Lottery Siteholder

Legal Name _____

Business Name (Operating As) _____

Address _____

(Street Number and Name)

(Suite / Floor)

(City)

(Province / State / Country)

(Postal Code / Zip Code)

If leasing or renting the facility provide name
and address of the landlord. _____

Telephone () _____

Facsimile () _____

Email Address _____

Please complete sections below.

Section A Category of Site

Application is made for a Video Lottery Siteholder renewal as a:

Category I Site
(15-75 Video Lottery Devices)

Category II Site
(11-14 Video Lottery Devices)

Category III Site
(1-10 Video Lottery Devices)

Section B Change in Officers

In the last year, have there been any changes in the owners, co-owners, retailers or managers responsible for gaming of the registered Video Lottery Siteholder? No

 Yes

If yes,

1) Please provide on an attached sheet for each of the changes, the name and position of the individual who has left or is being replaced with the name and the position of the new individual.

2) Please have a *Disclosure Form #78-9684* completed and submitted for each of the new persons and attach with this application.

Section C Offences

In the last year, has the applicant been charged or convicted of any type of offence in any jurisdiction? No

 Yes

If yes, please provide the following information on an attached sheet for each:

- i) Description of charge or conviction;
- ii) Date of charge or conviction (include any written judgments);
- iii) Description of sentence (include any written decisions);
- iv) Name and address of court; and
- v) Court file number (if known).

Section D Claims

Has the applicant had any claim made against it in the last year in any jurisdiction? No

 Yes

If yes, please provide the following information on an attached sheet for each:

- i) Description of claim (include statements of claim and defense);
- ii) Name of other parties to the proceedings
- iii) Outcome of proceedings (include any written judgments);
- iv) Name and address of court; and; and
- v) Court file number (if known)

NOTICE

As required by the ***Protection of Personal Information Act*** and the ***Right to Information Act***.

In compliance with the *Gaming Control Act*, it may be necessary for the Registrar of Gaming Control to collect and receive additional information from any source in order to complete or verify the information provided on or with this form and to determine eligibility for registration. The Gaming, Liquor and Security Licensing Branch is required under the *Protection of Personal Information Act* and the *Right to Information Act* to protect the confidentiality of such information in its possession and control and to use the information only for purposes for which it is collected or for consistent purposes.

Information collected may be used and disclosed as follows:

1. To evaluate the applicant, and individuals and corporations identified in connection with the applicant, regarding their person, financial, business and criminal history, honesty and business integrity;
2. Information on the applicant, and on individuals and corporations identified in connection with the applicant, may be shared with Government officials who are assisting the Gaming, Liquor and Security Licensing Branch in the evaluation of applicants for registration and with the Atlantic Lottery Corporation;
3. The Branch may share information on the applicant, and on individuals and corporations identified in connection with the applicant, with law enforcement agencies for gaming-related investigations or clearances, with other branches in the Department, and with the Atlantic Lottery Corporation; and
4. To conduct ongoing personal history investigations, including checks for criminal charges outstanding and past criminal convictions or criminal records, during the entire course of the applicant's registration with the Gaming, Liquor and Security Licensing Branch.

If you have questions about the collection and disclosure of information, please call (506)-453-7472 or e-mail DPS-MSP.Information@gnb.ca.

Statutory Declaration

I, _____ swear/solemnly declare that
(Name of Authorized Person)

I am authorized to provide the answers provided in this application and that they, as well as all of the information contained in the documents and materials submitted with it, are, to the best of my knowledge and belief, true and complete.

I agree to give the Branch, as and when requested, any additional or written authorization that is required for the purposes of this application.

I have read and understand the above notice, I hereby consent as or on behalf of the applicant to the direct and indirect collection of information by the Branch and consent to the use and disclosure of this information as described in the above notice.

_____ this ____ day of _____ 20____
Applicant's Signature