Regulation 216



APPLICATION FOR

APPROVAL IN PRINCIPLE OF

GAMBLING EQUIPMENT

[INSERT ASSOCIATE CERTIFICATE HOLDER’S NAME]

APPLICANT’S DETAILS

(1) Associate certificate

holder’s name: Click here to enter text.

(2) Nominated principal

contact person: Click here to enter text.

Tel: Click here to enter text.

Email: Click here to enter text.

Fax: Click here to enter text.

GAMBLING EQUIPMENT

(3) Gambling equipment for which approval in principle sought:

(provide details of the type of gambling equipment concerned; describe the development process(es) undertaken, including the build number/version and date(s); where the equipment will be added to any gambling equipment currently approved in principle, detail the inter-relationship of those elements; provide such manuals and documentation as will assist an evaluation of the equipment in question)

Click here to enter text.

(4) Further information:

(add such further information as you consider relevant to assist the Commission determine your application)

Click here to enter text.

DECLARATION

I have been duly authorised by the applicant to make this application on its behalf (see certified true copy of Minute attached).

I declare that the information contained in this application is true and accurate to the best of my knowledge, information and belief and that, if any of the information contained in or appended to this application is discovered to be false, I may be liable to prosecution.

Signature:

Name (*print*): Click here to enter text.

Date: Click here to enter a date.

The original completed application form and any attachments appended should be bound as a single document and, together with one digital copy of the same, should be forwarded to:

Director

Alderney Gambling Control Commission

St. Anne’s House

Queen Elizabeth II Street

ALDERNEY

GY9 3TB

via United Kingdom.