

SCHEDULE 1
GENERAL APPLICATION FORMS

Regulations 16, 61



APPLICANT NAME:

[Click here to enter text.](#)

Application for (please tick):

- | | |
|-------------------------------------|--------------------------|
| Category 1 eGambling licence | <input type="checkbox"/> |
| Category 2 eGambling licence | <input type="checkbox"/> |
| Core services associate certificate | <input type="checkbox"/> |
| Cat 2 eGambling certificate | <input type="checkbox"/> |
| Temporary eGambling licence | <input type="checkbox"/> |

NOTES TO APPLICANTS (to assist completion of Application Form)

1. The principal purpose of seeking the information required by this Application Form is to provide the Commission with core basic factual details, thereby enabling it to:
 - make preliminary investigations in order to ascertain the full scope of its investigations;
 - identify where further information will need to be requested and/or required; and
 - identify any key individuals who will be designated in accordance with regulation 136 of the Alderney eGambling Regulations, 2009.
2. Additional information may be sought by way of a meeting with an officer of the Commission.
3. If any details set out on this Application Form change prior to the determination of this Application, you must notify the Commission in writing as soon as reasonably practicable.
4. The information provided must be accurate and truthful. [NB section 24(1) of the Alderney eGambling Ordinance, 2009 creates an offence of obtaining a licence by false statement, declaration or information.]
5. Wherever possible, use BLOCK CAPITALS.
6. All dates should be in the form Day / Month / Year.
7. Answer every question, using “N/A” or “NIL” where applicable.
8. Use additional sheets as necessary, cross-referencing against the relevant question the additional sheet(s) on which the answer is to be found.
9. If the deposit of investigation monies required by the Alderney eGambling Regulations, 2009 has not already been made, it must accompany the submission of this Application Form.
10. Applicants are reminded that they must complete and submit for publication the notice set out in Schedule 2.

SECTION 1: APPLICANT'S DETAILS

(1) **Name of applicant** [Click here to enter text.](#)

(2) **Company number** [Click here to enter text.](#)

(3) **Date of incorporation** [Click here to enter a date.](#)

Registered office [Click here to enter text.](#)

(4) **Correspondence address** [Click here to enter text.](#)
[Click here to enter text.](#)

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.](#)

I/we confirm that the required application deposit has been remitted.

Yes

SECTION 2: CORPORATE INFORMATION

(5) Type of company *eg, public/private, limited by share/guarantee etc*

[Click here to enter text.](#)

Please supply a copy of the certificate of incorporation

(6) Previous company name(s) [Click here to enter text.](#)

(7) Please describe the company's objectives and outline the proposed eGambling activity

[Click here to enter text.](#)

(8) Shareholders

Please list known shareholders holding 3% or more of issued share capital

<u>Name</u>	<u>% of issued capital</u>
Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.

(9) Group corporate structure

Please attach a diagram showing

- the complete group structure including any parent company, subsidiary or associated company.
- the ultimate beneficial owner of the applicant
- the activities of each entity in the group

For each entity in the group, state where registered and ownership

[Click here to enter text.](#)

(10) Group investors

Please list all known shareholders holding 3% or more of the applicant's parent company

Name	% of issued capital / entity
Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.

(11) Officers and management

Please list directors, company secretary and senior managers of the applicant and, where applicable, of other group entities who will control or exercise influence over the applicant's business and/or operational functions

Please supply brief biographies or cvs for each named individual.

Please attach a company organisation chart showing reporting structures

<u>Name</u>	<u>Position</u>	<u>Relationship to Applicant</u>
Click here to enter text.	Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.	Click here to enter text.

SECTION 3: RESOURCES**(12) Funding**

Please detail the amount and source(s) of funds to be utilised to establish the proposed eGambling activity.

[Click here to enter text.](#)

Please supply recent audited accounts for any business entity which is funding or supporting the proposed eGambling activity.

(13) Business Plan

Please supply a business plan for the proposed eGambling operation, covering the types of eGambling to be conducted, the platform to be used, the timescale for full activation, projected player numbers and revenues. If appropriate please supply screen shots and a diagram of the proposed network architecture.

Will you be registering players? Yes No

Will you be operating the gaming platform Yes No

Please name any providers of core services such as games software. Please note that these suppliers may require an Alderney core services associate certificate.

[Click here to enter text.](#)

(14) Hosting

Where will your servers or RNG be located?

[Click here to enter text.](#)

Who is your proposed hosting provider?

[Click here to enter text.](#)

(15) Regulatory status

Does your organisation or an associated business entity hold a gaming related licence anywhere else in the world? If so, please supply copies of any such licence(s).

[Click here to enter text.](#)

(16) Litigation

a) Has your organisation or an associated business entity been fined or censured by any regulatory body in the last 10 years?

Yes No

If yes, please supply details

[Click here to enter text.](#)

b) Has your organisation or an associated business entity been involved in substantial litigation in the last 10 years?

Yes No

If yes, please supply details

[Click here to enter text.](#)

(17) Further information:

Please add any further information which you consider relevant to assist the Commission in determining 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 should be bound as a single document and, together with ONE unbound 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.

**NOTICE OF APPLICATION FOR eGAMBLING LICENCES AND
ASSOCIATE CERTIFICATES**

An application for a _____¹ dated [insert date of application] has been made to the Alderney Gambling Control Commission (“the Commission”) under the Alderney eGambling Ordinance, 2009 and the Alderney eGambling Regulations, 2009 by —

[name of applicant]

whose registered office is —

[applicant’s registered office address]

Any person wishing to raise any objection to this application so that the objection shall be considered by the Commission in accordance with regulation 23, 30 or 74 of the Alderney eGambling Regulations, 2009 should, within **14 days** of the date of publication of this notice, deliver or send to the offices of the Commission a written statement of the objection and the grounds on which it has been raised.

Signed:

_____ *for and on behalf of [insert applicant’s name]*

Dated:

[insert date]

¹ Here insert the type of eGambling licence or associate certificate being applied for, namely –
Category 1 eGambling licence (publish in Alderney Official Gazette and on AGCC website)
Category 2 eGambling licence (publish in Alderney Official Gazette and on AGCC website)
Temporary eGambling licence (publish on AGCC website)
Core services associate certificate (publish on AGCC website)
Foreign gambling associate certificate (publish on AGCC website)