

THE GAMING, BETTING AND LOTTERIES ACT 1988 SIMPLIFIED PERSONAL DECLARATION FORM (SPDF) — BETTING OFFICE LICENCE

This form supports applications to the Gambling Supervision Commission (GSC) in respect of a Betting Office Licence in accordance with the Gaming, Betting and Lotteries Act 1988.

This form is to be completed by persons applying for a GSC approved role and should be completed in conjunction with the GSC's Integrity Guidance for Licensed Betting Office applications.

Please complete all sections of the form in capital letters using black ink.

This application and all accompanying documents and correspondence must be in English.

This form does not apply to politically exposed persons.

| Part 1 – Details of the Role | | | |
|--|------------------|--|--|
| Are you acting in a professional capacity on behalf of a Corporate Service Provider? (If yes please state the CSP) | | | |
| Name of the Company (holder of a Bookmaker's Permit) | | | |
| Role applied for, please tick (√) each applicable: ☐ Designated Official ☐ Company Director – change in Director (this form is not for the appointment of a Director or Company Official, or for an application for a Bookmaker's Permit) ☐ Shareholder – acquiring shares (refer the GSC Integrity Guidance) ☐ Money Laundering Reporting Officer | | | |
| Part 2 – Personal Identity and | l Address | | |
| rait 2 reisonal Identity and | 1 Add 1635 | | |
| Title used () Mr () Mrs () Miss | s () Ms () Other | | |
| Surname (Family name by which you are known) | | | |
| Given Forename(s) | | | |

| Name previously kno surname before marriag | | | | | |
|---|------------------------|--------------|------|-------------|---|
| Other name or alias you have been known t | | | | | |
| Reason for the use of or other name | of analias | | | | |
| Dates other names u | ısed | From: | | | То: |
| | | | | | |
| | | | | | |
| | | | | | |
| Gender: | ☐ Female | Date of Birt | | h / Month (| of Year in Words / Year in full |
| Place of Birth | | Town/ | City | | Country |
| Current Nationality | | | | | |
| Change of Nationalit | у | | | | |
| If you have changed right, provide your or reason for change. I | original nationality a | and the | | | |
| Address | | | | | |
| | during the past five | | | | years, please provide all sufficient room, continue |
| Dates from and to | | | | | |
| Previous Address | | | | | |
| Dates from and to | | | | | |
| Previous Address | | | | | |

| Part 2.1 – Contact Methods (The method by which we can get in touch with you) | | | |
|--|--|-----------------------|---------------|
| Туре | Home | Busine | ss |
| Contact number | | | |
| E-mail | | | |
| Other | | | |
| Part 2.2 – Ev | vidence of Identity | | |
| • | nce | | entification. |
| Part 2.3 – Verification of Address You must provide a certified copy of an acceptable form of address verification. Please indicate with a tick (✓) which method you have provided ☐ Utility Bill ☐ Other | | | |
| Part 3 – Con | petence, Curriculum Vit | ae and Experi | ience |
| Please provide a personal curriculum vitae which includes details of the following: Details of relevant qualifications; and Full employment history relevant to the role, including employers name, job title and responsibilities, the length of the term of employment and the reason for leaving. | | | |
| Part 4 – Other Information | | | |
| If you answer 'yes | to any question, please provide full of | details in a separate | attachment. |
| Governmen | ver been party to an application to the for any type of Gaming, Betting or (ine or terrestrial | | YES / NO |
| • | ver been party to an application in a e of Gaming, Betting or Gambling Lic rrestrial | • | YES / NO |

Part 5 - Check List

Please indicate that you have provided the following information. If the answer is NO, please explain on a separate sheet of paper.

| Answered all questions or provided an alternative explanation | YES / NO |
|---|----------|
| Provided a certified copy of your evidence of identity | YES / NO |
| Provided a certified copy of your verification of address | YES / NO |
| Provided a Curriculum Vitae | YES / NO |
| Signed and dated the declaration below | YES / NO |

Part 6 – Declaration and Signature

As part of the submission by the Bookmaker's Permit holder under the Gaming, Betting and Lotteries Act 1988, as an individual who holds or is applying to hold the role indicated on this form in connection with a Betting Office Licence:

I declare that the information supplied in this application is correct to the best of my knowledge.

I agree to provide the GSC with any further information that it may require when considering this application.

I agree to inform the GSC of any other information and changes after submission of the application which may be material to this application.

I understand that the GSC will make enquiries during the application process and on a continuing basis.

I confirm that I have read and understood each of the following:

- The Gaming, Betting and Lotteries Act 1988; and
- The Integrity Guidance for Licensed Betting Offices applications.

| Signed | |
|--------|--|
| Name | |
| Date | |

Part 7 - IOM Director's Statement

I confirm that the appropriate due diligence investigations have been completed by the applicant company.

Accordingly, I confirm that I am satisfied that the following controller is a person of integrity.

| Applicant's Full Name | |
|-----------------------|--|
| Director's Full Name | |
| Director's Signature | |
| Date | |

The GSC is registered with the Isle of Man Information Commissioner as a data controller under Isle of Man Data Protection Legislation.

The GSC collects and processes personal data to satisfy its legal obligation under Isle of Man gambling legislation. The GSC may also share personal information with third parties where it is necessary for the performance of a task and where there is a legal basis for doing so.

Further information on how the GSC collects and processes personal data can be found in the Privacy Notice and Integrity Guidance on the GSC website.

The Data Protection Officer can be contacted on DPO-GSC@gov.im on Tel +44 1624 694331