



THE ONLINE GAMBLING REGULATION ACT 2001

PERSONAL DECLARATION FORM (PDF)

| | |
|--|---|
| Personal Declaration Form of (Your Name here) | |
| Are you acting in a professional capacity on behalf of a CSP – if so please state CSP | |
| Name of the Company making the OGRA Application | |
| Position held/to be held within the Company Indicate with a '✓' or 'X' each of those applicable | <input type="checkbox"/> Shareholder with more than 5% holding Note that the due diligence required for publically listed companies varies slightly: in these instances, we seek to scrutinise all shareholders with 20% or more stock <input type="checkbox"/> Company Director <input type="checkbox"/> Designated Official <input type="checkbox"/> Operations Manager <input type="checkbox"/> Investor, investing more than £250,000, or more than 25% of the total amount invested |
| Explanation of the Application Procedure The application procedure for an Online Gambling Regulation Act (OGRA) licence is designed to gain sufficient information so as to enable the Isle of Man Gambling Supervision Commission (GSC) to carry out its detailed enquiries and reach an informed decision as to the suitability of the applicant as a licence holder. The GSC has a statutory responsibility to investigate the character and financial status of any person applying for any licence, holding any licence or otherwise concerned with the operation of any online gambling conducted in the Island. To achieve this, the GSC must be satisfied as to several things: <ul style="list-style-type: none">• the 'beneficial ownership' of the share capital of the applicant company;• that the company is under the control of persons of integrity;• that the company has adequate financial means available to conduct online gambling; and• that the day-to-day activities of the company will be under the management of persons of integrity and competence | |

There is also an obligation to ensure that licences are only granted to companies that will not damage the reputation of the Isle of Man as a premier international finance centre.

The GSC will only accept applications made in the English language, and any supporting documentation in another language must be properly translated by the applicant before submission.

As part of the due diligence process of the application, the GSC will conduct enquiries with a number of third party organisations and other authorities. These third parties will conduct due diligence assessments on all natural persons and companies listed within the application on behalf of the GSC.

All comment on the applicant from third parties is made to the GSC to enable them to assess the integrity, competence, fitness and propriety of the applicant.

By signing this form you have agreed and understand the reason for these assessments and give your consent. If you do not agree to consent, the assessments may still be carried out or the application process may cease.

An approach will also be made to the Isle of Man Office of the Information Commissioner, where The Applicant Company must be registered under the Data Protection Act.

The GSC is aware that an association to a gambling operation can attract adverse comment or reaction from Law Enforcement Agencies or Government Departments in some jurisdictions. If you feel this may affect you, please contact the GSC to discuss your circumstances further.

General Guidance on completion of the Form

Please complete in CAPITAL LETTERS (except where signing) and use BLACK ink. Please stay within the text boxes. If there is insufficient room, please provide the information on a separate sheet, and indicate in the box that you have done so.

All questions must be answered and where specific information is requested, it must be provided in full. A failure to do so will result in your application being delayed, and may result in your application being returned.

The GSC retain the right to request any additional information.

Before the Application Process can proceed, the prescribed Application Fee must have been paid in full.

Should it be found that any information provided as part of the application process is, without reasonable excuse, misrepresented or falsified, deliberately omitted or otherwise not properly provided, it may result in the application being rejected, or if already approved, that approval being suspended or revoked.

Client confidentiality is important to us. Information provided as part of this process will not be shared with anyone, other than sanitised information which is used for the purpose of conducting the prescribed statutory and due diligence checks

Please note Part 10 will not be required where the PDF relates to an Isle of Man based Director.

Part 1 – Personal Identity and Address

| | | | | | |
|---|--|-------------|---------|---------------------|--------|
| Title used | Mr | Mrs | Miss | Ms | Other: |
| Surname (Family Name by which you are commonly known) | | | | | |
| Given Forename(s) | | | | | |
| Maiden Name (Surname of a female before marriage) | | | | | |
| Other name or alias (Any name by which you have been known for any reason) | | | | | |
| Reason for the use of an alias or other Name | | | | | |
| Dates other names used | From: | | | To: | |
| Gender | Male | | Female | | |
| Date of Birth | Day of Month / Month of Year in Words / Year in full | | | | |
| Place of Birth | Town/City: | | | Country: | |
| Current Nationality | | | | | |
| Change of Nationality If you have changed nationality from your birth right, give your original nationality and the reason for change. If not applicable, leave blank | | | | | |
| Full Postal Address | Building Name or Number | | | | |
| | Street | | | | |
| | Town | | | | |
| | County, State or Area | | | | |
| | Country | | | | |
| | Post Code | | | | |
| Occupancy Status of Current Home Address | Owner | Joint Owner | Renting | Living with Parents | |
| | Other: | | | | |
| How long have you lived at this address | | | | | |

If you have lived at your current home address for less than five years, provide all previous addresses during the past five years below. If there is insufficient room, continue on a separate sheet.

| | | |
|--------------------------|-------------------------|--|
| Dates from and to | | |
| Previous Address | Building Name or Number | |
| | Street | |
| | Town | |
| | County, State or Area | |
| | Country | |
| | Post Code | |
| Dates from and to | | |
| Previous Address | Building Name or Number | |
| | Street | |
| | Town | |
| | County, State or Area | |
| | Country | |
| | Post Code | |

Part 1.1 - Contact Methods (The method by which we can get in touch with you)

| Type | Home | Business |
|--------------|------|----------|
| Telephone | | |
| Mobile Phone | | |
| Facsimile | | |
| E-mail | | |

Part 1.2 - Evidence of Identity

You must provide a plain copy of an acceptable form of photographic id

Indicate with a '✓' or an 'X' which method you use

- Passport
- Country ID Card
- Driving Licence

Please note that you will be required to produce the original document to the GSC, either at any meeting with the Inspectorate which occurs during the licensing process, or at the actual licensing hearing at the close of the process.

Part 1.3 - Verification of Address

You must provide a plain copy of an acceptable form of proof of your home address

Indicate with a '✓' or an 'X' which method you use

- Bank Statement
- Utility Bill
- Other

Please note that the proof of address must clearly show your name, the address in full and must not be more than three months old.

Part 2 - Integrity; Previous Convictions etc

The questions in Part 2 refer to all jurisdictions and countries, and your answers should not be restricted to any one jurisdiction in isolation.

You must include convictions that might be considered as 'spent' under the Rehabilitation of Offenders Act.

Declaring a conviction etc should not be seen as an automatic bar to licensing, as all matters are judged individually on their merits.

If you answer 'yes' to any question, please provide full details in a separate attachment.

| | |
|--|-----------------|
| <p>2.1 Have you ever been convicted of an offence or accepted a formal Police or Customs caution, admonishment or formal warning?</p> | <p>YES / NO</p> |
| <p>2.2 Have you been charged with an offence and awaiting hearing; or otherwise subject to a pending prosecution?</p> | <p>YES / NO</p> |
| <p>2.3 To your knowledge, are you under investigation or enquiry by</p> <ul style="list-style-type: none"> • the police, customs or any other law enforcement agency; • any other Government Agency (i.e. Tax, IRS, Social Security etc) • any Professional Body, Trade Association or Industry Regulator | <p>YES / NO</p> |
| <p>2.4 Have you ever been censured, disciplined or made subject of an order by any Professional Body, Trade Association or Industry Regulator</p> | <p>YES / NO</p> |
| <p>2.5 Have you ever been:</p> <ul style="list-style-type: none"> • Disqualified from acting as a director of a Company • Prohibited from acting in the management or conduct of the affairs of any company, partnership or association | <p>YES / NO</p> |
| <p>2.6 Have you ever been barred from entry into any employment or office? During the course of any employment or office, have you ever been:</p> <ul style="list-style-type: none"> • Suspended or dismissed • Required to resign | <p>YES / NO</p> |

Part 3 - Financial Circumstances

The questions at Part 3.1 to 3.3 refer to all jurisdictions and countries, and your answers should not be restricted to any one jurisdiction in isolation.

You must declare all matters irrespective of how long ago they occurred.

Declaring any matter should not be seen as an automatic bar to licensing, as all matters are judged individually on their merits.

If you answer 'yes' to any question, please provide full details in a separate attachment.

| | |
|--|-----------------|
| <p>3.1</p> <p>Have you ever been</p> <ul style="list-style-type: none"> • Declared bankrupt • Entered into an agreement with creditors • Subject of an Individual Voluntary Agreement (IVA) • Subject of any civil legal action (including County Court Judgements) • Subject to penalty or enforcement action by any other Government Agency (Tax, IRS, Social Security etc) | <p>YES / NO</p> |
| <p>3.2</p> <p>Have you ever held a Directorship or other senior appointment with any company, partnership or business entity which has been placed into</p> <ul style="list-style-type: none"> • Liquidation • Receivership • Insolvency • Any kind of regulatory administration or monitoring | <p>YES / NO</p> |
| <p>3.3</p> <p>Are you in default of payment of any</p> <ul style="list-style-type: none"> • Mortgage facility • Loan agreement • Credit or Store Cards • Bank overdraft facility • Penalty or enforcement action by any other Government Agency (Tax, IRS, Social Security etc) • Any other type of financial liability | <p>YES / NO</p> |

Financial Circumstances - Personal Banking

3.4

Please provide details of your main personal banking account.

You must also provide either:

- a letter from an official at your bank, which confirms the details you have provided and which includes the contact details of the person at the bank providing the information; or
- full copies of a recent (within three months) monthly statement for each account

| | | | |
|--|-------------------------|-----------------------------|--|
| Name of Bank or Building Society | | | |
| Branch Sort Code <small>(The six figure hyphenated number on your statements and cheque book)</small> | | | |
| Full Postal Address of the Bank Branch | Building Name or Number | | |
| | Street | | |
| | Town | | |
| | County or Area | | |
| | Country | | |
| | Post Code | | |
| Account Title | Account Number | Length of time account held | |
| | | | |
| | | | |
| | | | |
| | | | |

Part 4 – Competence & Integrity; Professional References

| | | |
|---|-------------------------|----------|
| Are you now, or have you ever been a member of a Professional Body, Trade Association or other similar organisation | | YES / NO |
| Name of Body or Association | | |
| Postal Address of the Professional Body, Trade Association etc | Building Name or Number | |
| | Street | |
| | Town | |
| | County, State or Area | |
| | Country | |
| | Post Code | |
| Your Designation (The qualification, title or description conferred when qualifying or being admitted) | | |
| Date Qualified, Admitted or Joined | | |
| Membership Number | | |

Part 5 – Competence & Integrity; Curriculum Vitae

Please provide a separate CV or Résumé which will include details of the following:

- Brief educational history and qualifications obtained
- Full employment history for the past ten years, including employers name, job title and responsibilities, the length of the term of employment and the reason for leaving
- Experience and qualifications relevant to the role and the gambling industry

Part 6 – Other Information

If you answer 'yes' to any question, please provide full details in a separate attachment.

| | |
|--|----------|
| 6.1 Have you ever been party to an application to the Isle of Man Government for any type of Gaming, Betting or Gambling Licence, whether online or terrestrial | YES / NO |
| 6.2 Have you ever been party to an application in any other jurisdiction for any type of Gaming, Betting or Gambling Licence, whether online or terrestrial | YES / NO |

Part 7 – 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 plain copy of your evidence of identity | YES / NO |
| Provided a plain copy of your verification of address | YES / NO |
| Provided your banking information as required at Part 3.4 | YES / NO |
| Provided a Curriculum Vitae as required at Part 5 | YES / NO |
| Completed and signed the Information Disclosure Authority Form (which follows at Page 12 of this document) | YES / NO |
| Completed and signed Disclosure Barring Service (DBS) Form (If a DBS form was not requested prior to the application being submitted, one will be issued upon receipt of this form). | YES / NO |
| Signed and dated the declaration below | YES / NO |

Part 8 – Declaration and Signature

As part of the submission by the Applicant Company for a Licence under Section 4 of the Online Gambling Regulation Act 2001 (OGRA) or as an individual who holds or is applying to hold the position indicated on this form within a current OGRA licence holder, I agree—

- to provide any further information that the Commission may require when considering this application
- to notify the Commission immediately of any material changes in the information provided in this application

I understand that, as part of the application process, the GSC will make extensive due diligence enquiries in order to establish that the Applicant Company is under the control and management of persons of integrity and competence who are of sound character and financial status.

I hereby authorise the GSC to pursue confirmation of facts and potentially seek further information from third parties. I understand this may involve the sharing of some of my information.

I further grant authorisation for the GSC to undertake such enquires, and to request and receive information about me from such third parties.

I certify that the information provided in this personal Declaration Form is, to the best of my knowledge and belief, complete and correct.

| | |
|-----------|--|
| Signature | |
| Date | |

Part 9 – IOM Director’s Statement

I confirm that the appropriate due diligence checks have been completed.
Accordingly, I can 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 Online Gambling Regulation Act 2001 Information Disclosure Authority

This form is issued by the

Isle of Man Gambling Supervision Commission

Ground Floor, St George's Court, Myrtle Street, Douglas, Isle of Man, IM1 1ED

Telephone: +44 (0)1624 694331 Fax: +44 (0)1624 694344 E-mail: gaming@gov.im

Web Site: www.gov.im/gambling

I confirm that I am party to an application, which has been made to the Isle of Man Gambling Supervision Commission (GSC) for a licence to operate under the Online Gambling Regulation Act 2001(OGRA), or that I hold or intend to hold the position indicated on this form within a company licensed to operate under OGRA, and that the information provided on this form is accurate and true.

I understand that as part of this process, the GSC will undertake comprehensive due diligence enquiries into my character, integrity, competence and financial status.

A photocopy or fax of this authorisation shall be considered as effective and valid as the original.

| | | | |
|--------------------------|-------------------------|-----------------------|--|
| Signature | | | |
| Full Name | | | |
| Contact Address | Building Name or Number | | |
| | Street | | |
| | Town | | |
| | County or Area | | |
| | Country | | |
| | Post Code | | |
| Contact Telephone | | E-mail address | |

The Isle of Man Gambling and Supervision Commission is registered with the Isle of Man Information Commissioner as a data controller under Isle of Man Data Protection Legislation. The Commission collects, processes and uses personal data in line with a number of pieces of legislation and in order to conduct its functions under relevant legislation. The Commission may also share personal data and information with other parties where there is a legal basis for doing so. Information on how the Commission collects and processes personal data can be found in the [Privacy Notice](#) on the Commissions website. The Data Protection Officer can be contacted on DPO-GSC@gov.im on Tel +44 1624 694331.