Application for substitution of premisescompany

Licence details										
Licensee name:										
Gaming licence:					Exp	oiry date:				
Do you currently hold a liquor licence, or have you applied for a liquor licence?					Yes / No					
Liquor licence:	Expiry date									
Applicant details										
Full name of corporation	า:									
ACN:			ABN:							
Does the applicant agree	e to receiv	ve corresponden	ce via ei	mail?						Yes / No
Corporation head office	:									
Unit/building number:				Stre	et n	umber:				
Street name:										
Suburb:				Stat	e:			Postcode:		
Postal address and cont	act detail	s								
Is your postal address th	ne same as	above? If no, co	mplete	belov	w:					Yes / No
Postal address:										
Suburb:				State	e:		P	ostcode:		
Phone number:				Mob	oile i	number:				
Email address:										
Applicant additional det	tails									
This application is made	by:									
Contact number:										
Principal place of busine	ess									
Principal place of busine	ess addres	s is the same as o	corporat	tion h	nead	office				Yes / No
Unit/building number:			9	Stree	t nu	mber:				
Street name:										
Suburb:			\$	State:	:			Postcode:		
Phone number:			1	Mobil	le nı	umber:				
Email address:										
Does the corporation in	tend, if th	e licence is grant	ed, to u	se a k	ousi	ness or tra	ding	name?		Yes / No
Business name:										
Business number:										
Website:										



Disclosures	
Have you in the last 12 months applied for an authorisation (however described) such as a licence or certificate, or registration, under any Act relating to the regulation of any business trade, profession, industry or occupation? (If yes, please provide relevant details)	
Were any of the applications for such authorisation refused or withdrawn? (If yes, please provide relevant details)	Yes / No
In respect of those authorisations granted, is there any which are no longer in force for any reason? (If yes, please provide relevant details)	Yes / No
In the last 10 years, have you been subject to action of a disciplinary nature relating to any authorisation referred to in paragraph (1) or are there any investigations or proceedings, pending or current, which may result in such action being taken in relation to any authorisation? (If yes, please provide relevant details)	Yes / No
Have you been convicted or, or served any part of a term of imprisonment, wherever committed, for an offence involving fraud, dishonesty or physical violence? (If yes, please provide relevant details)	Yes / No
Have a charge pending in relation to an offence involving fraud or dishonesty? (If yes, please provide relevant details)	Yes / No
Have you been or are you currently bound by a recognisance (bail condition) or the subject of any charge pending in relation to any offence(s) before a court or Commission of Inquiry? (If yes, please provide relevant details)	Yes / No
Held a position as secretary or director in any company which has been wound up or placed under a receiver or official manager, or which has entered into a scheme or arrangement with its creditors? (If yes, please provide relevant details)	Yes / No

Have you been declared bankrupt or assigned your estate for the benefit of your creditors? (If yes, quote the date(s) and jurisdiction(s)?)						
Have you been known	by any other na	mes? (If yes, please provide relevant details)	Ye	es / No		
Applicant declaration						
I, (full name):						
Of (address):						
knowledge by	and information virtue of the Oat	contained in this application are true and correct to th hs, Affidavits and Declarations Act 2010; and	ne best of	my		
	······································					
 I will notify Licensing NT within 7 days of any conviction in a court of law; and I know that it is an offence to make a declaration that is false in any material particular 						
		nvestigations carried out by the authorised officers of		g NT to		
-		by me and to determine my suitability to hold the lice inquiries may be made before and after the issue of a		vhich l		
This declaration is mad	le at: (location)	on: (date)				
Applicant signature:						
		<i>Declarations</i> Act 2010 a person wilfully making a false s laration is guilty of a crime and is liable to a penalty or				
Supporting document	s					
The following docume	nts are required	to be lodged with the application:				
	•	mises to which the application relates, indicating the nere it is intended to install gaming machines.		Yes / No		
	-	e for proper cleaning and maintenance of the machine overs the proper use of things provided on the premise		Yes / No		
Community impact and	alysis (CIA)			Yes / No		
If a club, statement of club's neighbourhood	the Club's currer	nt profits allocation/distribution towards development	t of the	Yes / No		
		the Club's profits allocation/distribution towards ood would be increased		Yes / No		
If a club, statement of recreation or service o		nt profits as donations to or funding for community, ne neighbourhood		Yes / No		
	If a club, details of the extent to which the club's profits as donations to or funding for community, recreation or service organisations in the neighbourhood would be increased					

Privacy statement

The Northern Territory Government respects and is committed to safeguarding the confidentiality and privacy of the information that it collects and handles, in accordance with the *Information Act* 2002 (NT).

You have been asked to provide personal information necessary for us to meet your application requirements. You do not have to provide your personal information but if you choose not to, this application will be incomplete and we will be unable to process it.

The information you provide will be accessible to Licensing NT and will only be used to provide a department service or program. We will not disclose your personal information to third parties unless, authorised or required by law to do so you have given us consent to share your personal information for a specific purpose.

You may request access to the personal information we hold about you. If you want more information about the Northern Territory's privacy laws, please refer to the *Information Act 2002* (NT), or the Office of the Information Commissioner NT.

Lodgement					
Complete applications can be lodged in person, email or via post at a Territory Business Centre below:					
Darwin:	NAB House, Level 3, 71 Smith Street Darwin				
Katherine:	Big Rivers Government Centre, 5 First Street, Katherine				
Alice Springs:	Ground Floor, The Green Well Building, 50 Bath Street Alice Springs				
1800 193 111	GamingMachineAct@nt.gov.au GPO Box 9800 Darwin NT 0801				