

Application for a gaming machine venue licence - company

Applicant details					
Full name of corporation:					
ACN:		ABN:			
Does the applicant agree to receive correspondence via email?					Yes / No
Corporation head office					
Unit/building number:		Street number:			
Street name:					
Suburb:		State:		Postcode:	
Postal address and contact details					
Is your postal address the same as above? If no, complete below:					Yes / No
Postal address:					
Suburb:		State:		Postcode:	
Phone number:		Mobile number:			
Email address:					
Applicant additional details					
This application is made by:					
Contact number:					
Principal place of business					
Principal place of business address is the same as corporation head office					Yes / No
Unit/building number:		Street number:			
Street name:					
Suburb:		State:		Postcode:	
Phone number:		Mobile number:			
Email address:					
Does the corporation intend, if the licence is granted, to use a business or trading name?					Yes / No
Business name:					
Business number:					
Website:					

Gaming machine application details					
Liquor licence endorsement					
Club		Hotel		Tavern	
Number of gaming machines for which this licence is sought:					
Do you currently hold a liquor licence or have you applied for a liquor licence?					Yes / No
Liquor licence number:		Premises name:			
Officers of the corporation					
Details of each officer or partner of the Firm (Directors, Manager, Partners, Secretary, Public Officer, President and Companies) and each person who substantially controls or could substantially control the affairs of the firm.					
Party type: (Please select one of the below)					
Company		Firm		Individual	
Surname:				Title:	
Given name(s):				Date of birth:	
Full name of company:					
ACN:			ABN:		
Full name of firm:					
Is the applicant incorporated? (If yes, please enter an incorporation number below)					Yes / No
Incorporation number:					
ACN:			ABN:		
Position held:					
Postal address and contact details					
Postal address:					
Suburb:		State:		Postcode:	
Phone number:			Mobile number:		
Email address:					
Officers of the corporation (2)					
Details of each officer or partner of the firm (Directors, Manager, Partners, Secretary, Public Officer, President and Companies) and each person who substantially controls or could substantially control the affairs of the firm.					
Party type: (Please select one of the below)					
Company		Firm		Individual	
Surname:				Title:	
Given name(s):				Date of birth:	
Full name of company:					
ACN:			ABN:		

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Full name of firm:					
Is the applicant incorporated? (If yes, please enter an incorporation number below)					Yes / No
Incorporation number:					
ACN:			ABN:		
Position held:					
Postal address and contact details					
Postal address:					
Suburb:		State:		Postcode:	
Phone number:			Mobile number:		
Email address:					
Others with financial interest in the business					
Will any other person or entity have a financial interest in this business?					Yes / No
Other parties with financial interest					
Party type: (Please select one of the below)					
Company		Firm		Individual	
Surname:				Title:	
Given name(s):				Date of birth:	
Full name of company:					
ACN:			ABN:		
Full name of firm:					
Is the applicant incorporated? (If yes, please enter an incorporation number below)					Yes / No
Incorporation number:					
ACN:			ABN:		
Postal address and contact details					
Postal address:					
Suburb:		State:		Postcode:	
Phone number:			Mobile number:		
Email address:					
Other parties with financial interest (2)					
Party type: (Please select one of the below)					
Company		Firm		Individual	
Surname:				Title:	
Given name(s):				Date of birth:	
Full name of company:					
ACN:			ABN:		

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Full name of firm:					
Is the applicant incorporated? (If yes, please enter an incorporation number below)					Yes / No
Incorporation number:					
ACN:			ABN:		
Postal address and contact details					
Postal address:					
Suburb:		State:		Postcode:	
Phone number:		Mobile number:			
Email address:					
Disclosures					
Has this party ever had any prosecutions or other legal actions taken by or against the Body Corporate? (If yes, please provide relevant details)					Yes / No
Is there any litigation pending by or against the Body Corporate? (If yes, please provide relevant details)					Yes / No
Have you been arrested, charged or summonsed for an offence, regardless of the disposition, excluding juvenile offences and minor traffic offences (including drink driving offences)? (If yes, please provide relevant details)					Yes / No
Are you an undischarged bankrupt or have you ever applied to take the benefit of any law for the relief of bankrupt or insolvent debtors, compounded with creditors or made an assignment of your remuneration for their benefit? (If yes, please provide relevant details)					Yes / No

Applicant declaration			
I, (full name):			
Of (address):			
solemnly and sincerely declare that:			
<ul style="list-style-type: none"> All statements and information contained in this application are true and correct to the best of my knowledge by virtue of the <i>Oaths, Affidavits and Declarations Act 2010</i>; and I have read and understood the information contained in this application; and 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 I hereby consent to all probity investigations carried out by the authorised officers of Licensing NT to verify the information provided by me and to determine my suitability to hold the licence for which I have applied. I agree that such inquiries may be made before and after the issue of a licence. 			
This declaration is made at: (location)		on: (date)	
Applicant signature:			
<p>Note: Under the <i>Oaths, Affidavits and Declarations Act 2010</i> a person wilfully making a false statement or altering a statement, in a statutory declaration is guilty of a crime and is liable to a penalty or imprisonment, or both.</p>			
Supporting documents			
The following documents are required to be lodged with the application:			
Current photographic identification (copy of driver's licence or passport)			Yes / No
Evidence of change of name (eg copy of marriage certificate or deed poll documents) if applicable			Yes / No
Evidence of lodgement of Criminal History application or Criminal History Report conducted within the last 3 months issued by SAFE NT (new application = fingerprint check, renewal application = name check)			Yes / No
Financial statements			Yes / No
Credit reference report			Yes / No
Taxation Return of tax assessment notice (for the past 3 years)			Yes / No
Community impact analysis (CIA)			Yes / No
Business plan			Yes / No
A neat, accurate scaled plan of the premises to which the application relates, indicating the proposed locations on the premises where it is intended to install gaming machines.			Yes / No
Statutory Declaration stating allowance for proper cleaning and maintenance of the machines, unrestricted access to Fire Exits and covers the proper use of things provided on the premises for safety and security.			Yes / No
Details of the arrangements made for the monitoring of the gaming machines by a licensed monitoring provider and for the maintenance and repair of the gaming machines through a licensed service contractor.			Yes / No
Lease arrangement, arrangement or contract for the premises subject to the application			Yes / No
If body corporate, a copy of the Certificate of Incorporation of the body corporate			Yes / No

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If body corporate, a copy of the memorandum, rules, constitution or other incorporating documents of the body corporate, certified as a true copy by the secretary or other person duly authorised on that behalf of the body corporate and, in the case of rules of a club, certified as a true copy by the Registrar, within the meaning of the Association Incorporation Act	Yes / No
If body corporate, a certified copy of the resolution or minute of the proceedings of the governing body whereby approval was given to the making of the application	Yes / No
If body corporate, a copy of the last 2 years audited balance sheet or statement of the financial affairs of the body corporate	Yes / No
If a club, a statement detailing the number of members in each class of membership of the club	Yes / No
If a club, a copy of the club constitution	Yes / No
If a club, a proposal consistent with club constitution	Yes / No
If a club, statement of the Club's current profits allocation/distribution towards development of the club's neighbourhood	Yes / No
If a club, details of the extent to which the Club's profits allocation/distribution towards development of the club's neighbourhood would be increased	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	Yes / No
An affidavit under Section 44 of the <i>Gaming Machine Act 1995</i> , giving disclosure of any influential or beneficial parties who will by any lease, agreement or arrangement be able to influence any decision made in relation to the conduct of gaming by the applicant or licensee.	Yes / No
Privacy statement	
The Northern Territory Government complies with the Information Privacy Principals scheduled by the <i>Information Act 2002</i> .	
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