## Company/Firm notification of employment or cessation of a machine manager

Use this form to notify of a machine managers employment or cessation by a company or firm in accordance Section 77 with the <u>Gaming Machine Act 1995</u>.

Employers must notify any changes within 7 days of changes occurring. See gaming machines in clubs and pubs <u>webpage</u> for further information on applicant requirements.

Licence category (choose applicable)									
Licensee name:									
Licence number:	Expiry date:								
Employer details									
Corporation/Firm nar	me:								
ACN:	ABN:								
Is the applicant incorporated? (firm only): Yes / No								Yes / No	
If yes, complete below.									
Incorporation number:									
Head office address details									
Address:									
Suburb:				State	:		Postcode:		
Is your postal address the same as above? If no, complete below.									
Postal address:									
Suburb:				State	:		Postcode:		
Contact details									
Contact name:									
Phone number:	Mobile number:								
Email address:									
Do you agree to receive correspondence by email? Yes / No									
Machine manager de	tails								
Licence number:		Expiry date:							
Surname:					Date o	of birth:			
Given name/s:									
Complete employment details below:									
Commencing employment		Yes / No	Start date:						
Ceasing employment		Yes / No	Cease date:						



Employers declaration								
To be completed by an authorised person of the licensee or if self-employed.								
I, (full name):								
Holding position of:								
Located at (name of business/gaming venue):								
<ul> <li>Herby certify that:</li> <li>The applicant has the appropriate qualifications, knowledge, skills and experience to competently carry out the activities that will be authorised under the licence; and</li> <li>If the application is successful, this person will be employed in the capacity of gaming machine repairer.</li> </ul>								
This declaration is mad	de at: (location)		on: (date)					
Signature:								
Note: Under the Oaths, Affidavits and Declarations Act 2010 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.								
Supporting documents	s checklist							
Application complete a	and signed employ	oyer declaration.		Yes / No				
Disclaimer								
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 <i>Northern Territory Information Act 2002</i> . 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								
<ul> <li>will be incomplete and we will be unable to process it.</li> <li>The information you provide will be accessible to Occupational Licensing 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.</li> <li>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 Northern Territory Information Act 2002, or the Office of the Information Commissioner NT.</li> </ul>								
Privacy statement								
The Northern Territory Government complies with the Information Privacy Principals scheduled by the <i>Information Act</i> 2002.								
Lodgement								
Complete applications can be lodged in person, email or via post at a Territory Business Centre below:								
Darwin: [	Darwin Corporate Park, Ground Floor, Building 3, 631 Stuart Highway Berrimah							
Katherine: E	Big Rivers Government Centre, 5 First Street, Katherine							
Tennant Creek: S	Shop 2, Barkly House, Cnr Davidson and Paterson Streets, Tennant Creek							
Alice Springs: 0	Ground Floor, The Green Well Building, 50 Bath Street Alice Springs							
1800 193 111	territorybusi	sinesscentre@nt.gov.au	GPO Box 9800 Da	rwin NT 0801				