# *Gaming Machine Act*

Please print in block letters. If there is insufficient space, attach extra sheets. All questions must be answered and full particulars provided. Failure to do so may delay the process.

For any enquiries relating to this application please contact Licensing NT on (08) 8999 1800.

| **Gaming Machine Substitution of Premises Application** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Notes:**   1. Application for substitution of premises regarding a gaming machine licence may be made only in respect of a premises **as specified** in the corresponding licence under the *Liquor Act*. Further applications may be required for material alteration under s119 of the *Liquor Act*. 2. An application for substitution of premises:    1. may be made by the licensee; and    2. cannot be made unless an application under section 46A of the *Liquor Act* for the substitution of the new premises regarding the licensee’s liquor licence has been made (and was not refused) or is made at the same time as this application. 3. Application for substitution of premises must include:    1. a copy of the application under section 46A of the *Liquor Act* for the transfer of the public hotel or tavern liquor licence or evidence that it has been made;    2. unless provided with the above (copy of application under section 46A of the *Liquor Act*), if the applicant is a body corporate, a copy of the resolution or minute of the proceedings by which the approval was given for this application to be made certified as a true copy by the secretary or other person properly authorised;    3. plan of the new premises indicating proposed locations of gaming machines;    4. community impact analysis (CIA) \*refer guideline <http://www.dob.nt.gov.au/gambling-licensing/reforms/community-gaming/Pages/cia-guideline.aspx>; and    5. a draft of the intended notice to be published in the newspaper. 4. Within 28 days of lodging the application for substitution of premises, the applicant must publish a notice in the newspaper that the application for has been made. The notice must: 5. include in sufficient detail a description to identify the location of the premises to which the application relates; 6. specify the number of gaming machines that the applicant seeks to have authorised for use under the gaming machine licence at the premises; 7. contain details of where community impact information may be obtained; 8. contain a statement that a person may make a written submission to the Director-General on the application within 30 days of the notice being first published in a newspaper; 9. contain any other particulars determined by the Director-General; and 10. be not less than double column width and 8cm deep. 11. The Director-General may require the applicant, or associate, to submit any additional information or material deemed necessary to consider the application. 12. The applicant must give the Director-General written notice within 7 days of any change in the information in, or accompanying, the application or any other change in circumstances of the application. 13. It is an offence, under s177(f) of the *Gaming Machine Act,* to provide or submit information or material knowing it to be false, erroneous or misleading in a material particular in, or in relation to, an application or statement. Maximum penalty: 430 penalty units or imprisonment for 5 years. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Gaming Licence Details** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Gaming Machine Licence Number | | | | | | | | | | GM | | | | | | | | | | | | | | | | | | | | | | | | | |
| Number of Machines on site | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| Trading Name of Premises  \*Business Name Extract required | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| **This application is made by** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Natural Person/Partnership  Body Corporate | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **If applicant is a Natural Person/Partnership (attach extra sheets if necessary):** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Full Name | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Address | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date of birth | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Telephone | | | | | |  | | | | | | | | | | | Facsimile | | | | | |  | | | | | | | | | | | | |
| Mobile | | | | | |  | | | | | | | | | | | Email | | | | | |  | | | | | | | | | | | | |
| **If applicant is a Body Corporate, including a Club:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name of body corporate | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| ACN (if applicable) | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| Registered Address of body corporate | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Postal Address of body corporate | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Telephone | | | |  | | | | | | | | | | | | | | Facsimile | | | | |  | | | | | | | | | | | | |
| Mobile | | | |  | | | | | | | | | | | | | | Email | | | | |  | | | | | | | | | | | | |
| **Details of Secretary** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Full Name | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Address | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date of birth | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Telephone | | | |  | | | | | | | | | | | Facsimile | | | | | | | | |  | | | | | | | | | | | |
| Mobile | | | |  | | | | | | | | | | | Email | | | | | | | | |  | | | | | | | | | | | |
| **Details of Each Executive Officer (attach extra sheets if necessary)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Full Name | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Address | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date of birth | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Telephone | | | |  | | | | | | | | | | | Facsimile | | | | | | | | |  | | | | | | | | | | | |
| Mobile | | | |  | | | | | | | | | | | Email | | | | | | | | |  | | | | | | | | | | | |
| Full Name | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Address | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date of birth | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Telephone | | | |  | | | | | | | | | | | Facsimile | | | | | | | | |  | | | | | | | | | | | |
| Mobile | | | |  | | | | | | | | | | | Email | | | | | | | | |  | | | | | | | | | | | |
| **If applicant is a Club:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Number of members | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| **Hours and days when premises is open for sale of liquor** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Hours | |  | | | | | | | | | | | | | | Days | | | |  | | | | | | | | | | | | | | | |
| **Full and reasonable description of the club's neighbourhood** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **State the proportions in which the club's profits have been, or are proposed to be, allocated or distributed:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A - To improve the club's facilities and services and to the club's reserves | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | $ | | | |
| B - For the purposes of the club (as set out in the club's constitution or other incorporating documents) or, if the applicant is a federation of clubs, for the purposes of each constituent club (as set out in each constituent club's constitution or other incorporating documents) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | $ | | | |
| C - Towards development of the club's neighbourhood | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | $ | | | |
| D - As donations to or funding for community, recreational or service organisations operating in the club's neighbourhood | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | $ | | | |
| **State the proportion that the allocation or distribution of (B) to the aggregate of the allocations or distributions of (B), (C) and (D)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Value of B | | | | | | | | | | | Divided by | | | | | | | | | | Value of B+C+D | | | | | | | | | | | | | | |
| $ | | | | | | | | | | | / | | | | | | | | | | $ | | | | | | | | | | | | | | |
| **State the proportion that the allocation or distribution of (C) and (D) to the aggregate of the allocations or distributions of (B), (C) and (D)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Value of C+D | | | | | | | | | | | Divided by | | | | | | | | | | Value of B+C+D | | | | | | | | | | | | | | |
| $ | | | | | | | | | | | / | | | | | | | | | | $ | | | | | | | | | | | | | | |
| **State the proportion that the number of full members of the club bears to the total number of members of the club** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **State the proportion that the number of members of the club who are not full members bears to the total number of members of the club** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Do any of the club's constitution or other incorporating documents or, if the applicant is a federation of clubs, the constitution or other incorporating documents of each constituent club prohibit, prevent or impede an allocation or distribution of C or D?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes / No | |
| **Specify full particulars of the ownership and any intended ownership of the premises** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Specify 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 serviced contractor** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Provide details of transferee’s problem gambling risk management and responsible gambling strategies** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Signed by Applicant** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| If the applicant is: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A Natural Person | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Full name | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date of birth | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature | | | | | | | | |  | | | | | | | | | | | | | | | | | | Date | | | |  | | | | |
| If the applicant is: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A Body Corporate | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Executed under the common seal of | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| Full name | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date of birth | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature of Authorised Executive Officer | | | | | | | | |  | | | | | | | | | | | | | | | | | | Date | | | |  | | | | |
| Full name | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date of birth | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature of Authorised Executive Officer | | | | | | | | |  | | | | | | | | | | | | | | | | | | Date | | | |  | | | | |
| **Statutory Declaration under s24(3)(e)(iii)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **1) Insert name & address of the principal Executive Officer (of the club) making the declaration** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| I, (1) |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| of |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **(2) Here to insert the matter declared to either directly following the word “declare” or, if the matter is lengthy, insert the words “as follows” and thereafter set out the matter in numbered paragraphs.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| do solemnly and sincerely declare (2): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| that the applicable constitution or by-laws of the club have been complied with in making the application and do not prohibit the playing of gaming machines on the premises to which the application relates. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| I make this solemn declaration by virtue of the *Oaths, Affidavits and Declarations Act* and conscientiously believing the statements contained in this declaration and accompanying application to be true in every particular. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Declared at | | |  | | | | | | | | | | | the | | | | |  | | | day of | | |  | | | | | 20 | | | | |  |
| **(3) Signature of the person making the declaration** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature (3) | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **(4) Signature of person before whom the declaration is made** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature (4) | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Before me | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **(5) Full contact details of person before whom the declaration is made, legibly written, typed or stamped** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name (5) | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Address | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Phone no | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Note: This declaration may be made before any person who has attained the age of (18) eighteen years.**  **A person wilfully making a false statement in a statutory declaration is liable to a fine or imprisonment.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Statutory Declaration under s24(3)(h)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **1) Insert name & address of person making the declaration** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| I, (1) |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| of |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **(2) Here to insert the matter declared to either directly following the word “declare” or, if the matter is lengthy, insert the words “as follows” and thereafter set out the matter in numbered paragraphs.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| do solemnly and sincerely declare (2): | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| (a) the proposed locations referred to in the new plan are within the premises to which the licensee's liquor licence relates; and  (b) the gaming machines installed in the locations will allow:  (i) proper cleaning and maintenance of the gaming machines;  (ii) unrestricted access to fire exits in a way that complies with the *Fire and Emergency Act*, the *Building Act* and the Regulations made under those Acts; and  (iii) the proper use of things provided on the premises for safety and security. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| I make this solemn declaration by virtue of the *Oaths, Affidavits and Declarations Act* and conscientiously believing the statements contained in this declaration and accompanying application to be true in every particular. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Declared at | | |  | | | | | | | | | | | the | | | | |  | | | day of | | |  | | | | | 20 | | | | |  |
| **(3) Signature of the person making the declaration** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature (3) | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **(4) Signature of person before whom the declaration is made** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature (4) | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Before me | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **(5) Full contact details of person before whom the declaration is made, legibly written, typed or stamped** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name (5) | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Address | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Phone no | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Note: This declaration may be made before any person who has attained the age of (18) eighteen years.**  **A person wilfully making a false statement in a statutory declaration is liable to a fine or imprisonment.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Lodgement options** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Applications can be lodged at a Territory Business Centre with the prescribed fee at: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Darwin**  Ground Floor, Development House  76 The Esplanade Darwin  GPO Box 9800  Darwin NT 0801  t: (08) 8982 1700  f: (08) 8982 1725  Toll free: 1800 193 111  e: [territory.businesscentre@nt.gov.au](mailto:territory.businesscentre@nt.gov.au) | | | | | | | | | | | | | | | | | | | | **Katherine**  Shop 1, Randazzo Building  18 Katherine Terrace  Katherine  PO Box 9800  Katherine NT 0851  t: (08) 8973 8180  f: (08) 8973 8188  e: [territory.businesscentre@nt.gov.au](mailto:territory.businesscentre@nt.gov.au) | | | | | | | | | | | | | | | |
| **Tennant Creek**  Shop 2, Barkley House  Cnr Davidson and Paterson Streets  Tennant Creek  PO Box 9800  Tennant Creek NT 0861  t: (08) 8962 4411  f: (08) 8982 1725  e: [territory.businesscentre@nt.gov.au](mailto:territory.businesscentre@nt.gov.au) | | | | | | | | | | | | | | | | | | | | **Alice Springs**  Ground Floor, The Green Well Building  50 Bath Street  Alice Springs  PO Box 9800  Alice Springs NT 0871  t: (08) 8951 8524  f: (08) 8951 8533  e: [territory.businesscentre@nt.gov.au](mailto:territory.businesscentre@nt.gov.au) | | | | | | | | | | | | | | | |
| **Payment options** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Please contact your local Territory Business Centre for the relevant schedule of fees. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Cash – Territory Business Centre | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |
| Cheque – payable to RTM (Receiver of Territory monies) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |
| Credit card | | | | | | | Visa  MasterCard | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Credit card number | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Expiry | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name on card | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| I hereby authorise the Territory Business Centre to debit the above credit card for the amount of: | | | | | | | | | | | | | | | | | | | | | | | | | | $ | | | | | | | | | |
| Amount in words | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | dollars | | |
| Signature of cardholder | | | | |  | | | | | | | | | | | | | | | | | | | | | | | Date | | | | |  | | |
| Contact phone number | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ***Gaming Machine Act***  **Notice In Accordance with the *Information Act* (Information Privacy Principle 1)**  Licensing NT (a division of NT Department of Business) is seeking information from you for the purposes of assessing your application.  Information Privacy Principle 1 (IPP 1) requires that a public sector organisation must not collect personal information unless the information is necessary for one or more of its functions or activities. If personal information about an individual is collected from the individual, the organisation must take reasonable steps to ensure that the individual is aware of certain matters. For the purposes of IPP 1, the following advice is provided.   1. You are able to access your personal information that you have provided by making a written request to the Director-General of Licensing. 2. The information is required pursuant to the *Gaming Machine Act*. The Act requires that certain matters must be considered when deciding whether or not to approve an application. 3. The information will be kept confidential except as follows:    * 1. Information may be sought from Police, government agencies, interstate licensing authorities, or referees or other persons nominated by you. Information may be released to those sources to the extent necessary to verify information about you and your application.      2. Registers of licences and permits will be maintained and may be made available to the public on request. 4. You do not have to provide information if you do not wish to do so. However, an application may not be approved if there is insufficient information to properly determine the matter in accordance with the Act. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |