## **Gambling application**

# Bingo centre operator's licence – application as a sole trader/partnership

CCO151224

## How to apply

Send application via email to: contact@vgccc.vic.gov.au

## Important information

## **Directions for completion**

- 1. Answer every question and use BLOCK letters:
- 2. If a question does not apply, or if there are no details to disclose in response to a particular question, print N/A (not applicable) in response.
- **3.** If the space available is insufficient, please supply the required information on an attachment page(s). If you do so, begin each answer with the title and reference of the question you are responding to.
- 4. Prior to lodging this application, please ensure that you have attached all required items.
- 5. The application form will not be accessed if you do not provide a response to all applicable questions or if all required attachments are not enclosed. Processing of an application will not commence until all information is provided and the application fee is paid.

## Term of licence

If approved, a bingo centre operator's licence is generally granted for a term of 10 years, subject to the conditions specified in the licence, unless cancelled, surrendered or suspended.

## **Partnership**

If the Bingo Centre business is to be run as a partnership of two or more individuals, being natural persons, then each partner is required to complete a Bingo centre operator's licence – approval as a sole trader/partnership application form. One partner must also submit a fully executed Partnership Deed. The Partnership Deed should specify the partnership's Australian Business Number (ABN) and also provide the names of all partners together with each partner's percentage of ownership with regards to voting rights and income.

For the purposes of this application, the 'applicant' must nominate an 'authorised officer'. The authorised officer will be a person that should have capacity to influence the business direction of the applicant. This capacity to influence may include but extends beyond the day to day management and control of the bingo centre operator. If the nominated person is **not** a partner, that person will be required to complete an associated individual form.

## Payment of fee

The prescribed fee must accompany this application. Please note that once an application has been registered, the application fee is non-refundable. Note: Go to Gambling Fees and Fines at vgccc.vic.gov.au to confirm the current fee. The application fee can be paid by credit card (Visa or Mastercard).

#### **Privacy Policy**

The Victorian Gambling and Casino Control Commission is committed to responsible and fair handling of personal information consistent with the Privacy and Data Protection Act 2014 and its obligations under the *Gambling Regulation Act* 2003.

#### **Confidentiality provisions**

Information provided in your application must not be disclosed by the VGCCC or its staff to someone else, except for the purposes stated in Division 6 of Chapter 10 of the Act (to access these provisions go to <a href="mailto:vgcc.vic.gov.au">vgcc.vic.gov.au</a>).





Lodgement guide

# Bingo centre operator's licence – application as a sole trader/partnership

This information will help you complete the process to apply for a bingo centre operator's licence.

## Your application must include the following:

- Complete application form Every question on the application form has been answered.
- Financial Institution letter
- Historical Personal Name Extract from ASIC
- · National Police Certificate
- Credit Report
- Required details regarding the Responsible Gambling Code of Conduct
- Passport size photos
- If the applicant is a Partnership -
  - A copy of the Partnership Deed
  - A copy of the Record of Registration for Business Name (if applicable).
  - A copy of the minute or resolution appointing the person authorised to act on behalf of the partnership
- A copy of independent documentation confirming the court outcome or, if settled out of court, a copy of the settlement agreement
- · Associated entity and associated individual application forms including all required attachments
- A copy of the contract of sale, details of the source of funding and documentary evidence in support of the funding arrangements (only applicable if you have purchased or are proposing to purchase, a business and/or freehold property in relation to this licence application)
- · A copy of the planning permit issued by the local planning authority (unless applying for renewal of a licence)
- If it has been published, a copy of the public notice (unless applying for renewal of a licence)
- A copy of proof of tenure of the proposed bingo centre premises
- A copy of floor plans (unless applying for renewal of a licence)
- A copy of the business plan including financial projections for the first 3 years, governance and compliance
  framework, how the use of Personal Electric Transmitter (PET) machines will be managed to control
  potential harm, how many sessions will be run per week, the number of and names of declared charitable
  or community organisations intended to be clients, methods of accepting gambling payments and
  proportions (cash etc.), experience in managing a business and venue and how the business will operate.





Lodgement guide

## Bingo centre operator's licence – application as a sole trader/partnership

#### IMPORTANT INFORMATION

A bingo center operator must have a Responsible Gambling Code of Conduct (Code) submitted as part of the licence application. The VGCCC may not approve a new licence application without a complaint Code and your application will not be finalised until a Code is lodged. Applicants may adopt an existing Code, a list of which is available at the VGCCC website.

If it wishes to develop its own Code, a bingo centre operator must refer to the Ministerial Directions which set out the matters which must be contained in a Code. The Ministerial Director is available on the VGCCC website.

In accordance with section 8.5.3 (2)(1) of the Gambling Regulation Act 2003, within 14 days of applying for a bingo centre operator's licence, the applicant must publish in a newspaper circulating in the area and in a newspaper circulating generally in Victoria, a notice containing the prescribed information (as detailed below) and a statement that any person may object to the grant of the licence by giving notice in writing to the VGCCC within 28 days of the date of publication, stating the grounds for the objection.

Set out below is the suggested format of the notice to be placed (refer also to regulation 74 of the Gambling Regulations 2015).

#### SUGGESTED FORMAT OF THE PUBLIC NOTICE

The Victorian Gambling and Casino Control Commission has received an application for a bingo centre operator's licence from (applicant's name) of (applicant's business address) to operate bingo at (address of proposed centre).

In accordance with section 8.5.3 (2)(b) of the Gambling Regulation Act 2003, any person or organisation may object to the grant of this licence by giving notice in writing within 28 days from the date of this newspaper, stating the grounds for objection to:

Victorian Gambling and Casino Control Commission GPO Box 1988

Melbourne VIC 3001

For further information contact the VGCCC at <a href="mailto:contact@vgccc.vic.gov.au">contact@vgccc.vic.gov.au</a>

### IMPORTANT INFORMATION

A new applicant must provide the relevant responsible authority, within the meaning of the Planning and Environment Act 1987, copies of the application pages (pages 4 and 5). The application pages notify the responsible planning authority of the application for a bingo centre operator's licence and provide it with relevant information concerning the application. Evidence of planning authority notification must be forwarded to the VGCCC immediately it occurs. In addition, a copy of the planning permit issued by the local planning authority must be attached.





# Bingo centre operator's licence – sole trader/partnership

Signature		Is the business to be run by a partnership
		YES NO
Application is being made to the Victoria	an Gambling	
and Casino Control Commission for a new	w bingo centre	If <b>NO</b> , proceed to Q1.
operator's licence		If <b>YES</b> , provide the name of the partnership:
by (full name of applicant):		
Full Marine of Dinara Contro Draminas Cubi	a at ta this availiantion.	
Full Name of Bingo Centre Premises Subj	ect to this application:	
		Provide the ABN number (if applicable):
Bingo Centre Premises Address:		
		Provide the name of each partner:
l acknowledge a Gambling Industry Emp	Novee must be	
employed and on duty while bingo is bei		
I declare that I have read and understoo		Provide the name of the authorised officer:
application form and the directions for a		
have answered the questions truthfully o	and completely to the	The partnership's registered office address:
best of my knowledge.		
Applicant's signature:		
	Date:	
	Date.	Daytime telephone number:
Signature of witness*:		
		Mobile telephone number:
	Date:	
		Email address:
		Linuii dadress.
Print name of witness:		
		<b>Note:</b> Each partner must complete a bingo centre operator's
		licence – approval as a sole trader/partnership form. A copy of
*Any adult can be a witness		the Partnership Deed must be provided.
		Have further details been provided on an attachment page?
		YES NO





# Strictly Confidential Bingo centre operator's licence – sole trader/partnership

Applicant Details	1. (b) Are you currently known or have you previously been known by another name(s), including any alias(es), maiden name, married name(s) and name(s) changed via deed poll?
IMPORTANT INFORMATION	
You <b>must</b> ensure that <b>all</b> names noted in Q4(a) - (d) are	YES NO
advised to the providers of your National Police Certificate	If <b>YES</b> , provide additional details below:
and Credit Report.	Name changed from:
1. (a) The applicant is hereby applying for	
(tick applicable box and provide details below):	Name changed to:
new bingo centre operator's licence, or	
renewal of a bingo centre operator's licence	Date of change (dd/mm/yyyy):
Applicant's surname:	Name changed from:
	realise changes from
Applicant's first name:	Name changed to:
Applicant's middle name(s):	Date of change (dd/mm/yyyy):
Preferred given name:	1. (c) Have you had any legal name changes?
	YES NO
Date of birth (dd/mm/yyyy):	If <b>NO</b> , proceed to Q2.
	If <b>YES</b> , provide additional details below:
Place of birth:	Name changed from:
Country State or region	Name changed to:
Arrival date in Australia (if applicable, dd/mm/yyyy):	
	Date of change (dd/mm/yyyy):
	Name changed from:
	Name changed to:
	Date of change (dd/mm/yyyy):
	Have further details been provided on an attachment page?
	YES NO



# Bingo centre operator's licence – sole trader/partnership

2. Current Residential Address:		<ol><li>Applicant's parents, step-parents:</li></ol>	including both natural parents and
		Relationship to applica	ant:
<b>3. Postal address</b> (if same as Q2,	write 'as above'):	First Name:	Middle Name(s):
		Surname:	
4. Contact details:			
Contact number:		Date of birth:	
Email address:		Deletienship to populie	
		Relationship to applice	ant:
5. Photographs:		First Name:	Middle Name(s):
Attach a colour passport size ph		First Name.	Middle Name(s).
the last 3 months to this applica	tion.	Curre sine e.	
Complete the following:		Surname:	
5. (a) I have attached a passport	size photograph:		
YES		Date of birth:	
5. (b) Date photographs taken			
IMPORTANT IN	JEODMATION	Relationship to applica	ant:
Family members named in res			
required to complete an associate form as part of your request for approval. However, where investigations by the VGCCC highlight issues of concern, the VGCCC may determine that a completed associate form is required from one or more nominated family members. In this circumstance, you will be notified of the requirement for the provision of completed associate form/s and advised regarding the		First Name:	Middle Name(s):
		Surname:	
		Date of birth:	
completion and lodgement of	the required form/s.		
6. Applicant's Marital Status:		Relationship to applica	ant:
Married Single	De Facto	Relationship to applied	unt.
		First Name of	
Separated Divorce	d Widowed	First Name:	Middle Name(s):
Spouse/De Facto:			
First name:	Middle name(s):	Surname:	
Surname:	Date of Birth:	Date of birth:	

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# Bingo centre operator's licence – sole trader/partnership

<ol><li>Applicant's brothers and sisters: List all, including half/step brothers and sisters.</li></ol>			8. Applicant's brothers and sisters: List all, including half/step brothers and sisters. (cont'd)	
Relationship to applicant:		Relationship to applic	Relationship to applicant:	
First Name:	Middle Name(s):	First Name:	Middle Name(s):	
Surname:		Surname:		
Date of birth:		Date of birth:		
Relationship to applicant	t:	Relationship to applic	cant:	
First Name:	Middle Name(s):	First Name:	Middle Name(s):	
Surname:		Surname:		
Date of birth:		Date of birth:		
Relationship to applicant	t:	Relationship to applic	cant:	
First Name:	Middle Name(s):	First Name:	Middle Name(s):	
The traine.	Pridate Name(s).	Thistitume.	Middle (Varifety).	
Surname:		Surname:		
Date of birth:		Date of birth:		
Relationship to applicant	t:	Relationship to applic	cant:	
	ACTION AND ACTION			
First Name:	Middle Name(s):	First Name:	Middle Name(s):	
Surname:		Surname:		
Date of birth:		Date of birth:		



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# Strictly Confidential Bingo centre operator's licence – sole trader/partnership

<ol><li>Applicant's children: List all, including step and adopted children.</li></ol>		<ol><li>Applicant's children: List all, including step and adopted children. (cont'd)</li></ol>	
Relationship to applicant:		Relationship to applicant:	
First Name:	Middle Name(s):	First Name:	Middle Name(s):
Surname:		Surname:	
Date of birth:		Date of birth:	
Relationship to applicant:		Relationship to applic	cant:
First Name:	Middle Name(s):	First Name:	Middle Name(s):
Surname:		Surname:	
Date of birth:		Date of birth:	
Relationship to applicant:		Relationship to applic	cant:
First Name:	Middle Name(s):	First Name:	Middle Name(s):
Surname:		Surname:	
Date of birth:		Date of birth:	
Relationship to applicant:		Relationship to applic	cant:
First Name:	Middle Name(s):	First Name:	Middle Name(s):
Surname:		Surname:	
Date of birth:		Date of birth:	
Date of birth.		Date of biltin.	

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## Bingo centre operator's licence – sole trader/partnership

## **Racing and Gambling History**

- 10. (a) Other than in Victoria, have you ever applied, either personally or via a business association\* (ie. as a director or company secretary of a company), for any racing or gambling industry licence, approval, authorisation or registration?
  - \*Business Association includes a partnership, joint venture, collaboration or similar relationship, however described.

This includes any association you have where you are or were a director or company secretary of a company or an office holder of an incorporated association either in or outside of Australia. A business association may be with a person, body or association.
YES NO
If <b>NO</b> , proceed to Q11.
If <b>YES</b> , in respect of each application complete (a) & (b) below and proceed to Q11.
10. (b) If the application was granted/approved or is still pending, provide details below:
Type of licence, approval etc:
Licence No. (if known):
Name of Racing/Gaming Regulator (if known):
Name shown on licence, approval etc:
Licence/Approval Association dates (dd/mm/yyyy):
to
10. (c) If the application was refused or withdrawn, provide details below:
Type of licence, approval etc:
Date of application (mm/yyyy):

11. (b) Do you have any business or personal relationships known criminals?	with
State or country of operations:	
Entity associated with:	
Type of association:	

11. (a) Do you have any other associations within the gambling

industry?If yes, please provide

NO

If YES, please provide details:

## **Other Regulatory History**

NO

YES

YES

12. (a) Have you personally, or any entity that you have been an officer of, ever been the subject of disciplinary action, regulatory breach, enforcement action or had an application for any licence or permit refused? Have you personally ever been disqualified from involvement in the management of an entity?

f <b>NO</b> , proceed to Q13. f <b>YES</b> , provide the following details:		
Number of occurrences:		
Type of licence, approval etc.		
_icence No. (if known)		
Name of gaming regulator (if known)		
Jurisdiction*		

\* "Jurisdiction" means the State or Territory and, if outside Australia, the country and locality



YES

attachment page.

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Name of Racing/Gaming Regulator (if known):

NO

Provide reason for refusal or withdrawal of request on an

Have further details been provided on an attachment page?





# Bingo centre operator's licence – sole trader/partnership

12. (b) Is there any regulatory investigation underway against an entity you are associated with?  YES NO	14. Have you been a member of or been employed by the Victorian Gambling and Casino Control Commission or its predecessors?
TES NO	YES NO
If YES, please provide details:	
	If <b>NO</b> , proceed to Q15.
	If <b>YES</b> , provide details below:
	Position Held:
	Date finished (mm/yyyy):
12. (c) If the application was refused or withdrawn, provide details below:	
Type of licence, approval etc.	15. Have you personally, or any entity that you have been an officer of, ever been investigated by a regulatory body or law enforcement agency? (e.g. ASIC, RIA, APRA, ACCC.)
Licence No. (if known)	YES NO
Date of application (mm/yyyy):	If <b>NO</b> , proceed to Q16.
Take of appreciation (min yyyy).	If <b>YES</b> , provide details below:
Name of Gambling Regulator (if known):	Number of occurrences:
	Type of licence, approval etc
Reason for refusal or withdrawal:	
	Licence No. (if known):
	Name of Regulator (if known):
Have further details been provided on an attachment page?	Date action taken (mm/yyyy):
YES NO	
<del>_</del>	Type of action taken and reason:
13. Have you ever been excluded from a casino, racecourse, gaming venue or online wagering provider?	
YES NO	
If <b>NO</b> , proceed to Q14.	
If <b>YES</b> , provide details on an attachment page	
Number of occurrences:	Have further details been provided on an attachment page?
The section of the se	YES NO
Have further details been provided on an attachment page?	
YES NO	* "Jurisdiction" means the State or Territory and, if outside Australia, the country and locality

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**Legal Action** 

## Bingo centre operator's licence – sole trader/partnership

Charges, Findings of Guilt and Convictions

#### 16. Have you personally, or any entity that you have been an officer of, ever been the defendant/respondent to any legal IMPORTANT INFORMATION action in the past 10 years? (including in progress) If you currently live in Australia or if you have lived in Australia during the last 10 years this form **must** be YES accompanied by your **original** National Police Certificate (NPC). Your NPC **must** be obtained not more than 3 months If NO, proceed to Q17. before this form is lodged and you must ensure that all If **YES**, provide the following details for each action: names noted in Q1(a) - (c) are advised when applying for your NPC. If all such names are not shown in your NPC, your Number of occurrences: application will **not** be accepted. The legal action was (tick appropriate box): You disclose details at Q18 of any offence **not** included in your NPC, including participation in a Diversion personal via business association Program, spent convictions, findings of guilt, suspended If via a business association, describe on an attachment page sentences, matters where a good behaviour bond is how your responsibilities or actions related to the legal action. given and/or matters where no conviction is recorded, other court orders and provide details of all outstanding Nature of legal action: charges. Failure to disclose such matters may affect your application. However, Children's Court matters more than 10 years old and non-custodial traffic matters, which are those for which a penalty other than a jail sentence or community based order was given, are **not** matters which you are required to disclose at Q18. Plaintiff: In addition, if you currently live outside Australia or you have lived outside Australia for more than 12 months Jurisdiction\*: during the last 10 years you are requested to seek an equivalent report from the relevant Police Agency in that jurisdiction\*. An equivalent report, which must be Result/Settlement (indicate here if not finalised): an original document or a certified copy of the original document, would be expected to reveal details in relation to any convictions, findings of guilt (either with or without Court or tribunal where matter was or is being heard conviction) and any matters still outstanding against you. (if applicable): 17. Have you only lived in Australia during the last 10 years? Case no. issued by court/tribunal (if known): YES If YES, to Q17 an NPC must be provided. Date of delivery of judgement (if known, dd/mm/yyyy): If **NO**, you are required an NPC if you have lived in Australia at any time in the last 10 years and also provide an equivalent report from the relevant Police Agency which is an original document or a certified copy of the original document. If a matter has been finalised you **must** provide a **copy** of independent documentation confirming the court outcome If an equivalent report is not enclosed, provide an explanation or, if settled out of court, a **copy** of the settlement agreement, on an attachment page. regardless of whether any terms of the agreement are confidential. Copy of the court outcome or settlement Have further details been provided on an attachment page? agreement attached? YES NO YES Have further details been provided on an attachment page? \* "Jurisdiction" means the State or Territory and, if outside Australia, the country and locality YES NO Victorian Gamblina T: 1300 599 759 E: contact@vgccc.vic.gov.au and Casino Control

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# Bingo centre operator's licence – sole trader/partnership

18. (a) Have you ever been charged with, or found guilty of, a criminal offence, or been investigated by a law enforcement agency for an alleged offence against you, that is not recorded on your attached Police documentation?  YES  NO  Number of occurrences:  18. (b) Have you ever participated in a Diversion Program?	20. Are any individuals or entities entitled to receive from the applicant, directly or indirectly, any compensation (excluding wages and salaries), benefit or rents based on a percentage or share of the proceeds of bingo? (e.g. rent payable on a percentage of gross or net bingo turnover)  YES  NO  If NO, proceed to Q21.  If YES, provide details below:
YES NO	
If <b>NO</b> , Q18(a) and (b), proceed to Q19.	
If <b>YES</b> , to Q18(a) or (b), provide details below in relation to each matter.	
Number of occurrences:	<b>Note:</b> Any entity or person named in response to Q20 <b>must</b> complete an associate form.
Nature of Offence/Charge:	Have further details been provided on an attachment page?
	YES NO
Date (dd/mm/yyyy):	21. Provide details of the proposed management structure of the operations of the bingo centre. Include details of any existing or proposed management contract arrangements and the names and positions of personnel proposed to manage the operations of the bingo centre.
Jurisdiction*:	
Result of Hearing or other Disposition (if known)	
	Have further details been provided on an attachment page?  YES NO
Have further details been provided on an attachment page?	IMPORTANT INFORMATION
YES NO  Establishment of Associates	Historical Personal Name Extract from the Australian Securities and Investments Commission (ASIC) and/or Equivalent Report from Other Jurisdictions*
19. How will the profits be distributed? (e.g. dividends to shareholders, capital reinvestment plans, etc)	Regardless of your place of residence, you are required to provide an Historical Personal Name Extract from ASIC (a copy will not be accepted). If you are not recorded on ASIC's database you will be provided with a letter to that effect. In addition, if you have ever been a director or company secretary of a company registered in a jurisdiction outside Australia, you are requested to submit an equivalent report to the ASIC Historical Personal Name
Have further details been provided on an attachment page?  YES NO	Extract from the regulatory authority in each of those jurisdictions with this form.
* "Jurisdiction" means the State or Territory and, if outside Australia, the country and locality  Victorian Cambling T: 1300 599 759 F: contact@vaccovic.gov.gu	22. (a) Is your Historical Personal Name Extract from ASIC enclosed?  YES  NO

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# Bingo centre operator's licence – sole trader/partnership

22. (b) Have you ever been a director or company secretary of a company registered in a jurisdiction* outside Australia?	If <b>NO</b> , proceed to Q25. If <b>YES</b> , provide details below.
YES NO	
If <b>NO</b> , proceed to Q23.	
If <b>YES</b> , is an equivalent report from the regulatory authority in each of those jurisdictions attached?	
YES NO	Have further details been provided on an attachment page?
If <b>NO</b> , provide reasons why an equivalent report from the regulatory authority in any of those jurisdictions* has not been enclosed on an attachment page.	YES NO  25. Has your business/trading name changed in the last 3 years?
Have further details been provided on an attachment page?	
YES NO	YES NO
	If <b>NO</b> , proceed to Q26.
IMPORTANT INFORMATION	If <b>YES</b> , provide details below.
Q23 relates to any business interests, business associations (see definition at Q10) directorships or partnerships (either	Name changed from:
within or outside Australia), not disclosed in your ASIC Extract or any equivalent report. When completing Q23	Name changed to:
you must disclose details of:	
<ul> <li>All directorships (either within or outside Australia), including positions of director, secretary etc, you hold</li> </ul>	Date of change (dd/mm/yyyy):
or have resigned from (whether or not the company is	
trading) during the last 3 years; and	Name changed from:
<ul> <li>All business interests or partnerships you have been involved in (either within or outside Australia), including</li> </ul>	
provision of finance of A\$50,000 or more in relation to any business dealing during the last 3 years.	Name changed to:
23. List below any business interests, business associations, directorships or partnerships (either within or outside	Date of change (dd/mm/yyyy):
Australia), NOT disclosed in your Extract from ASIC or any	
equivalent report:	Have further details been provided on an attachment page?
	YES NO
	26. Are you making this application in your capacity as trustee for any Trust?
	YES NO
Have further details been provided on an attachment page?	If <b>NO</b> , proceed to Q27.
YES NO	If <b>YES</b> , provide the following details:
24. Have you operated or do you intend to operate under any	<b>26. (a)</b> Name(s) of Trust:
business name/s?	
YES NO	Address:
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# Bingo centre operator's licence – sole trader/partnership

<b>26. (a)</b> Type of Trust (tick one only):	<b>Note: All</b> beneficiaries or unit holders identified at Q26(d) <b>must</b> complete an Associated Entity or Associated Individual
Discretionary Trust Unit Trust	form as appropriate.
A copy of the Trust Deed <b>must</b> be provided. Is a copy of Trust Deed attached?	Financial Particulars
	27. Are you the personal guarantor for someone else's debt or loc
YES	YES NO
<b>26. (b)</b> List below details of the persons and/or entities that are	If <b>NO</b> , proceed to Q28.
beneficiaries or unit holders of the Trust:	If <b>YES</b> , is any person, including any corporation, in respect
Full Name:	of whom you have given a guarantee in default of any agreements with respect to payment of a debt or loan?
Tick appropriate box Company Person	Number of occurrences:
% of Ownership: Income:	YES NO
	If <b>NO</b> , proceed to Q28.
Full Name:	If <b>YES</b> , provide details on an attachment page.
	Have further details been provided on an attachment page?
Tick appropriate box Company Person	YES NO
% of Ownership: Income:	
	IMPORTANT INFORMATION
	Financial Institution letter  The Financial Institution letter (see Attachment 1) must be
Full Name:	forwarded to the applicant's major financial provider for completion and submission as part of this application.
Tick appropriate box Company Person	28. Is a Financial Institution letter from the major financial
% of Ownership: Income:	provider attached?
	YES NO
26. (c) Specify which of the beneficiaries/unit holders of the	IMPORTANT INFORMATION
Trust received 10 per cent or more of the Trust's income distribution in any one of the last three (3) years:	You <b>must</b> obtain a Credit Report if:
distribution in any one of the last times (a) years.	• you currently live in Australia; or
	<ul> <li>you do not currently live in Australia but have lived in Australia at any time during the last 10 years; or</li> </ul>
	<ul> <li>you are or have been during the last ten years a director</li> </ul>
2/ (d) Of the Truck have friends (unit halders identify the	or officeholder of an Australian company.
26. (d) Of the Trust beneficiaries/unit holders, identify those who, by virtue of the Trust Deed have voting rights enabling	If your circumstances do not meet the criteria noted above,
them individually or as a group to remove/ change the	a Credit Report is <b>not</b> required. <b>Note:</b> If you live or have lived outside Australia for at least 12 months during the
Trustee or to influence the decisions of the Trustee.	last 10 years you are requested to submit an equivalent
	report from the relevant agency in that jurisdiction*.
	You <b>must</b> ensure that <b>all</b> names noted in Q1(a)-(c) are advised when applying for your Credit Report. If any
	such names are not shown in your Credit Report, your
Have further details been provided on an attachment page?	application will <b>not</b> be accepted.
VES NO	* "Jurisdiction" means the State or Territory and if outside Australia

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the country and locality



# Bingo centre operator's licence – sole trader/partnership

29. Have you enclosed your Credit Report and/or an equivale	
report from a relevant overseas jurisdiction*?  YES NO	If <b>YES</b> , complete the following and provide details of circumstances leading to bankruptcy/arrangement proceedings on an attachment page.
If <b>NO</b> , proceed to Q30.	Number of occurrences:
If <b>YES</b> , provide reasons why a Credit Report and/or an equivalent report from a relevant overseas jurisdiction has not been enclosed on an attachment page.	Date of Bankruptcy/Arrangement (dd/mm/yyyy):
Have further details been provided on an attachment page	Date of Discharge/Completion (proposed date, dd/mm/yyyy):
YES NO	
30. Other than disclosed on your Credit Report, are you in defo of any debt repayment or loan (including less than \$5,000)	Cortificate of Discharge From Pankruptsy must accompany
YES NO	Is a copy enclosed?
If <b>NO</b> , proceed to Q31. If <b>YES</b> , complete the following:	YES
Number of occurrences:	Name of Trustee:
Financial Institution or creditor:	
	Address:
Total amount owing:	
	31. (b) Are bankruptcy or any like proceedings pending?
Total amount in default:	YES NO
Number of days payment is overdue:	If <b>NO</b> , proceed to Q32.
Tromber of days payment is overage.	If <b>YES</b> , provide details of circumstances leading to these proceedings on an attachment page.
Financial Institution or creditor:	— Have further details been provided on an attachment page?
	YES NO
Total amount owing:	TES NO
Total amount in default:	32. Have you ever been an officer of an entity that has been wound up, placed into liquidation, had a receiver, controller, administrator or agent for a mortgage appointed, entered int a scheme of arrangement, or involved in similar proceedings?
Number of days payment is overdue:	YES NO
	If <b>NO</b> , to Q32, proceed to Q33.
Have further details been provided on an attachment page  YES NO	e? If <b>YES</b> , to Q32, in relation to each matter complete the following and provide details of circumstances leading to proceedings on an attachment page.
31. (a) Other than disclosed on your Credit Report, have you	Number of occurrences:
personally ever been subject to bankruptcy or any insolver	Company/Incorporated Association name:
arrangements?	
YES NO	Type of proceedings:
* "Jurisdiction" means the State or Territory and, if outside Australia the country and locality	a,

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# Bingo centre operator's licence – sole trader/partnership

32. (continued)	34. Copies of my taxation returns and notices of assessment for
Commencement date (dd/mm/yyyy):	the three most recent completed financial years are enclosed.  YES NO
Details of administrator, liquidator, receiver, controller, regulatory body or law enforcement agency:  Name:  Telephone number:	IMPORTANT INFORMATION  Requirements for an applicant purchasing the business or freehold  Where an applicant is purchasing the business/freehold relating to this application, a copy of the contract of sale, details of the source of funding for the purchase and documentary evidence in support of the funding arrangements must be provided.
Have further details been provided on an attachment page?  YES NO  IMPORTANT INFORMATION  A list of the applicant's creditors, stating the name of the	35. Have you purchased, or are you proposing to purchase, the business and/or freehold property that relate to this licence application?  YES  NO
creditor, amount owing and number of days debt has been owed must be attached. The list should be completed as at the end of the latest calendar month and be <b>certified</b> by the applicant as to its accuracy.	If <b>NO</b> , proceed to Q36.  If <b>YES</b> , is relevant documentation as noted above attached?  YES NO
33. Is a listing of your creditors attached?  YES NO	36. Have you ever been disqualified from acting as an office holder of a company or are any like proceedings pending?
If <b>YES</b> , proceed to Q34.  If <b>NO</b> , provide an explanation below:	YES NO If <b>NO</b> , proceed to Q37.
	If <b>YES</b> , provide details below:  Date of disqualification (day/month/year):
Have further details been provided on an attachment page?  YES NO	Jurisdiction*:  Reason for disqualification/proceedings:
IMPORTANT INFORMATION  Copies of your taxation returns and notices of assessment for the three most recent completed financial years must be provided, which should include the balance sheet and profit and loss (trading) statement of your business (if any). If the date of application is more than six months from the end of the most recent completed financial year, you must also provide a balance sheet and profit and loss statement covering the period from the most recent completed financial year to the date of application.	Have further details been provided on an attachment page?  YES NO  * "Jurisdiction" means the State or Territory and, if outside Australia,

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# Bingo centre operator's licence – sole trader/partnership

37. Statement of assets as at:	(dd/mm/yyyy)	
List all assets (A\$) at the appropriate line below. I recent as possible and within the past 12 months. facto according to beneficial ownership.		
ASSETS:	Applicant	Spouse/de facto
Cash on hand		
Cash at financial institutions (see Schedule A)		
Accounts receivable (See Schedule B)		
Shares and fixed interest securities (See Schedule C	2)	
Business investments (See Schedule D)		
Real estate (See Schedule E)		
Other assets (See Schedule F)		
TOTAL ASSETS		
38. Statement of all liabilities as at:  List all liabilities (A\$) at the appropriate line below date as recent as possible and within the past 12 spouse/de facto according to personal share of li	months. Joint liabilities must be d	e of this statement, which should be a
LIABILITIES:	Applicant	Spouse/de facto
Accounts payable		
Taxes payable		
Unsecured loans (see Schedule G)		
Secured loans (mortgages) (see Schedule H)		
Other liabilities (see Schedule I)		
TOTAL LIABILITIES		
NET WORTH (total assets less total liabilities)		
CONTINGENT LIABILITIES*(See schedule J)		
* Contingent liabilities are potential debts that could be incurr  39. Source of funds for past five (5) years  39. (a) Australian tax year ended 30 June		pu have acted as loan guarantor
	Applicant	Spouse/de facto
Gross salary		
Interest		
Dividends		
Trust/partnership distributions		
Other income		
TOTAL GROSS INCOME		
LESS DEDUCTIONS		
TAXABLE INCOME		

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# Bingo centre operator's licence – sole trader/partnership

<b>39. (b)</b> Australian tax year ended 30 June		(insert applicable year)
	Applicant	Spouse/de facto
Gross salary		
Interest		
Dividends		
Trust/partnership distributions		
Other income		
TOTAL GROSS INCOME		
LESS DEDUCTIONS		
TAXABLE INCOME		
<b>39. (c)</b> Australian tax year ended 30 June	Applicant	(insert applicable year)  Spouse/de facto
Gross salary		
Interest		
Dividends		
Trust/partnership distributions		
Other income		
TOTAL GROSS INCOME		
LESS DEDUCTIONS		
TAXABLE INCOME		
<b>39. (d)</b> Australian tax year ended 30 June		(insert applicable year)
	Applicant	Spouse/de facto
Gross salary		
Interest		
Dividends		
Trust/partnership distributions		
Other income		
TOTAL GROSS INCOME		
LESS DEDUCTIONS		
TAXABLE INCOME		
<b>39. (e)</b> Australian tax year ended 30 June		(insert applicable year)
	Applicant	Spouse/de facto
Gross salary		
Interest		
Dividends		
Trust/partnership distributions		
Other income		
TOTAL GROSS INCOME		
LESS DEDUCTIONS		
TAVADI E INCOME		

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### SCHEDULE A - Cash at financial institutions

List below all accounts, foreign and domestic, maintained by you solely or in conjunction with another person(s).

Name and address of financial institute	Name of person/s appearing on account	Account number	Date opened (dd/mm/yyyy)	Interest rate	Types of accounts	Balance at current date

#### SCHEDULE B - Accounts receivable

List below all accounts receivable held by you solely or in conjunction with another person(s). For those not solely held by you, indicate the percentage (%) you hold.

Name and address of debtor	Date incurred (dd/mm/yyyy)	Original amount	Unpaid balance	% held	Payment/ period	Interest rate	Maturity date (dd/mm/yyyy)	Purpose	Collateral





#### SCHEDULE C - Shares, Fixed Interest Security (bonds)

List below the information requested for all shares and bonds held or controlled by you. Whenever interest exists through a trust/mutual fund or holding company, the shares held by such trust/mutual fund or holding company need not be listed. Indicate publicly traded shares and bonds by an asterisk.\*

Issuer	Types	Number of Shares or units	Purchase price	Date of purchase (dd/mm/yyyy)	Name in which held	Market value

#### SCHEDULE D - Business investment

List below the information requested regarding any business investment in which any direct, indirect, vested, or contingent interest is held by you, along with the names of all persons or entities that share a direct, vested or contingent interest therein. This should include but not be limited to joint ventures, partnerships, sole proprietorships and corporations. For those not solely held by you, indicate the percentage (%) you hold.

Entity	Type of entity	No. of shares* or units	% held	Purchase price	Date of purchase (dd/mm/yyyy)	Name in which held	Persons or entities sharing interest and percentage ownership	Market value





#### SCHEDULE E- Real Estate

List below the information requested regarding any real property in which any direct, vested, or contingent interest is held by you, along with the name of persons or entities who share direct, indirect, vested or contingent interest therein. For those not solely held by you, indicate the percentage (%) you hold.

Address/location	Туре	Size	Purchase price/ improvements at cost	% held	Date of purchase (dd/mm/yyyy)	Other owners	Income	Market value

### SCHEDULE F – Other assets

List below the information requested for all other assets held by you, (i.e. automobiles, personal property, cash surrender value of life insurance policies, pension plans, etc.).

Type of asset	Purchase price	Date of purchase (dd/mm/yyyy)	Market value	Other information





### **SCHEDULE G - Unsecured loans**

List below the information requested for all unsecured loans payable for which you are solely or partly obligated. If partly obligated, list percentage (%) of obligation.

Name and address of creditor	Date of incurred (dd/mm/yyyy)	Original amount	Unpaid balance	% of obligation	Payment/ period	Interest rate	Maturity date (dd/mm/yyyy)	Purpose	Collateral

### **SCHEDULE H - Secured loans**

List below the information requested for all secured loans payable for which you are solely or partly obligated. If partly obligated, list percentage (%) of obligation.

Date of incurred (dd/mm/yyyy)	Original amount	Unpaid balance	% of obligation	Payment/ period	Interest rate	Maturity date (dd/mm/yyyy)	Purpose	Collateral
								Date of incurred (dd/mm/yyyy)  Original amount  Date of incurred (dd/mm/yyyy)  Date of incurred (dd/mm/yyyyy)  Date of incurred (dd/mm/yyyyyy)  Date of incurred (dd/mm/yyyyy)  Date of incurred (dd/mm/yyyyy)  Date of incurred (dd/mm/yyyyy)  Date of incurred (dd/mm/yyyyyy)  Date of incurred (dd/mm/yyyyyy)  Date of incurred (dd/mm/yyyyyyyyyyyyyyyyyyyyyyyyyyyyyyyyy





#### SCHEDULE I - Other liabilities

List below the information requested for any other indebtedness for which you are solely or partly obligated. If partly obligated, list percentage (%) of obligation.

Name and address of creditor	Date of incurred (dd/mm/yyyy)	Original amount	Unpaid balance	% of obligation	Payment/ period	Interest rate	Maturity date (dd/mm/yyyy)	Purpose	Description of liability	Collateral

## **SCHEDULE J – Contingent liabilities**

List below the information requested for all contingent liabilities for which you are solely or partly obligated. If partly obligated, list percentage (%) of obligation.

Name and address of creditor	Date of incurred (dd/mm/yyyy)	Original amount	Unpaid balance	% of obligation	Payment/ period	Interest rate	Maturity date (dd/mm/yyyy)	Purpose	Collateral	Persons liable in addition to you





## SCHEDULE K - Directorships/Secretary

Please list any current directorships or where you are a Secretary.

Entity Name	Role	Business Description





## Bingo centre operator's licence – sole trader/partnership

#### IMPORTANT INFORMATION

#### **Code of Conduct**

A person registered with the VGCCC as a Bingo Centre Operator must have a Responsible Gambling Code of Conduct (Code) as part of the registration application.

The VGCCC may not approve a registration without a compliant code and your application will not be finalised until a code is lodged. A Bingo Centre Operator code must refer to the Ministerial Direction which set out the matters which must be contained in a Code. The Ministerial Direction is available on the VGCCC website.

## **Responsible Gambling Code of Conduct**

- 40. In regard to the Code, one of the following documents must be attached to this application:
  - A statement confirming that an existing Code developed by an industry peak body has been adopted (refer to Attachment 5); or
  - Where the applicant has amended an existing Code, a copy of that amended Code; or
  - Where the applicant has developed its own Code, a copy of that Code.

Is one of the above documents attached?

	YES		NO
ı			

## **Advertising requirements**

41. You are required to publish a copy of your application to run bingo within 14 days of submitting your application.

I have attached a copy
I will forward a copy

## **IMPORTANT INFORMATION**

An applicant must provide the relevant responsible authority within the meaning of the *Planning and Environment Act* 1987, copies of the application pages (pages 4 and 5). The application pages notify the responsible planning authority of the application for a bingo centre operator's licence and provide it with the relevant information concerning the application. Evidence of planning authority notification must be forwarded to the VGCCC immediately as it occurs. In addition, a **copy** of the planning permit used by the local planning authority must be attached.

42. (a) Have you provided the relevant responsible authorit	ty
with copies of the application pages?	

If <b>YES</b> , is evidence of planning authority notification attached?
YES NO
If <b>NO</b> , you <b>must</b> forward evidence of planning authority notification to the VGCCC immediately notification occurs.
42. (b) Is a copy of the planning permit issued by the local planning authority attached?
YES NO
If <b>NO</b> , you must forward a copy of the planning permit issued by the local planning authority to the VGCCC within 7 days of receiving it.
Details of bingo centre premises
43. Bingo centre contact details:
Premises Phone No:
Bingo Centre Premises Email Address:
Full name of owner of the premises:
Address of owner:
Owner's Telephone no. (BH):
Owner's Telephone no. (AH):

**Note:** Any entity or person named in response to Q43 **may** be required to complete an Associated Entity or Associated Individual form, as appropriate.





## Bingo centre operator's licence – sole trader/partnership

<b>44.</b> (a) Is evidence of proof of tenure (i.e. a copy of the title or the lease agreement) for the bingo centre premises attached?		
YES NO		
44. (b) Is a copy of floor plans (scale 1:50) detailing the location of the caller's podium, display boards, playing area, safe/ storage facilities for bingo tickets and money, toilets, catering facilities etc attached?		
YES NO		
44. (c) Provide details below in relation to the security arrangements for bingo tickets:		
44. (d) Provide details below in relation to the procedures for the handling and storage of money:		
44. (e) Provide details below in relation to the location of safe/ storage facilities for money:		
44. (f) Provide details below in relation to the equipment to be used:		
Have further details been provided on an attachment page?		
YES NO		

## **Fee Payment**

### IMPORTANT INFORMATION

Applications must be accompanied by the relevant fee. Please note that once an application has been registered, the application fee is non-refundable. To confirm the current fee, refer to the 'Gambling fees' fact sheet on our website. The application fee can be paid by:

• credit card (Visa or MasterCard).

Please lodge your completed application with the VGCCC and we will contact you directly to arrange payment if your application is accepted.

**Privacy** – the VGCCC is committed to responsible and fair handling of personal information consistent with the *Policy and Data Protection Act 2014* and its obligations under the *Gambling Regulation Act 2003*. Credit card details will be destroyed once your payment has been processed.



## **Financial Information Release Form**

Gambling Regulation Act 2003

In the n	natter of this application for a bingo centre operator's licence by:	
Name:	(Full name of applicant - print name)	
		of

Address: (Full address of applicant)
('applicant')

The applicant hereby authorises all *persons* who receive this *financial information release form* from the Victorian Gambling and Casino Control Commission (the VGCCC) and its staff to undertake the *authorised actions* for the *authorised purposes* as set out below:

#### **AUTHORISED ACTIONS**

- 1. To allow the VGCCC to inspect and obtain a copy of any document, record or correspondence in the possession or under the control of the person, which contains information pertaining to the applicant (or to the applicant and another person and to any subsidiary, related body corporate, trust or partnership to which the applicant was a party), including but not limited to:
  - any loan information
  - any information relating to an account held with a financial institution (passbook, statement or other), including information relating to withdrawals, deposits, transfers and balances
  - any information (including trust account information) of any solicitor, accountant, real estate agent or other fiduciary.
- **2.** To answer written or verbal queries of, and to provide information (by any means) to the VGCCC to undertake the authorised actions, about the financial resources of the applicant.

### **RELEASE**

In consideration of a bank, other financial institution, solicitor, accountant, financial adviser or any other person or organisation who has lent money to or borrowed from the applicant providing any of those particulars recorded against the applicant as detailed above under the heading 'Authorised actions', **I hereby release** the VGCCC to the full extent of the law and against any claim or demands of any kind and any actions, suits, proceedings, claims, demands, costs and expenses whatsoever which may be taken or made in respect of the use or misuse of the information obtained out of this authorisation.

### **AUTHORISED PURPOSES**

To enable the VGCCC to be satisfied that the applicant and each of its associates is of sound and stable financial background and that, in conducting on-going monitoring, those financial resources continue to be desirable and satisfactory. This authorisation commences on the date below and continues until the later of:

- the VGCCC considers that the applicant no longer holds a bingo centre operator's licence; or
- the expiry of any bingo centre operator's licence (if granted).

Authorised Officer's signature	
	Dated (dd/mm/yyyy)

## NOTES

- 1. A photocopy of this form will be considered as effective and as valid as the original.
- 2. A reference in this *financial information release form* to the VGCCC includes a reference to a member of its staff and any other person appointed in writing by the VGCCC.





# Consent for Release of Information of Law Enforcement Agencies

Gambling Regulation Act 2003

In the matter of this application for a bingo centre operator's licence	ce by:
Name: (Full name of applicant - print name)	of
	OI
Address: (Full address of applicant)	
	('applicant')
CONSENT	
I consent to the VGCCC carrying out all probity investigations in rela	ation to me and my businesses including, but not limited to:-
(a) inspection of criminal, intelligence or other records kept or mai	ntained by:
Australian Federal Police;	any crime investigation body in any jurisdiction; and
<ul><li>any casino regulatory body in any jurisdiction;</li><li>any corporate regulatory agency in any jurisdiction;</li></ul>	<ul><li>any casino regulatory body;</li><li>any police force of any jurisdiction in any state, country</li></ul>
<ul> <li>any government agency;</li> </ul>	<ul> <li>any court or administrative region.</li> </ul>
<ul> <li>any gaming regulatory body in any jurisdiction (collectively referred to as 'law enforcement agencies')</li> </ul>	
(b) Release of particulars of any convictions, findings of guilt or otl	per information recorded against me by the law enforcement
agencies including, without limitation:-	ter mormation recorded against me by the law emoreciment
details of all prosecutions, including acquittals and matters v	withdrawn or dismissed and all findings of guilt, whether or not
<ul><li>a conviction was recorded;</li><li>matters or charges still outstanding;</li></ul>	
<ul> <li>law enforcement agencies intelligence howsoever obtained;</li> </ul>	
any other matters recorded as arising either in Victoria or els	
the Gambling Regulation Act 2003.	my application for approval as a bingo centre operator under
RELEASE	
Upon signing this consent, the applicant hereby releases the VGCC	
or contractors to the full extent of the law and against any claim or claims, demands, costs and expenses whatsoever which may be to	
obtained out of this consent, including particulars of any conviction	
relate to the applicant.	
ACKNOWLEDGEMENT	
I acknowledge having read and understood the terms of the consenbefore signing this consent.	t and have noted that independent legal advice may be sought
This consent commences on the date below and continues until the l	ater of:-
• the VGCCC considers that I am no longer a bingo centre operator	or; or
• the expiry of any bingo centre operator's licence (if granted).	
EXECUTION AS A DEED	
Signature of applicant:	
	Dated (dd/mm/yyyy)
Signature of witness:	Printed name of witness (any adult can be a witness)





## **Attachment page**

## NOTE:

The following attachment page is provided for additional information that requires more space than that provided in the original question. Precede your entry with the question number and title to which the additional information relates.

	Please copy if additional attachment pages are re	quired.
Have you used an additional attac	hment page to provide any further information?	YES NO

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# Bingo centre operator's licence - sole trader/partnership Attachment 1 - Financial institution letter

The	e Manager (Name/Address of Bank)		
	(realless of Balliy		
De	ar Sir/Madam (applicant's name)		
has	s applied to the Victorian Gambling and Casino Control Commission (the VGCCC) for a bingo centre operator's licence.		
	part of the application process, the VGCCC is performing a review of this applicant. In connection with this review, we reques at you provide the following details:		
i.	The amounts outstanding and available under all facilities made available to the applicant;		
ii.	The next review date and expiry date for each existing facility;		
iii.	The security held over each facility outlined above;		
iv.	. Whether any of the original facilities are in default of any payments of principal or interest;		
V.	The nature of any current or previous discussions between yourselves and the applicant which may materially impact upon the continuing availability of credit to the applicant or have previously resulted in alterations to the original funding facility and		
vi.	Confirm that the bank supports the application.		
	e completion of this review is an integral part of the processing of the application for a bingo centre operator's licence, d accordingly, I would appreciate your reply at the earliest convenience.		
Ple	ase forward your reply on this matter directly to the undersigned at the address listed below.		
Υοι	urs Sincerely,		
Sig	nature:		
Na	me and Position:		
Ad	dress:		
_			





# Attachment 2 – Statement of Adoption of a Responsible Gambling Code of Conduct

**Note:** This Statement must be completed only if the applicant has adopted an Responsible Gambling Code of Conduct (Code) available on the VCCCC website.

Name of code:	
Please complete the following:	
Date code adopted by applicant (dd/mm/yyyy):	
Signature of applicant:	Date (dd/mm/yyyy):
	Printed name of applicant:

